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# Doctor's Certificate

## Council Tax Discount application - severe mental impairment

Applicate name:

Address:

Postcode

Council Tax account number:

## What to do

This certificate will help the council decide whether the person named above should be treated as severely mentally impaired for Council Tax purposes.

You should say whether you think the applicant has a severe mental impairment of intelligence and social functioning (however caused) which appears to be permanent.

## Certificate

**Please tick the box next to the statement which matches your opinion most closely and then sign the certificate.**

[ ]  In my opinion the person named above *is* severely mentally impaired for the purposes of Council Tax. And has been so since (insert date) .........................................

[ ]  In my opinion the person named above is *not* severely mentally impaired for the purposes of Council Tax.

[ ]  In my opinion the person named above is *not* severely mentally impaired for the purposes of Council Tax.

[ ]  I cannot tell you if the person named above is severely mentally impaired.

Signed:

Date:

Full name:

Surgery or hospital name:

Surgery or hospital address:

Please send a copy of this certificate to the council office.

You should also complete the online application form and provide supporting evidence of any benefits the person gets.

Certificates can be uploaded online as part of your application.