

Housing Benefit/Local Housing Allowance and Council Tax Reduction Application form

Office use

About this form

The Housing Benefit/Local Housing Allowance and Council Tax Reduction claim form has been specially designed to be easy to fill in. It may seem rather long, but we have to ask a lot of questions to make sure that everyone who claims gets the correct amount of benefit.

You may not have to fill in all parts of the form, but you must fill in any part that is relevant to you. Every part starts with a question to help you decide if you need to fill in that part.

Filling in the form

Please fill in the form in **black** ink. If you make a mistake, just cross it out and put the right answer next to it.

Please answer all the questions. Make sure that you tick all the relevant boxes. If you do not answer all the questions, it will take us longer to work out your benefit. Do not use correction fluids or tape.

If you need help filling in this form, please contact us at the address on the enclosed notes. The notes include phone numbers and office opening hours. Please get in contact with us so we can help you.

Proof

We need to see proof of the things you tell us about. There is a checklist at the end of the form to help you. We will tell you what we need to see. We cannot pay you benefit until we have seen the proof we have asked for. We must see original documents – we cannot accept photocopies.

If you do not have all the proof we need, return the form immediately and send the documents within 1 month. However, we cannot process your claim until you have provided all the original information to support your claim. We will keep the information you give us confidential.

If you are claiming Housing Benefit/Local Housing Allowance we will need to see your tenancy agreement, together with your rent book or rent receipts. If you are making a contribution towards a student loan, student grant or student maintenance, we will need to see proof of this as we can disregard (ignore) these amounts from your income (up to a maximum limit).

Other useful information about Housing Benefit/Local Housing Allowance and Council Tax Reduction

Changes you must tell us about

Tell us straight away if:

- any of your children leave school or leave home;
- anyone moves into or out of your home (including boarders and subtenants);
- your income or the income of anyone living with you, including benefits, changes;
- your capital or savings change by more than £200;
- you or anyone living with you becomes a student, goes on a Youth Training Scheme, goes into hospital or a nursing home, goes into prison, or gets, changes or leaves a job;
- your rent changes;
- you move;
- you or your partner are going to be away from home for more than a month;
- you receive any decision from the Home Office; or
- anything you have told us about changes.

You must tell us about these changes in writing – a phone call is not enough. **You must tell us about these changes as soon as possible.** If you don't tell us about these changes within 1 month you may lose money you are entitled to or you may get too much benefit.

You must make sure that you tell us about these changes. Don't rely on someone else to pass the message on. It is an offence not to tell us about any change of circumstances that may affect your benefit. We may take court action against you and if we pay you too much benefit, you may have to pay it back.

Local Housing Allowance

Tenants renting from a private landlord and making a new claim for Housing Benefit or who move home on or after 7th April 2008, will get Local Housing Allowance. Your benefit will be calculated using Local Housing Allowance rates. The rates are set annually each April for different size properties by The Rent Service and the rate you are entitled to is based on the number of people who live with you and their ages. Local Housing Allowance is the maximum amount that you can receive, and this will reduce depending on your income, savings and circumstances.

Under Occupancy

If you pay rent to Wiltshire Council or a Housing Association and are of working age your Housing Benefit will be reduced if you are under occupying your home as follows:

- By one room - 14% reduction
- By two rooms or more - 25% reduction.

Discretionary Housing Payments

You can apply for a discretionary housing payment if you are:

- already getting Housing benefit or Local Housing Allowance;
- and there is a shortfall between your benefit and your rent;
- and you are having difficulty paying the shortfall.

You will need to ask for an application form, and each case will be looked at and considered individually. The amount each authority can pay in this matter is limited to a yearly cash total.

Complaints procedure

If you are unhappy with the way you have been dealt with by the benefits section, please contact the council to obtain details of their complaints procedure.

Appeals

If you want to know more about your award of benefit or if you think it is wrong, you should get in touch with us within one month of the date of the award letter or we may not be able to consider any disagreement.

You can either:

- ask for an explanation;
- ask us to look again at the decision; or
- appeal against the decision – this can only be in writing. If you appeal against the decision, an independent tribunal run by the Tribunals Service will hear your appeal.

If we do not change our decision regarding your Council Tax Reduction within two months of writing to us you can appeal to a valuation tribunal.

