

# APPLICATION FOR HOUSING BENEFIT AND COUNCIL TAX SUPPORT

|           |
|-----------|
| Name      |
| Address   |
|           |
|           |
| Post Code |

|                     |
|---------------------|
| Date Received Stamp |
|                     |
| Date Sent:          |
| Reference No.       |

## ABOUT THIS FORM

This form gives us the information we need to calculate how much benefit and/or support you may be entitled to. Please read the notes and questions carefully and answer every question in **black** ink.

**Please answer every question, or we will need to contact you and may return the form to you. This will delay your claim.**

## PROOF TO SUPPORT YOUR CLAIM

We will need to see **Two Original** documents to confirm your identity and that of your partner. We will also need original documents to confirm your household income, capital and rent.

## RETURNING THE FORM

You can post your application form and documents to the address shown on the back of this form. Your documents will be copied and posted back to you as soon as possible. If you are housebound we can arrange for someone to visit you at your home to help you.

## START OF BENEFIT ENTITLEMENT

Your Benefit/Support will normally start from the Monday after you first contacted us as long as your form is returned within one month of the first contact date. If your form is received more than one month after you first contacted us, your Benefit/Support will not normally start until the Monday after the form is received. If you do not have all the necessary proofs to support your claim, please return the form straight away with a note to explain which documents will be sent later.

## ENQUIRIES

If you have any queries about this form, please contact the Benefits Office at the address shown on the back of this form. If you phone us we will be happy to return your call.

**Tel: 0808 164 8610**



**Horsham  
District  
Council**

## SECTION 1

▶▶▶ ● **SECTION 1** is about your home. You **must** fill in this section. If you own your home you do not need to answer questions about your tenancy or your rent.

▶▶▶ ● **HOUSING BENEFIT (HB):**

Anyone who has to pay rent for their home can claim unless you are eligible to claim housing costs within universal credit. It does not matter whether your landlord is a private individual, a Housing Association, a letting agency or the local Council. You cannot normally claim Housing Benefit if you live with a close relative.

**COUNCIL TAX SUPPORT (CTS):** If you are liable to pay Council Tax, you may be able to reduce your bill in one of two ways:-

- If you are on a low income, you may claim Council Tax Support in your own right OR
- If you do not qualify for Council Tax Support in your own right because your income is too high, you may still be able to claim if other persons (not your partner, joint owner, joint tenant or someone who pays you rent) sharing your home have low incomes. This is called Second Adult Rebate. Couples are not normally eligible to claim Second Adult Rebate.

If you wish to claim Housing Benefit and/or Council Tax Support on the basis of your own circumstances, you should complete all sections of this form.

If you wish to only claim Second Adult Rebate on the basis of the circumstances of another adult (or adults) living in your household, you need only complete sections 1, 2, 3, 5 and 6 and then sign the declaration at the end of section 17.

▶▶▶ ● If you share paying the rent with someone who is not your partner you will only receive benefit on your share of the rent. We use the word partner to mean a person you are married to, a person you live with as if you were married to them, a civil partner or a person you live with as if you were civil partners.

## 1. YOUR HOME

The address you are claiming for

|  |           |
|--|-----------|
|  |           |
|  |           |
|  | Post Code |

Daytime Telephone Number

e-mail address

Would you like to sign up to receive letters by email?

Please state Yes or No

Are you liable for council tax?

Please state Yes or No

Do you own your home?

Please state Yes or No

Do you jointly own your home with someone who is not your partner?

Please state Yes or No

Do you wish to claim 2nd Adult Rebate only?

Please state Yes or No

Do you pay rent to a private landlord or Housing Association?

Please state Yes or No

► **If you pay rent and you are not receiving the Housing Element of Universal Credit, you will also need to complete sections 13 and 14**

When did you move in?

When did your tenancy start?

If you did not move in straight away, please give the reason for the delay.

Have you ever owned the home you are claiming for?

Please state Yes or No

**If Yes, please give details**

**Please give your previous address**

|  |           |
|--|-----------|
|  |           |
|  |           |
|  | Post Code |

What was your status at this address (e.g. owner, tenant, with relatives etc.)

Have you claimed HB/CTS in the last 52 weeks?

Please state Yes or No

Have you received HB/CTS for another property?

Please state Yes or No

**If Yes, please give the last address you claimed at**

|  |           |
|--|-----------|
|  |           |
|  |           |
|  | Post Code |

**If Yes, please also give the date you last claimed**

Does anyone share the rent payment with you who is not your partner?

Please state Yes or No

**If Yes, how many people share the rent?**

## SECTION 2

- ▶▶▶ ● SECTION 2 is about yourself. You **must** fill in this section. We cannot grant benefit if you have not given your National Insurance Number and provided some evidence to show that your National Insurance Number is correct. If you cannot provide suitable evidence we will have to write to the Department for Work and Pensions to get confirmation. This will delay your claim.
- ▶▶▶ ● You should provide two items from the following list, one of which must show your National Insurance Number.
  - Bank statement (covering the last 2 consecutive months)
  - Utility bill (paid in your name for the last quarter)
  - Wage slips from your current employer
  - Certificate of employment in HM Forces
  - Certificate of employment in the Merchant Navy
  - Divorce/Annulment papers
  - Life assurance/insurance policies
  - National Insurance Number card
  - Identity card issued by an EC/EEA member state
  - Home Office Standard Acknowledgement Letter (SAL 1 or 2)
  - Letter from solicitor/social worker/probation officer/Inland Revenue
  - Benefit Award letter
  - Passport (current and valid)
  - Birth Certificate
  - Driving Licence
  - Credit Card Statement
  - Marriage Certificate
  - Medical card
  - UK residence permit
- ▶▶▶ ● Non-UK passport holders should supply their passports to show that they have the right to claim benefit and provide their visas to confirm this.
- ▶▶▶ ● **Any documents you supply must be originals – photocopies are not acceptable.**
- ▶▶▶ ● If you are in receipt of Universal Credit, Income Support, Jobseeker's Allowance, Pension Credit, Employment & Support Allowance and you have changed your address, you must tell the Department for Work and Pensions, Job Centre Plus or the Pension Service straight away.
- ▶▶▶ ● If you are a student we may write to you to request further information.
- ▶▶▶ ● If someone receives, or has made a claim for, Carer's Allowance for looking after you, or you are registered blind you may receive extra help with your rent or council tax.
- ▶▶▶ ● If you are in hospital your Benefit/Support entitlement may be affected.
- ▶▶▶ ● If you have come to live in the UK, Republic of Ireland, Channel Islands or the Isle of Man in the last 2 years, you may not be able to receive help with your rent. We may need to write to you or we may need to approach the Home Office for further information.

## 2. YOURSELF

Title

Mr/Mrs/Miss/Ms

Surname

First Names

Any other names used (if applicable)

Date of Birth

National Insurance No.

