

Council Tax

Skill Seekers/Y.T.T. Enquiry Form



www.aberdeencity.gov.uk/counciltax

Name

Address

..... Postcode

Telephone No. Email address.

Council Tax No.

Please read this form carefully

If a member of your household is undergoing a training course as a Skill Seeker or a Youth Training Trainee, we may be able to give you a discount on your Council Tax Account. To find out if you qualify for a discount we need to ask some questions about the trainee. Please read the following notes and then fill in the form in **BLOCK CAPITALS** using **black ink**.

The Skill Seeker or Youth Training Trainee must satisfy the following conditions, he or she:

- must be aged under 25.
- must be undertaking a recognised course of training.

How to complete the form

If you feel that a member of your household meets the conditions noted below, we need to find out more details about that person.

There are three parts to this form

- Part 1 should be filled in by the **Skill Seeker or Youth Training Trainee**.
- Part 2 should be filled in by the **Skill Seeker or Youth Training Trainee's employer**.
- Part 3 should be signed by you as the **liable person** (the person to whom the Council Tax bill is sent)

Please use **BLOCK CAPITALS** and **black ink** when filling in the form.

Part 1 Skill Seeker or Youth Training Trainee details (to be filled in by the Skill Seeker or Youth Training Trainee)

Your full name

Your date of birth

Your employer's name

Your employer's address

This form should now be given to your employer so that part 2 (overleaf) can be filled in.
Please sign the authorisation below and hand this form to your employer as soon as possible.

I authorise my employer to give the information requested overleaf.

Signed..... Date

Remember - this form should be returned by your employer so that Part 3 overleaf can be completed.

CONTINUED OVERLEAF

(CITY) CTYV

PART 2

Employment details (to be signed by the employer)

The person named overleaf has indicated that he/she is currently serving as a Skill Seeker or Youth Training Trainee with you.

Please give details of the qualification or course that the person is undertaking:

.....
.....

Please give the date that the training course commenced

Please give the date that the training course is due to be completed:

Please print your name and position

.....

OFFICIAL STAMP

If you do not have an official stamp,
please tick this box

Signed

Date

Please state a contact name, telephone number and email address should we require further information.

.....

Email address Telephone Number

PART 3

Declaration (to be signed by the liable person)

This form has been designed to be easy to understand and simple to complete. If you have any difficulty with any part of the form or if you require further details, we would like to help you. Please contact Revenues and Benefits by telephoning the Council Tax Customer Care Section on 08456 080921, emailing us on counciltax@aberdeencity.gov.uk or by writing to us at the address shown at the bottom of the form.

I declare that the information on this form is true and correct and that I undertake to inform you of any change in circumstances as soon as the change occurs.

Signed Date

**Thank you for completing this form. Please return it immediately to Revenues and Benefits,
Aberdeen City Council, Business Hub16, Marischal College, Broad Street, Aberdeen AB10 1AB**