



Flood Recovery Framework for Storm Babet 19th October and 25th October 2023 Domestic Dwelling

PLEASE PROVIDE INFORMATION IN THE BLANK SPACES PROVIDED

Address Information					
Council Tax Account Number					
Liable Party Name (First Person)					
Liable Party Name (Second Person – <i>if</i> applicable)					
Address of property affected by flooding					
Please note: Second homes and empty properties are not eligible under this scheme.					
Is this your sole or main residence?	Yes:				
If this was not your sole or main residence at the	No:				
time of flooding, please advise where was:	Contact de	oto:lo			
	Contact de	etalis			
Email					
Mobile number					
Landline					
Bank details for payment of the Community Grant if eligible	Name of				
Please provide your most recent bank statement showing the banks logo, address, your name, address, bank account name, sort code and bank <i>account</i> number (you can block out any transactions)	Bank account name (as it appears on your statement)				
	Sort Code				
	Bank account number				
Impact of the flooding					
Date and time that property flooded	Date:				
	Time:				
Rooms affected by the flood waters					
Please provide photographs of the flooded areas. Please make sure that the room can be identified from the photograph.	Flooded gardens, garages or outbuildings will NOT usually render a household eligible to receive support under this scheme				

		unless the flooding causes wider impacts on liveability such as immerse septic tank, flooded external boilers etc		
Did your property become unliveable although it was not flooded?	Yes			
	No			
If yes, please provide the date and time and the reason that this was unliveable.	Date			
	Time			
	Reas			
What date did you leav	ve the property	Date	:	
Have you moved back into the property?	Yes			
	No			
If you have moved bac	ck in, what date was this	Date	:	
If you are still unable to property – when do yo move back in		Date		
If you have not moved you living at now	back in, what address are			
Do you have flood insurance included in your house insurance? If yes – you need to provide evidence of this		Yes		
		No		
as part of your application	Evide	ence provided:		
Have you been refused insurance due to previous flooding?	Yes			
	No			
in support of this claim collection of my/our pers Tax Flood Support and immediately at South Ko Warning – if you know	is correct. I confirm that I sonal data and that I agree to I the Community Grant £50 esteven District Council	unders my/ou 00. If a	in this form and all other information and evidence provided stand that the purpose of this form and the reasons for the purpose of this form and the reasons for the personal data being used for the assessment of the Council any information changes, I will inform the Revenues Team statement to receive either Council Tax exemption or to	
obtain the Community Tax and grant paymen	-	one el	se you risk prosecution, and the recovery of all Council	
By signing this form, you	u are agreeing that you have	e read a	and understood the above declaration	
Applicants Name:			Applicants Signature;	
Date:				

Please return your completed form and evidence to: Ctax@southkesteven.gov.uk

We must receive your form no later than 15th January 2024 in order for us to process this.