PLEASE COMPLETE THIS FORM IN BLACK INK

For office use only

Benefit number	<input type="text"/>	Date issued	<input type="text"/>
Council Tax number	<input type="text"/>	Assessed by	<input type="text"/> Date <input type="text"/>
Property number	<input type="text"/>	Checked by	<input type="text"/> Date <input type="text"/>
Rent reference	<input type="text"/>	Date received	<input type="text"/>

A claim form for Housing Benefit/Local Housing Allowance and Council Tax Reduction

Which of the following do you need to pay?

Rent

Council Tax

Private Rent

Housing Association Rent

Wiltshire Council Rent

Council Tax

Alternate Maximum Reduction

If you are applying for Alternative Maximum Reduction **only complete parts 1,3 and 18** (pensionable age only)

Alternate Maximum Reduction is Council Tax Reduction for people who may not have a partner but who share their home with someone who:

- is 18 or over; and
- is on a low income; and
- does not pay them rent.

If you are claiming Alternate Maximum Reduction, only fill in Part 1, Part 3 and Part 18 of this form

Part 1 About you and your partner

YOU MUST ANSWER ALL QUESTIONS IN PART 1

If you have a partner, you must answer all the questions about them.

By partner, we mean someone of the opposite/same sex, who you are married/civil partners to, or live with as if you were married/civil partners.

Do you have a partner who normally lives with you? No Yes

You

Your partner

Title Mr Mrs Miss Ms

Surname

Other names

Address

Postcode

Date you moved in / /

Date of birth / /

Mr Mrs Miss Ms

Postcode

/ /

/ /

National Insurance number Letters Numbers Letter

Letters Numbers Letter

You can find this on payslips or letters from Department for Work and Pensions or HM Revenue and Customs. We cannot decide your claim if we do not have your National Insurance number.

Part 1 About you and your partner *continued*

You

Your partner

Are you living away from home at the moment? No Yes

No Yes

Tell us why you/your partner are not living at home.

When did you/your partner last live at home? / /

When do you/your partner expect to go back home? / /

Tell us where you are living at the moment.

Postcode

You

Your partner

Does anyone get Carers Allowance for looking after you or your partner? No Yes

No Yes

Please tick if you or your partner are

a student No Yes

Please state course start and end dates
Start
End

Place of study

Do you receive a loan/grant or other student award?

No Yes

Start

End

If yes, please provide evidence.

Please tick if you or your partner are

a student nurse No Yes

Please state course dates and evidence of any bursary
Start
End

Place of study

No Yes

Start

End

an apprentice No Yes

on youth training No Yes

No Yes

No Yes

in legal custody No Yes

sentence date

No Yes

sentence date

severely mentally impaired No Yes

registered visually impaired No Yes

long term sick or disabled and incapable of work No Yes

employed No Yes

No Yes

No Yes

No Yes

No Yes

Part 2 About children

You may be able to get extra benefit for children you get Child Benefit for, if they normally live with you and they are:

- under 16;
- aged 16 or 17 and registered for work or youth training; or
- aged 16 or over, but still under 20 and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ {advanced}.

Do you want to claim for any children?

No → Go to **Part 3**.

Yes Tell us about the children you want to claim for.

	Child's surname	First names	Date of birth	Sex	Is the child at school or in full-time education?		Is the child disabled/registered visually impaired?		Is the child in receipt of Disability Living Allowance?		Do you receive Child Benefit?		Do you receive maintenance? If yes, how much?		£
					Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
1			/ /		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2			/ /		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3			/ /		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4			/ /		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5			/ /		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6			/ /		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If you have more than 6 children, please use a separate sheet.

Do you pay any childcare costs for registered childcare provider?

No Yes *If 'Yes', tell us the name of the child, registration number and name of the childcare provider, and how much you pay each week.*

	Child's name	Amount each week	Name and address of childcare provider	Registration number
1		£		
2		£		
3		£		
4		£		

We will need to see proof of amounts paid, dates paid and the childcare provider's registration number.

Part 3 About other people who live with you

Part 3 of the form asks about other people who live with you:

We need to know about these people as they will affect the way we work out your benefit

- A **boarder** is someone who lives in your home, and pays you rent, which includes charges for meals.
- A **subtenant** is someone who pays you rent. The rent does not include a charge for meals.
- A **non-dependant** is someone who normally lives with you, such as an adult son, daughter, other relative or friend.