Are you receiving Income Support?

Please state Yes or No

Are you receiving Universal Credit?

Please state Yes or No

Are you receiving Jobseeker's Allowance (Income Based)?

Please state Yes or No

Are you receiving Employment & Support Allowance (Income Related)?

Please state Yes or No

Are you receiving Guarantee Pension Credit?

Please state Yes or No

Have you made a claim for Income Support, Universal Credit, Jobseeker's Allowance, Employment & Support Allowance or Pension Credit?

Please state Yes or No

Are you a Student?

Please state Yes or No

**If Yes, please provide evidence of your course**

Are you an approved foster carer?

Please state Yes or No

Are you registered blind?

Please state Yes or No

Has anyone ever received or made a claim for Carer's Allowance for looking after you?

Please state Yes or No

**If Yes, please give the name of this person:**

Are you currently in hospital?

Please state Yes or No

**If Yes, please give date of admission:**

What is your nationality?

Have you come to live in the UK, Republic of Ireland, Channel Islands or the Isle of Man in the last 2 years?

Please state Yes or No

**If Yes, when did you and your partner enter the UK?**

Are you eligible to claim benefit in the UK?

Please state Yes or No

(for Non-UK passport holders see visa entry conditions in your passport)

## ▶▶▶ GUIDANCE NOTES

### SECTION 3

- ▶▶▶ ● SECTION 3 is about your partner. You **must** fill in this section if you have a partner you live with. We use the word partner to mean a person you are married to, a person you live with as if you were married to them, a civil partner or a person you live with as if you were civil partners.
- ▶▶▶ ● We cannot grant benefit if your partner does not have a National Insurance Number. If your partner does not have a National Insurance Number, you and your partner will need to apply for one and we will need to ask further details of your partner's identity. This will delay your claim.
- ▶▶▶ ● Please send proof of your partner's National Insurance Number
- ▶▶▶ ● If your partner is in receipt of Universal Credit, Income Support, Jobseeker's Allowance, Pension Credit or Employment & Support Allowance and has changed their address, they must tell the Department for Work and Pensions, Job Centre Plus or the Pension Service straight away.
- ▶▶▶ ● If your partner is a student we may write to you to request further information.
- ▶▶▶ ● If someone receives, or has made a claim for, Carer's Allowance for looking after your partner, or your partner is registered blind you may receive extra help with your rent or council tax.
- ▶▶▶ ● If your partner is in hospital your benefit entitlement may be affected
- ▶▶▶ ● **Any documents you supply must be originals – photocopies are not acceptable.**

### 3. YOUR PARTNER

Do you have a partner who lives with you?

Please state Yes or No

If, No please go to section 4. If Yes, please complete this section

Please state date they moved in

Title

Surname

First Names

Mr/Mrs/Miss/Ms

Any other names used (if applicable)

Date of Birth

National Insurance No.

Are they receiving Income Support?

Please state Yes or No

Are they receiving Universal Credit?

Please state Yes or No

Are they receiving Jobseeker's Allowance (Income Based)?

Please state Yes or No

Are they receiving Employment & Support Allowance (Income Related)?

Please state Yes or No

Are they receiving Guarantee Pension Credit?

Please state Yes or No

Have they made a claim for Universal Credit, Income Support, Jobseeker's Allowance, Employment & Support Allowance or Pension Credit?

Please state Yes or No

Are they a Student?

Please state Yes or No

If Yes, please provide evidence of their course

Are they an approved foster carer?

Please state Yes or No

Are they registered blind?

Please state Yes or No

Are they currently in hospital?

Please state Yes or No

If Yes, please give date of admission:

Has anyone ever received or made a claim for Carer's Allowance for looking after them?

Please state Yes or No

If Yes, please give the name of this person:

## SECTION 4

- ▶▶▶ ● SECTION 4 is about your children.
- ▶▶▶ ● This Section is **only** to be used for children who are living with you, and that you or your partner get Child Benefit for. This would usually be your, or your partner's, own children who are still at school or in further education and under 20.
- ▶▶▶ ● If your child is receiving Disability Living Allowance or a Personal Independence Payment you may be able to get more help with your rent or council tax. Please send proof of this with your claim.
- ▶▶▶ ● If your child is registered blind you may be able to get more help with your rent or council tax. Please send the registration document with your claim.
- ▶▶▶ ● If you pay for childcare, we may be able to disregard some or all of the charge against your earnings. Please send receipts to show the amount of childcare that you pay.
- ▶▶▶ ● Adult children, or children who are in higher education (e.g. University), who still live with you should be included in Section 5.
- ▶▶▶ ● Foster children should be included in Section 6.
- ▶▶▶ ● **Any documents you supply must be originals – photocopies are not acceptable.**



## 4. YOUR CHILDREN

Do you or your partner receive Child Benefit for any children who live with you?

Please state Yes or No

If Yes, please complete this section for each of your children. If No, please go to Section 5.

If you have more than 3 children, please give their details at the bottom of this page

|   | 1st Child  | 2nd Child  | 3rd Child  |
|---|--|--|--|
| Surname   | <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"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| What is their relationship to you?  | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Are they male or female?  | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Do they receive Disability Living Allowance or a Personal Independence Payment? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Are they registered blind?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Do you pay childcare?   | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, please give the name and address of the childminder/nursery/playscheme  | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| What is their Local Authority registration number?                              | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| What is the weekly cost of childcare for each child?                            | £ <input type="text"/>                                   | £ <input type="text"/>                                   | £ <input type="text"/>                                   |
| Does the amount you pay vary at any time? (eg school holidays)                  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Please give details of additional children or variations in childcare costs below

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## SECTION 5

- ▶▶▶ ● SECTION 5 is about other people who live in your home who are classed as 'non-dependants'.
- ▶▶▶ ● A '**non-dependant**' is someone who lives with you, but who does not pay any rent for the property. They may have an informal arrangement to give you an agreed sum for their keep. People in this group may include: grown-up children, parents, other relatives or friends.
- ▶▶▶ ● A non-dependant is different from a boarder or a sub-tenant or a joint tenant. Please see Section 6 for the definitions of boarders, sub-tenants and joint tenants
- ▶▶▶ ● We will need to see proof of the income of all non-dependants in your home.
- ▶▶▶ ● Please note that non-dependants receiving Universal Credit (UC), Income Support (IS), Jobseeker's Allowance (income based) (JSA(IB)), Pension Credit (PC) or Employment & Support Allowance (ESA) will affect your benefit in different ways. Please send proof of any of these incomes if any of your non-dependants receive them.
- ▶▶▶ ● Please also send proof of the student course if any of your non-dependants are students.
- ▶▶▶ ● You must let us know if any of your non-dependants live together as a couple, or if they are in hospital or prison as this could affect the amount of benefit you receive.
- ▶▶▶ ● **Any documents you supply must be originals – photocopies are not acceptable.**

## 5. NON-DEPENDANTS WHO LIVE WITH YOU

Do you have any non-dependants living with you?

