



**Director of Financial and
Business Services**
Morag Johnston

Postal Address:
Glasgow City Council
P O Box 36
Glasgow G1 1JE

Email: Counciltax@fs.glasgow.gov.uk

Council Tax Discount Application - Apprentices

The Council Tax due on a property may be discounted to reflect the personal circumstances of the adult residents. For the purpose of the reduction adults who meet the under noted qualifying conditions shall be disregarded when counting the number of adults in the house.

If you wish to apply for discount, please complete the form overleaf, attach any confirmation requested, sign the declaration and return the form to the address shown above.

Qualifying Conditions: Apprentice

A person who, under the terms of his employment is:

1. Undertaking a programme of training leading to a qualification recognised by the National Council for Vocational Qualifications or the Scottish Vocational Educational Council.
2. Receiving a salary / allowance which is substantially less than they would receive if they had the above qualification. From 01/04/24 this can be no more than £256.00 per week.

We aim to respond to enquiries within 20 days. Please allow us this time to update our records

Visit our Council Tax website to make an online payment, manage your account or check your balance: www.glasgow.gov.uk/ct

You must tell us of any changes that may affect your Council Tax bill. Help us keep your bill right by telling us straight away.

Glasgow City Council will never telephone you asking for your bank details to refund your Council Tax

Log on to www.glasgow.gov.uk/privacy to find out how we will use your information

Glasgow City Council is an equal opportunities employer.

DISCOUNT: APPRENTICE

Address Of Property
(Include Flat Position). _____

Council Tax Reference Number. _____

Your full Name _____

Date of Birth _____

Email address _____

Phone Number _____

How Many People reside in the house? _____

TO BE COMPLETED BY THE APPRENTICE'S EMPLOYER

I confirm that the above person is taking the following training: -

Certificate / Qualification: _____

Course Name: _____

Course Start Date: ___/___/___ Course End Date: ___/___/___

Their current gross weekly wage is: £ _____

Their post qualifying gross weekly wage will be: £ _____

EMPLOYER'S STAMP	Signed	
	Position	
	Date	

DECLARATION

I declare that the information on this form is true and complete and I authorise Glasgow City Council to verify the details.

I will notify within 21 days any change in circumstances, which may affect my liability e.g., discount status no longer applies to the person in Section 1, or the number of adults in the house increases.

I understand the failure to provide this information is an offence, which may make me liable to an initial fine of £50 and £200 for each subsequent offence.

Signature of Liable Person _____ Date ___/___/___

Please note that payment should not be withheld pending the result of any Exemption/Discount application

Please return your completed form to:

Glasgow City Council, PO Box 36, Glasgow G1 1JE
or scan and email to counciltax@fs.glasgow.gov.uk