Do any adults normally live with you and your partner?

By adults we mean people over 16 who nobody gets Child Benefit for.

No → Go to **Part 4**.

Yes Tell us about all the adults, except your partner, who usually live with you. If you want to tell us about more than 3 people, use a separate sheet of paper.

If you are sending a separate sheet of paper, tick this box.

Now tell us about all the people who normally live with you and your partner.

	First person	Second person	Third person
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Date they moved in if it was within the last 3 years	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Their relationship to you	First person	Second person	Third person
	<input type="text"/>	<input type="text"/>	<input type="text"/>

For example, aunt, uncle, brother, daughter, father, grandson, mother, grandmother, stepdaughter, joint tenant, joint owner, friend, boarder, lodger or subtenant.

Are any of the people who normally live with you married/civil partners to each other or living together as if they were married/civil partners?

No

Yes Tell us their names.

is the partner of

and

is the partner of

	First person	Second person	Third person
Do they get Income Support, income-based Jobseeker's Allowance, Pension Credit or Employment Support Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Part 3 About other people who live with you *continued*

	First person	Second person	Third person
Do they get Disability Living Allowance or Attendance Allowance or are they registered visually impaired	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If a student/student nurse, please give course start and end dates and where they are studying.	Start <input type="text"/>	Start <input type="text"/>	Start <input type="text"/>
	End <input type="text"/>	End <input type="text"/>	End <input type="text"/>
	Place of study <input type="text"/>	<input type="text"/>	<input type="text"/>

Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Are they severely mentally impaired?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Are they in legal custody at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
When are they expected to come out?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are they in hospital at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

When did they go in?	<input type="text"/>	<input type="text"/>	<input type="text"/>
When are they expected to come out?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do they normally work for 16 hours or more a week?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Tell us their Gross Earnings.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

We need to see proof of all their earnings. This should be their most recent payslips or a filled-in earnings certificate.

Do they have any other income?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If 'Yes', tell us what their income is below.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
We need to see proof of all their income.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 4 About Income Support and Income-based Jobseeker's Allowance, Employment & Support Allowance (Income Related) and Pension Credit Guarantee

Are you or your partner getting or waiting to hear about a claim for Income Support or income-based Jobseeker's Allowance, Employment Support Allowance or Pension Credit Guarantee?

No → Go to **Part 5**.

Yes Answer both the questions in this part, then go to **Part 5**.

You

Your partner

Are you or your partner getting Income Support or income-based Jobseeker's Allowance, Employment Support Allowance or Pension Credit Guarantee?

No

Yes When did you start getting it?

/ /

Are you or your partner waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance, Employment Support Allowance or Pension Credit Guarantee?

No

Yes When did you claim?

/ /

No

Yes When did they start getting it?

/ /

No

Yes When did they claim?

/ /

Part 5 About being self-employed

Are you or your partner self-employed?

No → Go to **Part 6**.

Yes Answer questions on this page

If you are self-employed, we will need to see your business accounts or you will need to fill in a separate form showing your income and expenses. Normally, we will use your income and expenses to work out your benefit. If you have been trading for less than a year then we will need an estimate of your income.

You

Your partner

What kind of work do you do?

When did the business start?

/ /

What is the business address?

Postcode

Postcode

Are there any other partners in the business?

No

Yes Tell us their name and address.

Postcode

No

Yes Tell us their name and address.

Postcode

How many hours a week do you work?

Do you get a Business Start-up Allowance?

No

Yes How much? £

How often? Every

No

Yes How much? £

How often? Every

Do you pay into a private pension scheme?

No

Yes How much? £

How often? Every

No

Yes How much? £

How often? Every

Part 6 About working for an employer

Do you or your partner work for an employer? No → Go to **Part 7**.
 Yes Answer all the questions on this page.

You

Your partner

Do you or your partner have more than one job? No
 Yes How many?

No
 Yes How many?

If you work for more than one employer, tell us about all the employers on another piece of paper and send it with this form.

If you are sending a separate sheet of paper, tick this box.

What kind of work do you do?

What is your employer's name and address?

 Postcode

Postcode

When did you start this job? / /

/ /

Are you employed for a limited period? No
 Yes When will you finish?

No
 Yes When will they finish?

How often do you get paid? Every

Every

How much do you get paid? £ .

£ .