Please state Yes or No

If No, please go to Section 6. If Yes, please complete this section.

|  | 1st Person   | 2nd Person   | 3rd Person   |
|--|--|--|--|
| Surname  | <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"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| National Insurance No.   | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Their relationship to you  | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Date they moved in   | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Do they receive IS, JSA(IB), PC, ESA or UC?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Do they work?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, how many hours per week?   | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| What are their earnings per week before deductions   | £ <input type="text"/>                                   | £ <input type="text"/>                                   | £ <input type="text"/>                                   |
| Do they have any other income?   | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, please give details, including the amount.   | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Do they get Disability Living Allowance, Attendance Allowance or a Personal Independence Payment?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, how much do they get each week?  | £ <input type="text"/>                                   | £ <input type="text"/>                                   | £ <input type="text"/>                                   |
| Do they provide care for anyone in your home?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, who do they provide the care for?  | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| What is their relationship to this person?   | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Are they a Student?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Are they Severely Mentally Impaired?   | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Are they in prison or in hospital?   | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, please state which   | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| If Yes, please give the date that they went into prison or hospital  | <input type="text"/>                                     | <input type="text"/>                                     | <input type="text"/>                                     |
| Are any of these people married or civil partners or living together as if they were?  | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, please say who:  | <input type="text"/>                                     | is the partner of  | <input type="text"/>                                     |
| If you have more than 3 non-dependants please provide their details at the end of Section 6 and put the number here <input type="text"/> |  |  |  |

## SECTION 6

- ▶▶▶ ● SECTION 6 is about anyone else who lives in your home.
- ▶▶▶ ● A **'boarder'** is someone who lives with you and who has a commercial agreement with you to pay for their accommodation and for meals which you provide for them. Boarders are often known as lodgers
- ▶▶▶ ● A **'sub-tenant'** is someone who has a commercial agreement with you to pay for their accommodation, but whose rent does not cover any meals.
- ▶▶▶ ● We will need to see evidence of the amount that you receive from any boarders and sub-tenants in your home.
- ▶▶▶ ● A **'joint-owner'** is someone (other than your partner) who jointly owns the property you live in.
- ▶▶▶ ● A **'joint-tenant'** is someone (other than your partner) who is jointly responsible with you for paying the rent for the property you live in.

## 6. ANYONE ELSE WHO LIVES IN YOUR HOME

Do you have any joint-owners, joint-tenants, sub-tenants or boarders living with you?

Please state Yes or No

**If No, please go to Section 7. If Yes, please complete this section.**

|   | 1st Person   | 2nd Person   | 3rd Person   |
|---|--|--|--|
| Surname                                 | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  |
| Other names                             | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  |
| Date of Birth (if known)                | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  |
| National Insurance No. (if known)       | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  |
| Their relationship to you               | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  |
| Date they moved in                      | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  | <input style="width: 100%; height: 25px;" type="text"/>  |
| Are they a joint-tenant or joint-owner? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

You do not have to complete the rest of this section for joint-tenants or joint-owners

|  |   |   |   |
|--|---|---|---|
| Do they pay you any rent?                              | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  |
| If Yes, how much and how often?                        | £ <input style="width: 40px;" type="text"/> per <input style="width: 40px;" type="text"/> | £ <input style="width: 40px;" type="text"/> per <input style="width: 40px;" type="text"/> | £ <input style="width: 40px;" type="text"/> per <input style="width: 40px;" type="text"/> |
| Does their rent include payment for meals?             | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  |
| Does their rent include payment for heating/hot water? | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                  |

Details of any additional non-dependants not shown in Section 5

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## ▶▶▶ GUIDANCE NOTES

### SECTIONS 7 & 8

- ▶▶▶ ● **SECTION 7** is about your paid employment.  
**If you are self employed please go to section 8**
- ▶▶▶ ● If you or your partner are working for an employer we need to know how much you receive. You **must** provide proof of your earnings.
- ▶▶▶ ● You must tell us how often you are paid, (e.g. weekly, monthly, 4 weekly)
- ▶▶▶ ● If you are paid weekly we will need your last 5 pay slips. If you are paid monthly or 4 weekly we will need your last 2 pay slips. If you are paid fortnightly we will need your last 3 payslips.
- ▶▶▶ ● If you cannot provide payslips or you only receive handwritten payslips (which are not acceptable), then please ask your employer to complete the Certificate of Earnings at the back of this application.
- ▶▶▶ ● You must tell us how you are paid, e.g. by cash, direct to your bank/building society account or by cheque.
- ▶▶▶ ● If you have more than one employer you should give details of each job on page 16.
- ▶▶▶ ● **SECTION 8** is about your self employment.
- ▶▶▶ ● If you are the Director/Secretary of a Registered/Limited Company you will need to complete Section 7 and we will request further information.
- ▶▶▶ ● If you or your partner are self employed, you should send us properly prepared accounts.
- ▶▶▶ ● If you have not been self employed for very long, or if for some reason you cannot provide us with properly prepared accounts, you may need to complete an additional form.

## 7. EMPLOYMENT

Are you or your partner in paid employment?

Please state Yes or No

Are you or your partner a Director/Secretary of a Registered Limited Company?

Please state Yes or No

Are you or your partner self-employed?

Please state Yes or No

If Yes to any of the above, please continue with sections 7 and 8 as applicable.

If No, please give date last worked and go to Section 9.

You

Your Partner

Job Title

You

Your Partner

Employer's name & address



Employer's telephone no.



Payroll number



Date started work



Date due to end (if known)



Average weekly hours worked



Date of last pay rise



Date of next pay rise (if known)



How are you paid?



How much are you paid?

£  per

£  per

Do you receive a bonus?

Yes  No

Yes  No

If Yes, how much and how often?

£  per

£  per

Do you receive tips?

Yes  No

Yes  No

If Yes, how much and how often?

£  per

£  per

Do you receive Statutory Sick Pay?

Yes  No

Yes  No

If Yes, how much and how often?

£  per

£  per

Do you receive Statutory Maternity/Paternity/ Adoption Pay?

Yes  No

Yes  No

If Yes, how much and how often?

£  per

£  per

Do you have more than 1 employer?

Yes  No

Yes  No

If Yes, how many?



Please give details of additional employers on page 16.





## 8. SELF EMPLOYMENT

You

Your Partner

Nature of Business



Business name and address



Business tel no.



