Council Tax reduction: Severe mental impairment

We can disregard people with a severe mental impairment for Council Tax purposes. This could mean we can reduce your bill. Not all people who are severely mentally impaired can be disregarded. Examples of those who would qualify are people suffering from either:

a) A state of arrested or incomplete development of mind which causes severe impairment of intelligence and social functioning; or

b) an injury to the brain causing severe impairment of intelligence and social functioning which appears to be permanent; or

c) Alzheimer's disease; and

They must also receive one of the benefits listed on this form, or be entitled to one of them if they had not reached pensionable age.

Their General or Medical Practitioner must confirm their condition. We will need permission from a relative or a guardian for the Council to approach the G.P.

Please download this form, complete it and scan or photograph it and return it to revs@enfield.gov.uk. In the subject of your email, please ensure that you include your Council Tax account number (if you have one) inside chevron brackets, for example <12345678>

Alternatively, please post the completed form to:

Financial Assessment
London Borough of Enfield
PO Box 63
Civic Centre
Silver Street
Enfield
Middlesex
EN1 3XW

We will deal with your application as quickly as possible and send you the result in writing.
**Council Tax reduction: Severe mental impairment**

Account number/case number: 

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**Please write in black ink**

Full name of the person to be disregarded: 

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Their date of birth: 

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Address of the person to be disregarded: 

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Please tick one or more of the following boxes to show which benefits and allowances are received by the person to be disregarded: 

- [ ] incapacity benefit
- [ ] severe disablement allowance
- [ ] attendance allowance
- [ ] disability living allowance

disability person's tax credit  
(we will need to ask you for more details)

unemployability supplement

an increase in the rate of their pension or constant attendance

Income Support which includes a disability premium on grounds which include their incapacity to work

the person or their partner receives Allowance which includes a disability grounds which include the mentally person's incapacity to work

On what date did the benefit(s) start? 

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The name and address of the general practitioner or other practitioner with medical knowledge of the person to be disregarded: 

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I confirm that the above information is correct to the best of my knowledge and belief, and I give the Council my permission to approach the medical practitioner whose name is given above.

Signed: 

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Date: 

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If you would prefer future correspondence to be sent to another person or address, please provide details:

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Account number/case number: 

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Including the person named in 1 above, how many people aged 18 or over live in the property? 

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