

The Highland Council

Comhairle na Gàidhealtachd

Serving The Highland Community

Request to Pay Council Tax On Behalf of a Liable Person

Please complete this form using BLOCK CAPITALS and return it to:
Exchequer Operations Team, PO Box 5650, Inverness, IV3 5YX

Section 1: To be completed and signed by the representative of the liable party

I agree to pay Council Tax on behalf of:

Representative's full name and address:

Representative's status/connection to liable party:

Representative's telephone number:

Representative's email address:

Representative's signature:

Date:

Section 2: To be completed and signed by the liable party

I agree to the re-direction of my Council Tax bills to:

Liable party's full name and address:

Liable party's telephone number:

Liable party's email address:

I understand that if my representative does not pay my Council Tax, I will be responsible for payment.

Signed:

Date:

Return Address:

Operations Team, PO Box 5650, Inverness, IV3 5YX