Date business started



Average weekly hours worked



Are you a sub-contractor

Yes

No

Yes

No

If you are unable to provide proper trading accounts, please continue below

Period that you are giving figures for covering the last 12 months



### A. INCOME

Sales (or Takings)

£

Other income of the business, please specify

£

GROSS INCOME =

£

### B. EXPENSES (only include amounts relating solely to business)

Purchases of stock/supplies

£

Advertising

£

Wages paid to wife/husband

£

Printing & Stationery

£

Wages paid to others

£

Postage

£

Rent for business use

£

Telephone

£

Rates

£

Insurance

£

Heating

£

Bank Charges

£

Lighting

£

Interest payments on business loans

£

Motor expenses

- Petrol

£

Loan to repair/replace existing business assets

£

- Insurance

VAT

£

From

To



£

Bad Debts

£

- Road Tax

Drawings

£

From

To



£

Others (please specify)

£

- Repairs and maintenance

£

£

£

GROSS EXPENSES =

£

## ▶▶▶ GUIDANCE NOTES

### SECTION 9

- ▶▶▶ ● SECTION 9 is about other income you have, including State benefits and pensions. You **must** complete all of this section, even if you receive the benefit/pension for someone else.
- ▶▶▶ ● For each income listed please indicate in the relevant box the amount you receive **before deductions** and how often it is received e.g. weekly, monthly, 4 weekly, etc. If you do not receive one of the incomes listed write **nil** in each relevant box. If you are waiting for a decision on any of the incomes listed please write **applied** in the relevant box. Please answer every question or we will need to contact you and may need to return the form to you. This will delay your claim.
- ▶▶▶ ● The type of proof required for each income you receive is listed in the right hand box. Please remember **that any documents you supply must be originals – photocopies are not acceptable.** We will return all documents.
- ▶▶▶ ● If you do not have your notification letter from the Department for Work and Pension, Job Centre Plus or the Pension Service you can ask for a duplicate or we may be able to obtain the information for you.
- ▶▶▶ ● **If you have made a claim for carer's allowance but were not entitled, please let us have your notification letter.**

## 9. BENEFITS, PENSIONS AND OTHER INCOME

| Type of income  | You                            | Partner                        | Wkly/Mthly/<br>4Wkly etc | Proof needed              |
|---|--------------------------------|--------------------------------|--------------------------|---------------------------|
| Universal Credit  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     | Your notification letter  |
| Income Support  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Employment & Support Allowance                            | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Jobseeker's Allowance                                     | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Child Benefit   | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Working Tax Credit  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Child Tax Credit  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| State Retirement/Widows Pension                           | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Pension Credit  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Widowed Parent's Allowance/<br>Bereavement Allowance      | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     | Last 2 pay slips          |
| Pension from former employer (1)                          | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Pension from former employer (2)                          | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Pension from former employer (3)                          | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     | Your notification letter  |
| Incapacity Benefit  |                                |                                |                          |                           |
| - Long term rate  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Attendance Allowance                                      | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Disability Living Allowance/Personal Independence Payment |                                |                                |                          |                           |
| - Care/Daily Living component                             | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| - Mobility component                                      | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Maternity Allowance                                       | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Carer's Allowance   | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Industrial Injuries Benefit/Reduced<br>Earnings Allowance | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     | Court order or CSA letter |
| War Disablement Pension                                   | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| War Widows Pension  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Student Grant/Student Loan                                | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     | Any relevant evidence     |
| Maintenance payments                                      | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| - for yourself  | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| - for your children                                       | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Charitable or Voluntary Payments                          | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     | Any relevant evidence     |
| Armed Forces Compensation Payment                         | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| Any other income (please state source)                    |                                |                                |                          |                           |
| <input style="width: 100%;" type="text"/>                 | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |
| <input style="width: 100%;" type="text"/>                 | <input type="text" value="£"/> | <input type="text" value="£"/> | <input type="text"/>     |                           |

## SECTION 10

- ▶▶▶ ● SECTION 10 is about your savings, investments and bank accounts. If you do not have any savings, investments, shares, bonds or bank accounts please write **nil** in each relevant box. If you have a joint account you may use either the 'you' or 'your partner' box.  
**If your total capital exceeds £16,000 you may not qualify for benefit.**
- ▶▶▶ ● If you or your partner have bank or building society accounts please give the name of the bank or building society and the current balance of your and your partner's accounts including current accounts. You **must** provide either your bank/building society book or the latest full statement covering a period of at least 2 months for every account. **Any documents you supply must be originals – photocopies are not acceptable.** We will return all documents.
- ▶▶▶ ● If you or your partner have a Post Office account please give the current balance of your or your partner's account(s). You **must** provide your or your partner's Post Office account books and/or card account statements. **Statements must cover the last 2 consecutive months. Any documents you supply must be originals – photocopies are not acceptable.** We will return all documents.
- ▶▶▶ ● If you or your partner have any stocks or shares including those you may have been given by a company or bank please give the number of shares held and the company or bank name. **Any documents you supply must be originals – photocopies are not acceptable.** We will return all documents.
- ▶▶▶ ● If you or your partner have any National Savings Certificates or Premium Bonds we need to know the number of units you have and any relevant issue number. **Any documents you supply must be originals – photocopies are not acceptable.** We will return all documents.
- ▶▶▶ ● If you or your partner have any Income Bonds, ISAs and PEPs please give the current value of these investments as shown on your latest statement. **Any documents you supply must be originals – photocopies are not acceptable.** We will return all documents.
- ▶▶▶ ● If you have received a payment as a Far Eastern prisoner of war or for personal injury, please tell us. We need to know so that we can disregard these payments from any other capital you have. You should also tell us if anyone in your household has received payments as a sufferer of Variant Creutzfeldt-Jakob disease (VCJD). These payments are also disregarded.

## 10. BANK ACCOUNTS, SAVINGS, INVESTMENTS & CAPITAL

How many bank or building society accounts do you have?

Total Capital  £

How many bank or building society accounts does your partner have?

