

**Council Tax
Members of Religious
Communities Application Form**



2 pages

Part 1

Full name of the liable person:

Address of the property:

Postcode:

Phone number:

Email:

**How many adults over 18 years live
at this address:**

Full name of the person to be disregarded:

**Name and address of the religious
community:**

Postcode:

Signature:

Date:

/ /

Part 2 This declaration must be filled in by the head of the religious community

I certify that the above person is a member of the religious community.

Date the person joined:

/ /

Your position:

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Your signature:

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Date:

/ /

You must tell us within 21 days if any of your circumstances change.

Please return this form to Wigan Council, Council Tax Offices, Moore Street East, Wigan. WN1 3DS