How do you get paid?
 (For example, in cash, paid by cheque, paid direct into a bank account or in another way.)

Do you work regular overtime or receive regular bonuses, tips or commission? No If yes, How much? £ .
 Yes How often?

No If yes, How much? £ .
 Yes How often?

When was your last pay rise? / /

/ /

Do you know the date of your next pay rise? / /

/ /

How many hours a week do you work?

Are you getting Statutory Sick Pay (SSP) or Statutory Maternity Pay (SMP) or Statutory Paternity Pay (SPP) from your employer? No
 Yes

No
 Yes

Are you getting any other sick pay or maternity pay from your employer? No
 Yes

No
 Yes

Do you pay into a private or company pension scheme? No
 Yes

No
 Yes

How much? £ .

How much? £ .

How often? Every

How often? Every

Part 7 About any other work

Do you or your partner do any work at all?

No → Go to **Part 8**.

This could be voluntary work or work you have not told us about in Part 6.

Yes Answer all the questions on this page.

You

If so, how many hours do you do per week?

 hours

Do you get paid?

No

Yes

How much do you get paid ?

 £

How often do you get paid?

Your partner

 hours

No

Yes

 £

What kind of work do you do?

What is the name and address of the person you do this work for?

Postcode

Postcode

Postcode

When did you start?

 / / / /

If you get expenses or tips, tick 'Yes' and give us details.

Yes

How much?

 £

How often?

Every

Yes

How much?

 £

How often?

Every

Part 8 About state benefits, pensions or allowances you or your partner receive

Please give details of the amount of income you and your partner receive and how often you receive it. Please send us original proof of any income you have told us about on these pages.

Do you or your partner receive any of these benefits?

	Yes No		You			Your Partner		
			Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started
• State retirement pension	<input type="checkbox"/>	<input type="checkbox"/>	£		/ /	£		/ /
• Pension Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Service Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Industrial Disablement Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• War Disability Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• War Widow's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Special War Widow's Pension from before 1973	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Widow's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Private/Occupational Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
	Yes	No	Date it last went up	Amount	How you were paid	Date it last went up	Amount	How they were paid
• Pension from past employers	<input type="checkbox"/>	<input type="checkbox"/>		£			£	
				£			£	
				£			£	
	Yes	No	Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started
• Jobseeker's Allowance (contribution based)	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Incapacity Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Employment Support Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Industrial Injuries Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Maternity Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Return to Work Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Working Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Child Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Child Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Maintenance received by you, your partner or any children	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
	Yes	No	Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started
• Foster Child Allowance/Guardians Allowance or Adoption Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Attendance Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Mobility Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Severe Disability Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Disability Living Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Carers Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Statutory Sick Pay	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Statutory Paternity Pay	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Statutory Maternity Pay	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Industrial Death Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		

Part 8 About state benefits, pensions or allowances you or your partner receive

continued

			You			Your Partner			
	Yes	No	Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started	
• Training allowances	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Trust fund	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Annuities	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Home Income Plan	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Income from charities	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Student grant or loan	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Bereavement Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Part-time fire, territorial or reserve forces	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Rent from property	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Pension Protection Fund Payments	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Have you deferred any State Retirement Pension or Private Pension?	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Any other income not listed above <small>Please give details.</small>	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Are you entitled to receive a benefit but it cannot be paid due to the fact that you are in receipt of other benefits?			No	<input type="checkbox"/>		No	<input type="checkbox"/>		
			Yes	<input type="checkbox"/>	<i>Please complete details below</i>	Yes	<input type="checkbox"/>	<i>Please complete details below</i>	
Name of benefit									

If you have answered 'Yes' to any of these questions, please provide proof of this.

Part 9 About other money coming in

Do you or your partner, or any children you are claiming for, have any money coming in that you have not already told us about on this form?

No → Go to **Part 10**.

Yes Answer all the questions on this page.

Income from Subtenants and Lodgers

Surname	First names	What you charge every week	Are they related to you?		If 'Yes', what is their relationship to you?	If 'Yes', what is Is heating included?		Are meals included?	
			Yes	No		Yes	No	Yes	No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have more than 3 subtenants or lodgers, please give details on a separate sheet.

A lodger is someone you provide food for. A subtenant does not get food included in their rent.

Is part of your home sublet to other people?

No

Yes

If 'Yes', please give the following details.

Are they joint owners or joint tenants with you?

No

Yes

How many subtenants do you have?

