



**We want you to help shape our scheme. Therefore please complete the following questionnaire and return it to us by Freepost to London Borough of Harrow, Freepost, P.O Box 730, Civic Centre, Harrow, Middlesex HA1 2DU.**

**Questionnaires must be returned no later than Friday, 21 September.**

With the understanding that pensioners' Council Tax Benefit will remain the same but people who are of working age and in receipt of Council Tax Benefit will all be asked to pay more toward their Council Tax bill, please answer the following questions.

If you are unsure of any of the terms used in the survey, please see the glossary on the back page of this questionnaire.

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**1. Should people who receive Council Tax Benefit who are in properties with a higher Council Tax charge be asked to pay more?**

Yes       No       Don't know

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**2. Should people receiving Council Tax Benefit be given extra benefit for a limited period to help pay their Council Tax when they start work?**

Yes       No       Don't know

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**3. Should people who are working receive more Council Tax Benefit to encourage them to increase the number of hours they work?**

Yes       No       Don't know

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**4. Should people who can't work be given more Council Tax Benefit than those who could work but are unemployed?**

Yes       No       Don't know

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**5a. Should income such as Child Benefit be included as part of someone's income when they claim Council Tax Benefit?**

Yes       No       Don't know

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**5b. Should income such as Disability Living Allowance be included as part of someone's income when they claim Council Tax Benefit?**

Yes       No       Don't know

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**6. Should other adults living in a household where the council tax payer (and their partner) claims Council Tax Benefit, be asked to pay more toward the Council Tax bill than they do now?**

Yes       No       Don't know

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**7. Second Adult Rebate is awarded to people who are not entitled to Council Tax Benefit based on their own income, but receive a rebate of up to 25% of their bill because they have other adults living with them who are on a low income. Should people who receive this rebate be asked to pay more?**

Yes       No       Don't know

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**8. Should people with savings of less than £16,000 be asked to use these savings to pay their Council Tax?**

Yes       No       Don't know

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**9. Do you think there are any groups of people in the community who would be affected more than others if everyone currently on benefit has to pay something towards their Council Tax?**

Yes (if yes go to question B)     No     Don't know

B. Who are these groups?

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C. Why do you think these groups would be affected more?

.....

.....

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**10. The Council has also identified a few groups that may be affected by these changes. These are listed below. Please could you tell me whether you think these will have a high impact, a medium impact or a low impact on each of those groups as a result of the changes to Council Tax Benefits?**

Families with children     High     Med     Low     Don't know

Lone parents     High     Med     Low     Don't know

Carers     High     Med     Low     Don't know

Part time and full  
time workers     High     Med     Low     Don't know

People who are  
disabled     High     Med     Low     Don't know

Single People and  
couples without children     High     Med     Low     Don't know

B. Why do you think the groups you have identified as high are affected more than other groups?

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**11. Should the Council create a Hardship Fund to support people suffering genuine hardship because of the changes to Council Tax Benefit?**

Yes       No       Don't know

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**12. Have you got any general comments that you wish to make about these changes?**

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.....

**About you**

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**Does your name appear on the Council Tax Bill for your household?**

Yes       No       Don't know

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**Does your household receive Council Tax Benefit?**

Yes       No       Don't know

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**Do you or your household receive any other benefits?**

Yes       No       Don't know

If yes please state which benefit .....

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**Would you say that any of the following describe your household?  
Tick all that apply**

- A family with one or two dependent children
- A family with three or more children
- A lone parent household
- A carer
- A household with full and/or part time workers
- A household that includes someone who is disabled
- A single person household or a couple without children
- None of them
- Don't know

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**Are you a service personnel or ex service personnel?**

- Yes       No

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**Are you a War Widow?**

- Yes       No

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**Monitoring Information**

Harrow Council is required by law, Equality Act 2010, to collate equality information. The collated information will not only help the Council demonstrate compliance with the law but also assist the Council to assess the impact of policies, services and decisions on all the Protected Characteristics covered by the Act and ensure our policies and services are fair and accessible. The information will also enable us to monitor our progress with regards to addressing inequality and allow our employees and service users see how we are performing on equality.

Should you wish to supply the information it will be kept confidential and separate from your consultation response and only be used for statistical analysis.

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**Your age**

- 0-15     16-24     25-34     35-44
- 45-54     65+     Prefer not to say

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**Do you consider yourself to have a disability according to the terms given in the Equality Act 2010?**

Under The Equality Act 2010, a person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities, which would include things like using a telephone, reading a book or using public transport.

- Yes               No               Prefer not to say

If "Yes" please specify:

- |   |  |
|---|--|
| <input type="checkbox"/> Communication                | <input type="checkbox"/> Learning      |
| <input type="checkbox"/> Mobility                     | <input type="checkbox"/> Visual        |
| <input type="checkbox"/> Hearing                      | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Physical                     |  |
| <input type="checkbox"/> Other (please specify) ..... |  |

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**Your sex**

- Male               Female               Prefer not to say

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**Is your gender identity the same as the gender you were assigned at birth?**

- Yes               No               Prefer not to say

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**Your religion and belief (please tick appropriate box)**

- No religion     Agnostic     Baha'i     Buddhism     Christianity
- Hinduism     Humanist     Islam     Jainism     Judaism
- Rastafarian     Sikhism     Zoroastrian     Prefer not to say
- Other (please specify) .....

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**Your sexual orientation**

- Bisexual     Gay man     Gay woman / Lesbian
- Heterosexual     Prefer not to say     Other (please specify)

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**Your ethnic group**

These are based on the 2011 Census categories but include categories to reflect the communities of Harrow and are listed alphabetically below. Please choose ONE section from A to E then tick or write in appropriate box to indicate your ethnic background

A. Asian or Asian British

- Afghan     Bangladeshi     Indian     Pakistani     Sinhalese
- Sri Lankan Tamil     Any other Asian background, please write in .....

