

## COUNCIL TAX REFUND REQUEST

### 1. PAYER DETAILS

NAME OF TAXPAYER:

PAYMENT NUMBER:

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CURRENT ADDRESS:

ADDRESS FOR WHICH REFUND CLAIMED

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### 2. REASON FOR REFUND: *Please note: The Council operates a corporate debt policy, therefore if any monies are owed elsewhere then any credit will be used to offset these.*

- |                             |                          |   |                          |
|-----------------------------|--------------------------|---|--------------------------|
| Taxpayer left district      | <input type="checkbox"/> | Taxpayer deceased                                     | <input type="checkbox"/> |
| Taxpayer received benefit   | <input type="checkbox"/> | Reduction received                                    | <input type="checkbox"/> |
| Valuation Band reduction    | <input type="checkbox"/> | Moved to new address within Borough (please transfer) | <input type="checkbox"/> |
| Bank/building society error | <input type="checkbox"/> |   |                          |
- Other – give details below:

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### 3. PAYEE DETAILS:

*Any refund will be paid directly into your bank account unless you specifically request otherwise. Please provide the necessary details below:*

SORT CODE:

BANK ACCOUNT NUMBER:

ACCOUNT HOLDERS NAME:

NAME:

ADDRESS (if different):

Email address:

TEL. NO:

TAXPAYER'S SIGNATURE:

DATE:

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