How many lodgers do you have?

Other money 1

What is the money for?

Who gets it?

How much do they get?

How often?

Other money 2

What is the money for?

Who gets it?

How much do they get?

How often?

Does anyone owe money to you, your partner or any children you are claiming for?

No

Yes

What for?

How much?

We must see proof of any money coming in before we can decide how much benefit you can get.
Read the checklist at page 25 to see what you can use as proof.

Part 10 About Bank Accounts, savings, capital and investments

Answer all the questions in this part. We must see proof of all capital, savings and investments, even if your accounts are overdrawn. Read the checklist at Part 17 to see what you can use as proof.

Please note: Housing Benefit cannot be paid if you or your partner solely or jointly have capital in excess of £16,000 unless you are in receipt of Pension Credit Guarantee. Please note there are different capital limits in respect of Council Tax Reduction applications. Please contact us to find out more.

Do you or your partner have any bank accounts?

No

Yes *Tell us about bank accounts. If there are more than 3 bank accounts, tell us about the others on a separate piece of paper and send it with this form. If you are sending a separate sheet of paper, tick the box.*

1 Name of bank

Whose name is the account in?

Account number

How much is in the account?

2 Name of bank

Whose name is the account in?

Account number

How much is in the account?

3 Name of bank

Whose name is the account in?

Account number

How much is in the account?

Do you or your partner have any building society accounts?

No

Yes *Tell us about building society accounts. If you have more than 3 building society accounts, tell us about the others on a separate piece of paper and send it with this form. If you are sending a separate sheet of paper, tick the box.*

1 Name of building society

Whose name is the account in?

Account number

How much is in the account?

2 Name of building society

Whose name is the account in?

Account number

How much is in the account?

3 Name of building society

Whose name is the account in?

Account number

How much is in the account?

Part 10 About Bank Accounts, savings, capital and investments

continued

Do you or your partner have any post office Accounts? This includes saving accounts and Girobank accounts.

No

Yes

Tell us about post office accounts. If you have more than 3 post office accounts, tell us about the others on a separate piece of paper and send it with this form. If you are sending a separate sheet of paper, tick this box.

1

Type of account

Whose name is the account in?

Account number

How much is in the account?

2

Type of account

Whose name is the account in?

Account number

How much is in the account?

3

Type of account

Whose name is the account in?

Account number

How much is in the account?

Do you or your partner have any premium bonds?

No

Yes

Value

Do you or your partner have any National Savings Certificates?

No

Yes

Please use a separate sheet of paper if you need to.

Issue number	Value	How many?
<input type="text"/>	<input type="text" value="£"/>	<input type="text"/>

Issue number	Value	How many?
<input type="text"/>	<input type="text" value="£"/>	<input type="text"/>

Total

Do you or your partner have any:

Stocks

No Yes

Shares

No Yes

Bonds

No Yes

Unit trusts

No Yes

Any other capital, savings or investments?

No Yes

Please use a separate sheet if you need to

Company name

How many?

<input type="text"/>	<input type="text"/>
----------------------	----------------------

<input type="text"/>	<input type="text"/>
----------------------	----------------------

<input type="text"/>	<input type="text"/>
----------------------	----------------------

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Tell us about this

Do you or your partner own or partly own any other land or property other than the home you live in, in this country or abroad?

No

Yes

What is the current market value?

What is the address?

Postcode

How much is the outstanding mortgage?

Who is the resident of this property?

What is their relationship to you?

Part 11 About rent

Do you pay rent for you home?

No → Go to **Part 14**.

ONLY tick 'No' if you are ONLY applying for Council Tax Reduction

Yes Answer all the questions on this page.

What is your landlord's name and address and telephone number?

By landlord, we mean the person or organisation who owns the property.

Tel no:

Postcode

If your landlord has an agent, tell us their full name and address.

By agent, we mean the person or organisation you actually pay your rent to.

Tel no:

Postcode

Are you, your partner or children related to your landlord or agent, or to your landlord's partner or the agent's partner?

Related includes related through marriage, even if the marriage has ended.

No

Yes

What is the relationship?

When did you start renting your home?

When did you move to this address?

If you have not moved in yet, tell us when you expect to move in.

You must write to confirm this date to us after you have moved in.

What sort of tenancy do you have?

For example, shorthold, registered and assured

How long is the tenancy for?

to

Is your landlord your employer?