Total Capital  £

| Bank/Building Society<br>Name | You                  |                        | Your Partner         |                        |
|-------------------------------|----------------------|------------------------|----------------------|------------------------|
|                               | Account No.          | Account balance        | Account No.          | Account balance        |
| <input type="text"/>          | <input type="text"/> | <input type="text"/> £ | <input type="text"/> | <input type="text"/> £ |
| <input type="text"/>          | <input type="text"/> | <input type="text"/> £ | <input type="text"/> | <input type="text"/> £ |
| <input type="text"/>          | <input type="text"/> | <input type="text"/> £ | <input type="text"/> | <input type="text"/> £ |

Do you or your partner have any other capital, savings or investments? **Please state Yes or No**

If No, please go to Section 11. If Yes, please continue below.

| Post Office | Account balance        | Account balance        |
|-------------|------------------------|------------------------|
|             | <input type="text"/> £ | <input type="text"/> £ |

| Shares               | No. of shares        | No. of shares        |
|----------------------|----------------------|----------------------|
| Company Name         |                      |                      |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

| Premium Bonds | No. held             | Value                  | No. held             | Value                  |
|---------------|----------------------|------------------------|----------------------|------------------------|
|               | <input type="text"/> | <input type="text"/> £ | <input type="text"/> | <input type="text"/> £ |

| National Savings Certificates | No. of units/value     | Issue No.            | No. of units/value     | Issue No.            |
|-------------------------------|------------------------|----------------------|------------------------|----------------------|
|                               | Current value          |                      | Current value          |                      |
|                               | <input type="text"/> £ | <input type="text"/> | <input type="text"/> £ | <input type="text"/> |
|                               | <input type="text"/> £ | <input type="text"/> | <input type="text"/> £ | <input type="text"/> |

| Income Bonds | Current value          | Current value          |
|--------------|------------------------|------------------------|
|              | <input type="text"/> £ | <input type="text"/> £ |

| ISAs | Current value          | Current value          |
|------|------------------------|------------------------|
|      | <input type="text"/> £ | <input type="text"/> £ |

| PEPs | Amount                 | Amount                 |
|------|------------------------|------------------------|
|      | <input type="text"/> £ | <input type="text"/> £ |

Have you received one of the following payments Variant Creutzfeldt-Jakob disease (VCJD), Far Eastern Prisoner of War, Personal Injury Compensation? **Please state Yes or No**

If Yes, please state which and how much

If you or your partner have any capital, savings or investments not shown above, please tick this box and give details on a separate sheet.

## ▶▶▶ GUIDANCE NOTES

### SECTION 11

- ▶▶▶ ● SECTION 11 is about any land or property which you or your partner own in addition to the property you currently live in.
- ▶▶▶ ● If the additional property is let to a relative we will need to see the tenancy agreement and rent receipts. We will also need to know the age of the relative and whether or not they are incapacitated. If the additional property is occupied by an ex partner who is a lone parent we will need to see the Child benefit notification letter.  
**Only original documents are acceptable, not photocopies.**  
We will return all documents.
- ▶▶▶ ● Otherwise the market value of the property and any land you own may be taken into account. We may need to send you a Valuation of Property/Land form to fill in.

### SECTION 12

- ▶▶▶ ● SECTION 12 is about the payments you make sometimes called outgoings.
- ▶▶▶ ● If you contribute to a pension scheme other than one with your employer please provide the policy and proof of payments being made.
- ▶▶▶ ● If you are paying to support a child who is at college or university please send details of their course, the term dates and the grant assessment form.

## 11. ADDITIONAL PROPERTY OR LAND

Do you or your partner own other property or land?

Please state Yes or No

If No, please go to section 12.

If Yes, please give the address of the property or the location of the land

  
  

Market Value of the property or land?

£

Value of outstanding mortgage? (if any)

£

Is the property let to a relative who is aged 60 or over or who is incapacitated?

Please state Yes or No

Does an ex partner live in the property?

Please state Yes or No

If Yes, to either of the above, how much rent do you receive?

£

How often received?

Please state weekly/monthly/4 weekly

Is the property for sale?

Please state Yes or No

If Yes, please give full details on a separate sheet

## 12. PAYMENTS YOU MAKE

Do you or your partner make payments into a private pension scheme or help support children at college/university?

Please state Yes or No

If No, please go to section 13.

If Yes, please complete this section.

### Private Pension Scheme

Amount of contribution

Yourself

Partner

£

£

How often paid? Please state weekly/monthly/4 weekly

Children at College/University Amount of Contribution

£

£

If needed please give more information on page 38.

## SECTION 13

- ▶▶▶ ● SECTION 13 is about your tenancy and the rent you pay.
- ▶▶▶ ● You must complete this section if you have a liability to pay rent to a private landlord, Housing Association or the Council.
- ▶▶▶ ● You **must** tell us who your landlord is and their address.
- ▶▶▶ ● If you do not pay rent to your landlord but someone else, e.g. an agent, you must tell us the agent's name and address as well.
- ▶▶▶ ● If a fair rent has been registered on your property you will need to supply a copy of the registration document.
- ▶▶▶ ● If you have been subject to a Care Order or have been looked after by Social Services we may need to contact you about this.
- ▶▶▶ ● We will need to see proof of the amount of rent you pay and the services included (ie Council Tax, Water Rates, Heating etc) - your tenancy agreement, rent receipts, rent book, letter from your landlord or a letter from the agent. It must include the following information.
  - the name and address of your landlord;
  - the name and address of the Managing agent if appropriate;
  - the amount you pay;
  - what is included in your rent for example, meals, electricity;
  - how often you pay the rent for example, 4 weekly, monthly.
- ▶▶▶ ● **Any documents you supply must be originals – photocopies are not acceptable.** We will return all documents. If you do not have this information you **must** obtain a letter from your landlord or ask your landlord to complete the Landlord's Statement at the back of this application.
- ▶▶▶ ● You will only receive Housing Benefit if you are not entitled to the housing element of Universal Credit because of the type of property you live in, or if you are of Pensionable age.



## 13. TENANCY AND RENT DETAILS

You should only complete sections 13 and 14 if you pay rent and you are not receiving the housing element of Universal Credit.

When did your tenancy start at your current address?

Landlord's name

Landlord's business address and telephone number

If the landlord has an agent, you also need to tell us

Agent's name

Agent's address and telephone number

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

Yes

No

Are you, or your partner, or any of your children related to the agent?

Yes

No

If Yes, who is related, and what is the relationship?

Do you rent your home from your, or your partner's, former partner?

Yes

No

Have you signed a tenancy agreement?

Yes

No

What kind of tenancy is it?

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

Yes

No

Are you, your partner, or any of your children a beneficiary of a Will which has not yet been settled?

Yes

No

If Yes, please give details, and let us see the Will

Do you occupy your home as a condition of your or your partner's employment?

Yes

No

Have you ever been the subject of a care order or had accommodation provided by Social Services?

Yes

No



## SECTION 13 TENANCY AND RENT DETAILS – CONTINUED

- ▶▶▶ ● Housing Benefit for private sector tenants is normally paid under Local Housing Allowance (LHA) rules.
- ▶▶▶ ● The rent we use to calculate benefit will depend on the number of people in your household and their ages. Please contact us or look on our websites to see how the size criteria is calculated.
- ▶▶▶ ● Local Housing Allowance rates are displayed in our offices and can also be found on our websites.
- ▶▶▶ ● Some accommodation types are exempt from this scheme, i.e. Council and Housing Association tenants, hostels, houseboats, caravans, site pitches, accommodation where a substantial part of the rent covers board & attendance (such as Hostels) and pre 15 January 1989 tenancies.
- ▶▶▶ ● Your landlord should have made clear to you whether or not any services are included within your rent, and you should give as much detail here as you can. We only need this information if you are a tenant of a Housing Association, have a registered rent or are exempt from Local Housing Allowance. If in doubt it is best to complete the information.
- ▶▶▶ ● Benefit paid under Local Housing Allowance will normally be paid direct to you and it will be your responsibility to pay your rent to your landlord. You cannot simply choose to have your benefit paid direct to your landlord.
- ▶▶▶ ● LHA will normally be paid direct into a bank account. This means that you will need to open a bank account if you do not have one already. You can then arrange for your bank or building society to pay your rent to your landlord automatically. One way of doing this is called a standing order.
- ▶▶▶ ● If you are more than 8 weeks in rent arrears we are legally obliged to make payment of Housing Benefit directly to your landlord.