B. Black, Black British

- African     Caribbean     Somali
- Any other Black background, please write in .....

C. Other Ethnic Group

- Arab     Chinese     Iranian     Iraqi     Kurdish
- Lebanese     Any other ethnic group, please write in .....

D. Mixed

- White & Black African     White & Black Caribbean     White and Asian  
 Any other Mixed background, please write in .....

E. White

- Albanian     British     English     Gypsy/Roma Traveller  
 Irish     Irish Traveller     Polish     Romanian     Scottish  
 Serbian     Welsh     Any other White background, please write in  
 Prefer not to say .....

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**Your marital status:**

- Civil Partnership     Married     Prefer not to say

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**Pregnancy and Maternity: Have you been pregnant and / or on maternity leave in the past two years?**

- Yes     No     Prefer not to say

**Caring Responsibilities**

A Carer is someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend, who is ill, disabled or has mental health or substance misuse problems.

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**Do you regularly provide unpaid support caring for someone?**

- Yes     No



## Glossary of terms:

- **Carers – For the purpose of Council Tax Benefit** a person who has the responsibility of caring for someone else who, because of long term illness, disability or old age, is not able to care for him or herself. Carers are usually entitled to Carer's Allowance.
- **Disabled – For the purpose of Council Tax Benefit** a person is disabled or long term sick where they qualify for a 'Disability premium' when their Council Tax Benefit is calculated. Usually, they would receive Disability Living Allowance.
- **Full-time and part-time workers – For the purpose of Council Tax Benefit** a full-time worker typically works 35 hours or more per week, whereas a part-time worker will work less hours. There is no specific number of hours which distinguishes full-time from part-time work.
- **GLA - Greater London Authority** – also known as a preceptor who receives a portion of the Council Tax collected to fund services such as the police, fire and rescue.
- **Council Tax** – Local tax set based on the property valuation. Used to fund public services.
- **Council Tax Benefit** – Helps someone on a low or no income pay their Council Tax
- **Pensioner** – someone who has reached the age for state pension credit.
- **Working age** – a person who is above 18 and has not reached the age for state pension credit.

**Please call 020 8416 8266 for a large print version of this document, or a summary of this document in your language.**

- Albanian** Nëqoftëse gjuha Angleze nuk është gjuha juaj e parë, dhe keni nevojë për përkthimin e informatave të përmbajtura në këtë dokumentë, ju lutemi kontaktoni numërin dhënë.
- Arabic** اذا كانت الانجليزية ليست لغتك الاولى وتحتاج لترجمة معلومات هذه الوثيقة، الرجاء الاتصال على رقم
- Bengali** যদি ইংরেজি আপনার মাতৃভাষা না হয় এবং আপনি যদি এই প্রচারপত্রের তথ্যগুলোর অনুবাদ পেতে চান তাহলে যে টেলিফোন নম্বর দেওয়া আছে সেখানে দয়া করে যোগাযোগ করুন।
- Chinese** 如果你主要說用的語言不是英語而需要將這份文件的內容翻譯成中文，請打註明的電話號碼提出這個要求。
- Farsi** اگر انگلیسی زبان اول شما نیست و شما نیاز به ترجمه اطلاعات موجود در این مدرک را دارید، لطفاً با شماره داده شده تماس بگیرید
- Gujarati** જો ઈંગ્લિશ તમારી પ્રથમ ભાષા ન હોય અને આ દસ્તાવેજમાં રહેલ માહિતીનો તરજૂમો (ટ્રાન્સલેશન) તમને જોઈતો હોય તો કૃપા કરી જણાવેલ નંબર ઉપર ફોન કરો
- Hindi** यदि आपको अंग्रेजी समझ नहीं आती और आपको इस दस्तावेज़ में दी गई जानकारी का अनुवाद हिन्दी में चाहिए तो कृपया दिए गए नंबर पर फोन करें।
- Panjabi** ਜੇ ਤੁਹਾਨੂੰ ਅੰਗਰੇਜ਼ੀ ਸਮਝ ਨਹੀਂ ਆਉਂਦੀ ਤੇ ਤੁਹਾਨੂੰ ਇਸ ਦਸਤਾਵੇਜ਼ ਵਿਚ ਦਿੱਤੀ ਗਈ ਜਾਣਕਾਰੀ ਦਾ ਤਰਜਮਾ ਪੰਜਾਬੀ ਵਿਚ ਚਾਹੀਦਾ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਦਿੱਤੇ ਗਏ ਨੰਬਰ ਤੇ ਫੋਨ ਕਰੋ।
- Somali** Haddii Ingiriisku uusan ahayn afkaaga koowaad aadna u baahan tahay turjumidda xog ku jirta dokumentigan fadlan la xiriir lambarka lagu siiyey.
- Tamil** ஆங்கிலம் உங்கள் தாய்மொழியாக இல்லாதிருந்து இப்பத்திரத்திலிருக்கும் தகவலின் மொழிபெயர்ப்பு உங்களுக்கு தேவைப்பட்டால் தயவுசெய்து தரப்பட்ட தொலைபேசி எண்ணில் தொடர்பு கொள்ளவும்.
- Urdu** اگر انگریزی آپ کی مادری زبان نہیں ہے اور آپ کو اس دستاویز میں دی گئی معلومات کا اردو ترجمہ درکار ہے، تو براہ کرم دیئے گئے نمبر پر رابطہ کریں۔