No

Yes

Tell us their names

If yes, is it a condition of your employment that you live in the property?

No

Yes

How much is the rent for your property?

every

week / fortnight / 4 weeks / month

Are you jointly liable to pay the rent?

No

Yes

Please tell us the names of the people you share the rent with

Has your rent changed in the last 12 months?

No

Yes

Send us proof of the date it changed, and how much it changed.

When is the next rent increase due?

Part 11 About rent *continued*

Has your rent been registered as a fair rent by the Rent Officer?

No

Don't Know

Yes

If 'Yes', please send us the registration document.

Do you have any weeks when you do not have to pay rent (free weeks)?

No

Yes

How many?

Are you behind with your rent?

No

Yes

If 'Yes', tell us how much and by how many weeks.

Number of weeks in arrears

Amount of rent arrears £

Who pays the Council Tax on your home?

Please tick one of the following.

You and your partner

Your landlord

Someone else

Tell us who pays the Council Tax.

Are water rates included in the rent you pay? No

Yes

Have you ever sublet your home? If so, please tell us who lives there now.

No

Yes

If 'Yes', please tell us who lives there now.

Part 11 About rent *continued*

Does your rent include money for the following

Meals

No

Yes

How much?
Which meals
are included?

£

Heating

No

Yes

How much?

£

Lighting

No

Yes

How much?

£

Hot water

No

Yes

How much?

£

Fuel for cooking

No

Yes

How much?

£

Laundry

No

Yes

How much?

£

Gardening

No

Yes

How much?

£

**Garage or parking
space**

No

Yes

How much?

£

Do you have to rent the garage
as part of your tenancy agreement?

No

Yes

Personal care and support

No

Yes

How much?

£

**Are there any other services
included in your rent?**

No

What are these services?

Yes

How much?

£

*For example, TV, satellite, or
window cleaning.*

**Do you pay any service
charges separate from
your rent?**

No

Yes

How much?

£

What for?

*For example, for cleaning
or lighting in shared areas,
an alarm system, a warden
or lift maintenance.*

Part 12 About where you live

What sort of building do you live in?

- | | | |
|--|--|--|
| <input type="checkbox"/> Detached house | <input type="checkbox"/> Flat in a house | <input type="checkbox"/> Hotel |
| <input type="checkbox"/> Semi-detached house | <input type="checkbox"/> Flat in a block | <input type="checkbox"/> Board and lodgings |
| <input type="checkbox"/> Terraced house | <input type="checkbox"/> Flat over a shop | <input type="checkbox"/> Caravan, mobile home or houseboat |
| <input type="checkbox"/> Maisonette | <input type="checkbox"/> Bedsit or rooms | <input type="checkbox"/> Residential nursing home |
| <input type="checkbox"/> Bungalow | <input type="checkbox"/> Hostel | <input type="checkbox"/> Residential care home |
| <input type="checkbox"/> Other | <i>Please give details.</i> <input style="width: 500px; height: 20px;" type="text"/> | |

How many rooms are in the building?

Please tell us:

- how many rooms there are in the whole building;
- how many of these rooms are for you and your family to use; and
- how many you share with other people

	<i>In the whole building?</i>	<i>Just for you and your household?</i>	<i>That you share with other people?</i>
Living rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedsitting rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separate toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other rooms (please give details)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you use your home for business?

No

Yes

Do you have a main home somewhere else?

No

Yes

If your main home is somewhere else in the UK or abroad, tick 'Yes', even if you do not pay rent for it.

What is the address?

Postcode

How much do you pay for this home?

£

Part 13 Receiving Benefit

If you are awarded Council Tax Reduction this will be paid directly to your Council Tax Account.

If you rent from a private landlord and are making a new claim or you move home after 7th April 2008, you will have your benefit paid directly to you under Local Housing Allowance. Payments of Local Housing Allowance will be paid by BACS or cheque. Please therefore complete the section at the bottom of this page with your bank account details. If you feel this will present problems contact the council for more information.

In some cases we may be able to pay your Local Housing Allowance directly to your landlord. If you would like us to consider paying your landlord, please tick here and explain in the box below the reasons why you feel you cannot receive this money.

Please provide evidence to support your request

The Housing Benefit scheme covers tenants who rent their property from a registered social landlord (e.g. Housing Association) and in some cases private landlords, payments of Housing Benefit will be paid by BACS or cheque and can either be paid direct to yourself or to your landlord.