## 13. TENANCY AND RENT DETAILS - continued

You should only complete sections 13 and 14 if you pay rent and you are not receiving the housing element of Universal Credit.

How much rent does your landlord charge you? £

Is this every? Day  Week  Fortnight  4 Weeks  Calendar Month  Quarter

Who do you pay the rent to?

Do you have any rent-free weeks? Yes  No  If Yes, when are they?

Are meals included in your rent? Yes  No

Which ones? Breakfast? Yes  No  Lunch? Yes  No  Evening Meal? Yes  No

Are you in arrears with your rent? Yes  No  If you have ticked Yes, state how much £

If you know in advance when your rent is due to be increased, please enter the date in the box.

Does the rent you pay include any of these charges? If Yes, please tell us how much per week (if you know). We may have to write to you or your landlord for further details.

Water rate Yes  No  £  Lighting (your rooms) Yes  No  £

Council Tax Yes  No  £  Fuel for Cooking Yes  No  £

Hot Water Yes  No  £  Heating (your rooms) Yes  No  £

Laundry Yes  No  £  Cleaning Yes  No  £

Garage Yes  No  £

### How your Housing Benefit will be paid

| Benefit paid under Local Housing Allowance (LHA)   | Housing Association and Tenants exempt from (LHA)                    | Method of payments  |
|--|--|---|
| Your benefit will be paid directly to you unless you feel this may cause you difficulty. Contact us for a 'Direct Payments to Landlord form' if you think you may have reason for us to pay your landlord. | You can have payments made to you or to your landlord if you prefer. | All payments will be made directly to a bank account. Contact us if you need help to open a bank account. |

Do you want your Housing Benefits to be paid to you? Yes  No  or to your landlord? Yes  No

This is only applicable if your landlord is a Housing Association.

If you pay rent to a private landlord, and you have asked us to pay your landlord, both you and your landlord will need to sign the 'Direct Payment to Landlord' sheet at the end of this form.

Name of the Bank or Building Society that you want us to pay benefit into

Account Holder's Name

Branch  Sort Code

Account No.

## ▶▶▶ GUIDANCE NOTES

### SECTION 14

- ▶▶▶ ● SECTION 14 is about your home.
- ▶▶▶ ● You must tell us how many rooms there are in the whole of the property and which rooms they are.
- ▶▶▶ ● You must also tell us how many of these rooms are for your sole use and which rooms they are.
- ▶▶▶ ● You also need to tell us if any rooms are shared with other people who live in the property.
- ▶▶▶ ● Once we receive your form we will know if we must refer your rent to the Rent Officer who is an independent Government Valuer who, for some claims, decides how much your rent should be.

## 14. YOUR HOME

Please tick box that best describes your home

House

Maisonette

Bungalow

Converted Flat

Flat over shop

Purpose Built Flat

Studio Flat

Bedsit

Rooms in a house or hotel

Other (please give details - we may need to write to you)

Please tell us the number of each type of room in your home, and who uses them

|                                  | How many in the whole house or flat | How many are only used by you and your family | How many rooms do you share with other people |
|----------------------------------|-------------------------------------|---|---|
| Living rooms                     | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| Bedrooms                         | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| Bedsit rooms                     | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| Kitchens                         | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| Bathrooms                        | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| Toilets (separate from bathroom) | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| Other rooms                      | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |
| (please specify)                 | <input type="text"/>                | <input type="text"/>                          | <input type="text"/>                          |

How many floors are there in the whole building?

Which floor is your home on?

Is the property you live in

Detached?

Semi-detached?

Terraced?

If you rent a room, please tell us the room number

|              |                          |
|--------------|--------------------------|
| 2nd Floor    | <input type="checkbox"/> |
| 1st Floor    | <input type="checkbox"/> |
| Ground Floor | <input type="checkbox"/> |
| Basement     | <input type="checkbox"/> |

Other (please specify)

Where is your room? (tick one box only)

At the front of the property?

At the back of the property?

Do you share your room with anyone?

If yes, who with?

Does your landlord live in the property? Yes  No

Is there central heating in your home? Yes  No

Do you have use of a garage? Yes  No

Do you have use of a parking space? Yes  No

Is the garage or parking space optional? Yes  No

Do you have use of a garden? Yes  No

Is your accommodation: Fully Furnished?

Partly Furnished?

Unfurnished?

If necessary, may we contact your landlord or agent to confirm or discuss the rent or tenancy details? Yes  No

If No, what are your reasons for not wanting us to contact them?

## ▶▶▶ GUIDANCE NOTES

### SECTION 15

- ▶▶▶ ● SECTION 15 is a reminder to check the form through carefully before you send it to us.
- ▶▶▶ ● **If you do not have all the necessary documents to send in with your claim, please send the form in anyway and let us know which documents will follow.**
- ▶▶▶ ● If you delay in sending the form, you may lose benefit which you may be entitled to.

### SECTION 16

- ▶▶▶ ● SECTION 16 is about Backdating of benefit
- ▶▶▶ ● **When can benefit be considered for backdating?**
- ▶▶▶ ● Housing Benefit and/or Council Tax Support is normally awarded from the Monday following the date of claim. The maximum backdated period for working age is one month for Housing Benefit and 6 months for Council Tax Support. If you are working age and you enter a date prior to one month ago your Housing Benefit will only be considered for one month. For claims where the claimant or partner is of pensionable age the maximum backdated period is 3 months for Housing Benefit and Council Tax Support.
- ▶▶▶ ● **What is a good reason?**  
Some examples are:-
  - Death of a close relative
  - Being in hospital or seriously ill (you must provide proof e.g. Doctors letter, Sickness Certificate)
  - Being wrongly advised by a person who should have known better e.g. CAB, Social Worker or DWP Staff
  - Language difficulties

**However, it is not a good reason simply not applying.**

## 15. APPLICATION CHECKLIST

Have you provided the following details and enclosures?

Your full name and address in the box provided.

