

Council Tax Disregard / Exemption for Severe mental impairment

Medical Certificate(Form A)

Part 1 - To be completed by the applicant or their representative

Part 2 - To be completed by a doctor or registered medical practitioner.

When part 1 has been completed please email this form to your doctor or any medical practitioner for the completion of part 2

Part 1

For the attention of (insert the name of the Doctor or medical practitioner)

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Applicants Details

Full Name	
Council Tax Account Number	
Home address	

The above-named person or their representative is applying for a Council Tax discount or exemption based on a severe mental impairment.

North Norfolk District Council has a duty to assess each applicant's eligibility based on criteria laid out in Schedule 1 of the Local Government Finance Act 1992, part of which includes obtaining certification from a medical practitioner.

In your capacity as a registered medical practitioner, please could you complete the following certificate confirming that, in your opinion, the above-named person is severely mentally impaired and return this form to the applicant or their representative.

Part 2

Doctor's Certificate

Council Tax: Severe mental impairment

Medical practitioner's name:			
Practice address			
I certify that in my opinion, the applicant, being:			
Applicants name			
Applicants address			
Please tick the appropriate box			
☐ Is	Effective from		
☐ Is not			
suffering from a severe mental impairment for the purposes of the Local Government Finance Act 1992			
Medical Practitioner's signature:			
Medical Practitioner's Practice stamp:			
Date:			
* When entering the effective date, please give the date from which, in your opinion, the condition became severe.			

The General Medical Services Committee of the BMA has agreed that, for the purposes of the Act, medical certificates should be issued without charge.

North Norfolk District Council will not be responsible for any charges or fees that may apply through your patient obtaining this completed medical certificate.