

CONFIDENTIAL

Allotment Garden: Application for Concessionary Rent 1st October 2015

Concessions (50% except *) apply for:-

- | | |
|---|--|
| <input type="checkbox"/> Receiving State Pension* (20%) | <input type="checkbox"/> Incapacity Benefit |
| <input type="checkbox"/> Full time Student | <input type="checkbox"/> Income Support |
| <input type="checkbox"/> Attendance Allowance | <input type="checkbox"/> Industrial Injuries Disablement Benefit |
| <input type="checkbox"/> Carer's Allowance | <input type="checkbox"/> Jobseekers Allowance |
| <input type="checkbox"/> Constant Attendance Allowance | <input type="checkbox"/> Lone Pensioner Allowance |
| <input type="checkbox"/> Disability Living Allowance | <input type="checkbox"/> Pension Credit |
| <input type="checkbox"/> Employment & Support Allowance | <input type="checkbox"/> Personal Independence Payment |
| <input type="checkbox"/> Housing Benefit | <input type="checkbox"/> War Disablement Pension |

(please tick if applicable, proof of qualification may be required on demand from Leeds City Council)

Name (in full) _____

Address _____

Post Code _____

THIS APPLICATION IS MADE IN RESPECT OF

Allotment Site: **BURLEY MODEL ALLOTMENTS** _____ Plot Number(s): _____

of which I am a tenant and I declare that the plot is cultivated by me for my personal requirements.

CONDITIONS

- The tenant of an allotment garden will not be entitled to a rent concession until the first day of October following the date of qualification of one of the above.
- A rent concession will be allowed on the first allotment plot only 250m²/300yards²

I declare that to the best of my knowledge the information I have given is correct and complete. I give the council my permission to check any information given on this form. I will tell you about changes in my circumstances which may affect the current concessionary claim.

I know that if I give false information I can be prosecuted.

Sign Name _____

Print Name _____ Date _____