Completed all sections of the form

**Original documents only for**

**Please tick box**

Proof of your identity (new applicants and partner's)

Self Employed Accounts

Proof of Earnings (Wage Slips or Certificate of Earnings)

Proof of other income

Current account statements for the last 2 months

Proof of savings, capital & investments

Proof of any relevant outgoing payments (see Part 12)

Tenancy details and proof of rent

Any other proofs relevant to your claim

## 16. BACKDATING

I wish to claim backdated Housing Benefit/Council Tax Support

For the period from  to

My name is

My present address is

The reason why I did not claim earlier is:

**If you need more space please attach a separate sheet**

## HOW WE COLLECT AND USE INFORMATION ABOUT YOU

### What we need

Horsham District Council will be what's known as the 'Controller' of the personal data you provide to us. The data we collect may include personal data and sensitive personal data. This may consist of name, address, bank details, health, work, financial details etc.

### Why we need it

We need to know your basic personal data in order to provide you with council services. We will not collect any personal data from you we do not need in order to provide and oversee these services. Information you provide will only be used for benefits and taxation related purposes.

### What we do with it

All the personal data we process is processed by our staff in the UK however for the purposes of IT hosting and maintenance this information is located on servers within the European Union. No 3rd parties have access to your personal data unless the law allows them to do so. In processing your data, we may also share it with the police, Horsham DC Housing Services, Parking Service, Waste collection and fraud agencies to protect the public purse and prevent crime.

### How long we keep it

The Council has a data retention schedule and the various service areas all have differing lengths of time they are required to keep data. In some cases, such as planning applications, this may be for a lifetime, but for other information e.g. correspondence this may only have a 2 year retention period. Please see our retention policy at [www.lgss-revs-bens.com](http://www.lgss-revs-bens.com) to see how long we will keep your data.

### What are your rights?

You have the right to request a copy of the information that we hold about you. If you would like a copy of some or all of your personal data please email [foi@horsham.gov.uk](mailto:foi@horsham.gov.uk) or write to us (Information Governance Officer, Horsham District Council, Parkside, Chart Way, Horsham, West Sussex RH12 1RL).

We want to make sure that your personal information is accurate and up to date. If at any point you believe the information we process on you is incorrect you may request to see this information and even have it corrected or deleted.

If you wish to raise a complaint on how we have handled your personal data, you can contact our Data Protection Officer who will investigate the matter.

If you are not satisfied with our response or believe we are not processing your personal data in accordance with the law you can complain to the Information Commissioner's Office (ICO).

Our Data Protection Officer can be contacted on [foi@horsham.gov.uk](mailto:foi@horsham.gov.uk) or by writing to the above address.

## CHANGES IN YOUR CIRCUMSTANCES

We use the information you have given us on this form to assess your claim for benefit. You MUST tell us straight away, in writing, about anything that changes and provide original proof of the change(s).

These are some examples of the changes you must report

- You stop receiving Income Support, Jobseeker's Allowance, Employment & Support Allowance, Pension Credit or Universal Credit.
- You move (even if you only move to a different room or flat within the same property)
- A child leaves school or leaves home or you have a baby
- Your child starts to be cared for, or stops being cared for, by a registered childminder, or nursery or playgroup
- Someone moves into or out of your home (including boarders and sub-tenants)
- Your income, or the income of anyone living with you, goes up or down
- You or anyone living with you is awarded a student grant or a student loan.
- You or anyone living with you goes into hospital or a nursing home, or goes into prison (even if this is on remand)
- You or anyone living with you gets a job, or changes their job, or becomes unemployed
- You or anyone living with you takes a second job
- You return to work after a period of illness where you have been receiving benefit
- You or anyone living with you has a change in capital or savings (this does not apply to people receiving Income Support, Jobseeker's Allowance (Income Based), Pension Credit (Guarantee Credit) or Employment & Support Allowance (Income Related) - you should notify the DWP)
- Your rent changes – unless you are a Council Tenant
- You receive a decision from the Home Office
- Someone starts to receive Carer's Allowance for looking after you or your partner
- If you change the bank account that we are paying your Housing Benefit into.
- **Anything at all** which is different from what you have told us on this claim form.

You must tell us about these changes in writing. If you don't tell us about the changes, you may lose money you are entitled to, or we may pay you too much benefit which we can ask you to repay.

If you're not sure about whether or not you need to tell us about a change - tell us anyway.

Our address is:

Horsham Revenue & Benefits  
PO Box 10745, NOTTINGHAM, NG6 6ED



## 17. DECLARATION

Please read the Declaration very carefully before you sign and date it. If you have a partner, he or she must sign it as well. If you do not sign it we will have to send the form back to you and this will delay your claim. Where the declaration says "I" or "me" or "my" this refers to both the claimant and his/her partner.

The Council can prosecute you if you give false information, or if you provide false or altered documents with your claim, or if you withhold information (including a change in your circumstances).

Please tick each box to confirm that you have read and understand the declaration.

- This is my claim for Housing Benefit, or Council Tax Support, or both.
- I will tell you if any of the details on any letter you send me are incorrect.
- The information I have given is true and complete.
- You can check any information on this form. This includes sending a Certificate of Earnings direct to my employer if necessary.
- I am not claiming Housing Benefit or Council Tax Support for any other address.
- I understand that you may contact government departments (for example the Department for Work and Pensions or the Home Office) or other local authority offices to check the information I have given on the form and to get other information.
- I understand that if I do not provide a National Insurance Number, my claim will not normally be dealt with.
- I will write to you straight away if there are any changes in my circumstances, so that you can work out my benefit again. If I do not, and I get too much benefit or discount, the Council can ask me to pay it back, and may prosecute me.

Signature of person claiming

Date

Partner's signature

Date

### Form filled in by someone other than the person claiming

Please tell us why you are filling in this form for someone else

Name of the person who filled in the form

Signature of person

Date

Relationship to the person claiming

If you wish to act as the personal representative of the person claiming benefit please complete the form on page 37 with the claimant's or partner's signature to authorise this.

Our address is:

Horsham Revenue & Benefits  
PO Box 10745, NOTTINGHAM NG6 6ED



# 18. EMPLOYER'S CERTIFICATE OF EARNINGS

TO BE COMPLETED IF WAGE SLIPS ARE NOT PROVIDED

PRIVATE AND CONFIDENTIAL

Council Tax Support/Housing Benefit

**PART 1 - To be completed by claimant**

Name and address

Occupation  Payroll number

**I authorise my employer to complete this form and return it to the Council**

Signed  Date

**Please now tear out this page and hand it to your employer**

**Part 2 - To be completed by employer**

I would be grateful if you could assist your employee by providing the information requested below and returning it to the address shown overleaf. Please give estimated figures if the above-named has been employed by you for less than the relevant period.

