

Council Tax – Declaration of Sole or Main Residence

Council Tax Account reference

Property Address

Applicant Name

Daytime telephone number

Email Address

Sole or Main Residence Declaration

For Council Tax purposes, a person's sole or main residence is the dwelling that they regard as their principal home. To help us determine whether the above property is your sole or main residence, please answer the following questions.

1. Do you own, rent, or have access to any other property?

Yes

☐

No

☐

If yes, please provide the address(es):-

2. Where do you spend the majority of your time?

Please provide details, including the number of days per week spent at each address if applicable:-

3. Where do you keep the majority of your personal possessions?

Property stated
above

☐

Another
property

☐

If another property, please provide the address:-

4. Are you registered for Council Tax at any other address? Yes

☐

No

☐

If yes, please provide the address and Council Tax number (if known):-

5. Do you pay utility bills for another property?

Yes

☐

No

☐

(This includes gas, electricity, water, broadband or telephone services.)

If yes, please provide the address and details:-

6. What is the address / location of your employment?

Employer Name

Work address

If you work remotely, please state where you usually carry out your work:-

7. Where are you registered to vote?

Property stated
above

☐

Another
property

☐

If another property, please provide the address:-

8. Where is your GP/Doctor registered?

9. Where is your vehicle registered and insured?

Please provide copies of any documents that support your declaration, such as:-

- Utility bills
- Bank statements
- Tenancy agreement
- Mortgage statement
- Electoral registration confirmation
- Driving licence
- Vehicle registration document (V5C)
- Employment documentation

Declaration

I declare that the information provided on this form is true and accurate to the best of my knowledge. I understand that providing false information may result in a review of my Council Tax liability and further action being taken..

Signature _____

Print Name _____

Date _____

Please return this form and any supporting evidence to:-

Council Tax Team
Tewkesbury Borough Council
Gloucester Road
Tewkesbury
GL20 5TT