



Council Tax Department  
City of York Council  
West Offices  
Station Rise  
York  
YO1 6GA

Telephone: (01904) 551558

Email: [ctaxrefund@york.gov.uk](mailto:ctaxrefund@york.gov.uk)

## **Council Tax Refund Request Form**

Please complete this form to allow us to process a refund for a credit on a council tax account. To further expedite this process, this form can be scanned and sent by email to [ctaxrefund@york.gov.uk](mailto:ctaxrefund@york.gov.uk)

### **Council Tax Account Details**

Liable Person(s)

Payment Reference number (shown on council tax bill)

88

Address of property in credit

Contact address (if different)

### **Bank details**

Name of Bank

Account Number

Sort Code

Name of Account Holder

**DECLARATION - I declare that the information that is given is to the best of my knowledge, true and accurate. I confirm that I/we wish for the refund to be paid to the bank account detailed above.**

**Note – if more than 1 person is named on the council tax bill, all named persons must sign this form before the refund can be processed.**

Print name

Signature

Date

Contact email or phone number

Print name

Signature

Date

Contact email or phone number

Print name

Signature

Date

Contact email or phone number