National Insurance (N.I.) Number  Tax Code

Earnings: Please give the last 5 weeks / 2 months / 3 fortnights pay

|                       | 1 Wk/Month*<br>ended | 2 Wk/Month*<br>ended | 3 Week<br>ended | 4 Week<br>ended | 5 Week<br>ended |
|-----------------------|----------------------|----------------------|-----------------|-----------------|-----------------|
| <b>Period Covered</b> | .....                | .....                | .....           | .....           | .....           |

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| Basic Gross pay<br>excl. Overtime, etc |  |  |  |  |  |
| Commissions,<br>Overtime, etc          |  |  |  |  |  |
| Income tax                             |  |  |  |  |  |
| National Insurance                     |  |  |  |  |  |
| Pension Conts<br>made by Employee      |  |  |  |  |  |
| Net Pay                                |  |  |  |  |  |

\* Please tick box if payment is made every four weeks

\* Please tick box where estimated figures are given

Gross pay date for the current tax year as at Week/Month No.  £

Income Tax to date  £

National Insurance to date  £

Private Pension to date  £

Average number of hours per week

# 18. EMPLOYER'S CERTIFICATE OF EARNINGS

## Part 2 - Continued

Method of payment (eg cash, cheque, direct to bank account)

Does your employee receive a bonus? Yes  No

If, Yes how much  £  per

In order that the Council may determine how far these weeks or months represent normal average earnings, please give details of any special fluctuations affecting gross payments, e.g. short weeks, overtime, seasonal earnings, bonus or commission, statutory sick pay, statutory maternity pay, etc.

Please give details and amounts of any expenses

Date of last rise  Amount of rise  £  per week/month

Date of pending rise  Amount of pending rise  £  per week/month

Date employment commenced

If employment commenced after 1 April last, please give gross earnings to date in your employ  £

Is your employee employed on a casual basis? Yes  No

## Part 3 - The employer is requested to sign this form and authenticate it with the firm's official stamp

I confirm that the information given is true and complete

Name  Position in firm

Business telephone number

Signature  Date

Employer's Address

Thank you for completing this certificate, which you should now return to

Horsham Revenue & Benefits  
PO Box 10745  
NOTTINGHAM  
NG6 6ED

**Authority 1**

1. Full name of person/organisation.

3. Relationship to claimant and/or partner.

4. Password (optional).

5. End date of authority to discuss

6. Any limitations as to what data to discuss

2. Full address of person/organisation

**Authority 2**

1. Full name of person/organisation.

3. Relationship to claimant and/or partner.

4. Password (optional).

5. End date of authority to discuss

6. Any limitations as to what data to discuss

2. Full address of person/organisation

**Authority 3 [if appropriate]**

1. Full name of person/organisation.

3. Relationship to claimant and/or partner.

4. Password (optional).

5. End date of authority to discuss

6. Any limitations as to what data to discuss

2. Full address of person/organisation

\* You have the right to withdraw this authority at any time

Signed by Claimant/Partner

Date

Name (in block capitals please)

## NOTES FOR LANDLORDS AND AGENTS



The Council administers Housing Benefit and helps people on low incomes pay their rent. Your tenant has given you this form as he asked that payments of Housing Benefit are made direct to you. Please be aware that it is not always possible for the Council to pay benefit to the landlord if the tenant's claim is dealt with under Local Housing Allowance (LHA) rules. Further information about LHA can be obtained from the Council's offices or their websites.

Before the Council can start to make any payments of Housing Benefit to which your tenant may be entitled, you should read these notes carefully and then sign the declaration on the front of this form. You should then return the form to the Council as soon as possible.



### **Payments of Housing Benefit (Rent Allowance)**

Payments are made at four-weekly intervals, normally at the end of the four weeks. Housing Benefit is not a payment of rent, but is assistance towards the rent. Any shortfall between the rent due and the Housing Benefit must be collected from your tenant.

If you have any queries regarding the amount of the Housing Benefit sent to you, you must ask your tenant. The Council cannot divulge any information regarding a claim to a third party unless your tenant gives the Council written authority to do so.



### **Landlord's and Agent's duty to report changes in circumstances**

If you receive direct payments of Housing Benefit, you must notify the Council immediately in writing if your tenant leaves the accommodation, if there is a rent increase or decrease, or if there is any other change in your tenant's circumstances which you might reasonably be expected to know could affect the amount of the benefit.

It is a criminal offence if you fail to do so.



### **Overpayments of Housing Benefit**

Overpayments of Housing Benefit can be recovered from either the tenant, or from the person to whom it was paid, i.e. the landlord or the agent.

If recovery of an overpayment is sought from you and you do not repay it, the Council can recover it from any future benefit entitlement that you may be eligible to receive in respect of any of your tenants. The recovery of such an overpayment will not affect the tenant's rent liability, such tenants will be deemed to have paid their rent to the full value of their benefit entitlement.

## 20. LANDLORD'S STATEMENT

### Name of tenant

I confirm the above-named rents accommodation at: .....

.....

.....

.....

### The Rent

What is the full rent payable  £

by your tenant?

per week, four weeks, calendar month, quarter

Date of the last rent increase

Does the rent include the following?

|                             |                       |                       |                       |                       |                       |
|-----------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Water rates                 | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Heating                     | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Lighting                    | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Hot Water                   | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Power for cooking           | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Other power                 | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Cleaning                    | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Laundering                  | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| General Counselling/Support | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| Meals                       | Yes                   | <input type="radio"/> | No                    | <input type="radio"/> |                       |
| If Yes,                     |                       |                       |                       |                       |                       |
| breakfast                   | <input type="radio"/> | lunch                 | <input type="radio"/> | evening meal          | <input type="radio"/> |

Is the rent in arrears? Yes  No

If Yes, how much rent are you owed?  £

### The Tenancy

On what date did the tenancy start?

On what date did your tenant move in?

How long is your tenant likely to stay?

### The Property

Do you own the property? Yes  No

How many rooms are there in the property?

Bedrooms

Living Rooms

Dining Rooms

Kitchens

Bathroom/WC

Other

Who else lives in the property other than the tenant named on this form?

### Landlord's Details

Your name and address

Telephone

Are you or your partner related to your tenant, their partner or any of their children?  
If Yes, please state relationship

I confirm that the information given is true and complete

Signed

Date

If you would like to add any further information please use a separate sheet.

**Thank you for your assistance. Would you please return the form direct to the address shown on the reverse of this form or hand it to your tenant.**



**After completion,  
please return this form by post to:-**

**Horsham Revenue & Benefits  
PO Box 10745  
NOTTINGHAM  
NG6 6ED**

**If you need help filling in this form  
you should contact the Benefits office  
by telephone or by email.**

**Phone Number  
0808 164 8610**

**A copy of this application can be made available in alternative formats,  
for example, large print, on computer disk, on tape or translated by  
contacting your local council on the number shown above.**

October 2019