Please indicate below who you would like your Housing Benefit paid to:

- Do you want your benefit paid direct to you? (please complete your bank account details below)
- Do you want your benefit paid to your landlord? (please complete the enclosed direct payment form and forward to your landlord)

IF YOU DO NOT HAVE A BANK ACCOUNT PLEASE CONTACT US IMMEDIATELY

Name of bank or building society

Bank or building society sort code

<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>	—	<input type="text"/>	<input type="text"/>
----------------------	----------------------	---	----------------------	----------------------	---	----------------------	----------------------

Account name

Bank or building society account number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Your signature

Date

Part 14 Authorisation

If you would like to give permission for the council to discuss your claim with your landlord or any other person who acts on your behalf, please complete this section.

I give permission for you to share information held in relation to my Housing Benefit, Local Housing Allowance or Council Tax Reduction claim to the following people/organisations.

--

If you give permission and then change your mind, please contact the council and let us know.

Signature

Date

Part 15 Backdating information - Housing Benefit only

We usually award benefit from the Monday after the day we receive your claim. Sometimes we can pay benefit from an earlier date if you have a good reason for not claiming earlier. If you want us to consider paying your benefit from an earlier date, tell us when you want benefit from and why you did not claim earlier. We cannot backdate more than 6 months for working age claims from the date on which we receive your written request for a backdate.

Date you want to claim benefit from

Tell us why you have not claimed before.

Part 16 Anything else you need to tell us

Use this box to tell us anything else you think we should know about.

Use a separate sheet and attach it to this form if you need to.

If you are sending a separate sheet of paper, tick this box.

Part 17 Checklist

Please tick the appropriate boxes to tell us what proof you are sending with this form.

You must provide **original** documents, not copies.

We need the same proof for you and your partner, if you have one, and for any other adults living in your home.

If you cannot send the proof we need at the moment, send the form back to us now and send the proof within 1 month. We can start to process your claim, **but we will not be able to pay you any benefit until we have all the proof.**

If you can, bring them into our reception. We will take the details we need and give the documents back straight away. If you cannot get into the office, please phone us for further advice.

Please tick below the items you/your partner have enclosed:

	You	Your Partner		You	Your Partner
Income			Students		
Wage slips (5 weekly, 3 fortnightly, 2 monthly)	<input type="checkbox"/>	<input type="checkbox"/>	Student loan/grant letter	<input type="checkbox"/>	<input type="checkbox"/>
Self Employed Accounts	<input type="checkbox"/>	<input type="checkbox"/>	Letter confirming course dates	<input type="checkbox"/>	<input type="checkbox"/>
Tax Credit Letter	<input type="checkbox"/>	<input type="checkbox"/>			
Pension Letter	<input type="checkbox"/>	<input type="checkbox"/>			
Child Benefit Letter	<input type="checkbox"/>	<input type="checkbox"/>			

Capital

	You	Your Partner
2 months Bank Statements	<input type="checkbox"/>	<input type="checkbox"/>
Premium Bonds	<input type="checkbox"/>	<input type="checkbox"/>
Share Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Savings Account	<input type="checkbox"/>	<input type="checkbox"/>

Persons from Abroad

You may be required to complete a separate form if you are a Person from Abroad

	You	Your Partner
Workers Registration Document	<input type="checkbox"/>	<input type="checkbox"/>
Passport	<input type="checkbox"/>	<input type="checkbox"/>

Rent

	You	Your Partner
Tenancy Agreement	<input type="checkbox"/>	<input type="checkbox"/>
Proof of Rent	<input type="checkbox"/>	<input type="checkbox"/>

Verifying Identification

We will also need to see proof of your identity please supply one of the documents listed below

	You	Your Partner
Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Driving Licence	<input type="checkbox"/>	<input type="checkbox"/>
Marriage Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Passport (current and valid)	<input type="checkbox"/>	<input type="checkbox"/>
UK Residence Permit	<input type="checkbox"/>	<input type="checkbox"/>
Bank Statement	<input type="checkbox"/>	<input type="checkbox"/>
Utility Bill	<input type="checkbox"/>	<input type="checkbox"/>
Wage Slip from Current Employer	<input type="checkbox"/>	<input type="checkbox"/>

National Insurance Number

if you have NOT provided a document showing your NINO we will need your National Insurance Card

	You	Your Partner
National Insurance Card	<input type="checkbox"/>	<input type="checkbox"/>

Part 18 Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, they must sign this declaration as well.

Please read this declaration carefully before you sign and date it. I/we understand the following.

- If I/we give information that is incorrect or incomplete, you may take action against me/us. This may include court action.
- You will use the information I/we have provided to process my/our claim for Housing Benefit or Council Tax Reduction, or both.
- You may check some of the information with other sources within the council, rent offices, other councils and Department for Work and Pensions/Jobcentre.
- You may use any information I /we have provided in connection with this and any other claim for social security benefits that I/we have made or may make. You may give some information to other government organisations if the law allows this.

We will keep and use your personal information in line with the requirements of the Data Protection Act 1998.

For the purpose of processing your claim, we may pass information to other agencies or organisations, such as the Department for Work and Pensions, the Employment Service, the Rent Service and HM Revenues and Customs.

We may check information that you have provided or that has been provided about you against relevant information that we already hold to make sure that it is accurate, for example, the electoral register.

We may also pass information to other central and Local Government Agencies to:

- prevent or detect benefit fraud or any other crime;
- support national fraud initiatives (this will include your information being used in data-matching exercises from time to time); and
- protect public funds.

I/we know, I/we must let the council know about any change in my/our circumstances which might affect my/our claim and confirm that I/we understand that the council may pursue the collection of overpaid amounts through external bodies.

I/we declare the information I/we have given on this form is correct and complete.

Signature of person claiming

Date

I HAVE READ THE DETAILS IN THIS FORM AND CONFIRM THAT THEY ARE CORRECT AND COMPLETE AND I HAVE READ AND UNDERSTOOD THE DECLARATION ABOVE.

Partner's signature

Date

If this form has been filled in by someone other than the person claiming:

(For example, your landlord, your warden, a member of the benefit staff, your carer or a councillor.)

Please tell us why you are filling in this form for the person claiming.

Full name of the person who filled in the form (please print here and sign below).

(Please print here and sign below)

Signature of the person who completed this form

Date

Relationship to person claiming

Your name and address

Your job title

Your work payroll number **Date** / /



Your signature

Once you have filled in the details above, please give this certificate to your employer. When he or she has filled it in, return it to us immediately.

To the employer - Please help your employee by giving us the following information and returning the certificate to your employee. Thank you for your help.

Please give details of your employee's earnings for the last five weeks or two months.

Once you have filled in the details above, please give this certificate to your employer. When he or she has filled it in, return it to us immediately.

To the employer - Please help your employee by giving us the following information and returning the certificate to your employee. Thank you for your help.

Please give details of your employee's earnings for the last five weeks or two months.

Pay period ending	Hours worked	Pay inc. tax credit before tax and deductions	SSP, SMP or tax credit	Income tax	National insurance contributions	Superannuation or pension
1						
2						
3						
4						
5						
Total		£	£	£	£	£

Are these normal earnings? Yes No

If 'No', please say why not and tell us the normal amount before tax and deductions.

On average, how many hours do they work each week? Date of their last pay rise / /

Are these normal hours? Yes No Date of their next pay rise / /

Date they started working for you Employee's National Insurance number

Total pay from the start of tax year to the last week or month ending shown above.

How often do you pay your employee (for example, every week, every calendar month)?

How do you pay your employee (cash, cheque, direct debit and so on)?

Employer's name and address

Employer's signature Position in business

Employer's stamp

Your name and address

Your job title

Your work payroll number **Date** / /



Your signature

Once you have filled in the details above, please give this certificate to your employer. When he or she has filled it in, return it to us immediately.

To the employer - Please help your employee by giving us the following information and returning the certificate to your employee. Thank you for your help.

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1						
2						
3						
4						
5						
Total		£	£	£	£	£

Are these normal earnings? Yes No

If 'No', please say why not and tell us the normal amount before tax and deductions.

On average, how many hours do they work each week? Date of their last pay rise / /

Are these normal hours? Yes No Date of their next pay rise / /

Date they started working for you Employee's National Insurance number

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How often do you pay your employee (for example, every week, every calendar month)?

How do you pay your employee (cash, cheque, direct debit and so on)?

Employer's name and address

Employer's signature Position in business

Employer's stamp

