

Housing Benefit and Council Tax Benefit claim form



Please tell us your full name and address.

Don't delay – claim today!

Please return this form as quickly as possible, even if you do not have everything we ask for. You can send the rest to us later.

Filling in the form

- Use blue or black ink to fill in the form. Do not use pencil. If you make a mistake, just cross it out and put the right answer next to it. Do not use correction fluid or tape. Please initial any alterations.
- Answer 'Yes or No' questions by ticking ✓ the relevant box. If you are picking an answer from a list of answers, put a tick in the relevant box. **Do not put a cross in any boxes.** If you answer a question with a cross or do not answer a question we will have to send the form back, and this will delay the claim.
- If someone fills in the form for you, there is a special space for them to sign in Part 15. You must sign Part 15 as well.
- If you need help filling in the form, we can help you. Please phone 01727 819403. If you are deaf or hard of hearing, please textphone 01727 819570 or visit the Customer Service Centre at the address below.
- **Please send the form back to us straight away to make sure you do not lose any benefit.** Your benefit will normally start from the Monday after we receive the form. In the form, we ask for proof of your income, rent and so on. If you don't yet have all the proof we need, send in the form now and send the proof later. You have 1 month from the date we receive the form to send in the proof.
- We will send you a receipt for this form within 5 working days. If you do not receive it, please contact us straight away.

Please return the form either by post to:

- Benefit Section, St Albans District Council Offices, Civic Centre, St Peter's Street, St Albans AL1 3JE

Or in person by visiting the Customer Service Centre at the District Council Offices:

Monday to Thursday 8.45am–4.45pm; Friday 8.45am–4.30pm

For office use	
1st Contact on	
Issued on	
Reference No.	

Notes for filling in the claim form

About this form

The Housing Benefit and Council Tax Benefit claim form has been specially designed to be easy to fill in. It is long, but we have to ask a lot of questions to make sure that everyone who claims gets the right 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.

Second Adult Rebate

Second Adult Rebate is Council Tax Benefit you can get if you share your home with someone who is not your partner, is on a low income, is 18 or over, and does not pay you rent.

If you are claiming Second Adult Rebate, only fill in Parts 1, 3, 13 and 15.

Evidence

We need to see evidence of some of the things you tell us about. The checklist at the end of the form will help you. If you are not sure if we need to see evidence of something, get in touch with us. We will tell you what we need to see. We cannot pay you benefit until we have seen the evidence we have asked for.

How we collect and use information

We will use the information you give in this form, and in any supporting evidence you send us, to process your claim for Housing Benefit, Council Tax Benefit and other Welfare Benefits.

We may pass the information to other agencies or organisations such as the Department for Work and Pensions and HM Revenue and Customs, as allowed by law. We may check information you have provided, or information about you that someone else has provided, with other information we hold. We may also get information about you from certain third parties, or give them information, to:

- make sure the information is accurate; and
- prevent or detect crime; and
- protect public funds.

These third parties include government departments, local authorities and private-sector companies such as banks and organisations that may lend you money.

We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows us to.

The Council is the data controller for the purposes of the Data Protection Act. If you want to know more about what information we have about you, or the way we use it, please ask us.

If we award benefit

If we decide to pay benefit, we will review your claim regularly. This may involve an unannounced visit to your home by our Visiting Officer. We may also post you a form that you should complete and return to us with all relevant supporting evidence.

Changes you must tell us about

Tell the Council's benefits section straight away if;

- any of your children leave school or leave home; or
- anyone moves in or out of your home (including lodgers, joint tenants and subtenants); or
- your income or the income of anyone living with you, including benefits, changes; or
- your capital, savings or investments change; or
- 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; or
- your rent changes; or
- you move house; or
- you or your partner are going to be away from home for more than a month; or
- 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.

If you don't tell us about these changes, 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 on the message.

It is an offence not to tell us about any change of circumstance that affects your benefit. We may take court action against you. If we pay you too much benefit, you will probably have to pay it back.

If you are just claiming Second Adult Rebate, only fill in Parts 1, 3, 13 and 15 of this form.

Office use only

Part 1 About you and your partner

Do you have a partner who normally lives with you?

A partner means a person you are married to or have a civil partnership with, or a person you live with as if you were their husband, wife or civil partner.

(A civil partnership is a formal arrangement that gives same-sex partners the same legal status as a married couple.) Even if your partner only comes home at weekends, or part of the week, you must include them

No

Yes

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

Surname or family name

Other names

Any other surnames or family names you have used, such as before marriage or in a previous marriage

Title (Mr, Mrs, Ms and so on)

Address

Do not tell us your partner's address if it is the same as yours.

Postcode

Postcode

What date did you move in to this address? (first spent the night there)

/ /

/ /

Your daytime phone number

You do not have to tell us this, but it may help us to deal with your claim more quickly.

What is this number?

Please tick.

Home Work Mobile Textphone

Home Work Mobile Textphone

E-mail address

We want to deal with your claim as quickly as we can and if we have your e-mail address we will contact you this way.

Date of birth

/ /

/ /

National Insurance number

You can find this on payslips or letters from social security or the tax office. We can decide your claim only if we see evidence that this is your National Insurance number (see part 16).

Letters Numbers Letter

If you do not have a National Insurance number, or cannot find it, tick this box.

Letters Numbers Letter

If your partner does not have a National Insurance number, or cannot find it, tick this box.

We must see evidence of you and your partner's identity and National Insurance number. If you or your partner are asylum seekers, you must provide your current Home Office letter. Read the checklist in part 16.

Are you living away from home at the moment?

No

Yes Tell us why you are not living at home.

When did you last live at home?

When do you expect to go back home?

/ /

/ /

Tell us the address where you are living at the moment.

Postcode

If your home has been sublet, tell us who lives there now.

Have you or your partner claimed Housing Benefit or Council Tax Benefit before?

You

No

Yes When did you claim?

/ /

Which council did you claim from?

What name did you claim in?

What address did you claim for?

Postcode

Your partner

No

Yes When did they claim?

/ /

Which council did they claim from?

What name did they claim in?

What address did they claim for?

Postcode

If you have moved home in the last 12 months, tell us your last address.

Postcode

Postcode

Were you the home owner, a private tenant, a council tenant or a boarder at this address?

Have you or your partner come to live in England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Islands or the Isle of Man in the last 2 years?

No

Yes We will write to you about this.

No

Yes We will write to you about this.

What is your nationality?

If your nationality is not British, on what date did you last enter the UK?

/ /

/ /

The UK is England, Northern Ireland, Scotland and Wales.

You

Your partner

Are you or your partner in hospital at the moment?

No

Yes When did you go in?

 / /

When will you come out (if you know this)?

 / /

No

Yes When did they go in?

 / /

When will they come out (if they know this)?

 / /

Do you or your partner get Disability Living Allowance?

No Yes

Do you or your partner get Attendance Allowance?

No Yes

Does anyone get Carer's Allowance for looking after you or your partner?

No Yes

Have you or your partner ever claimed Carer's Allowance or Invalid Care Allowance? Still tick 'Yes' if you claimed but were not paid any money.

No Yes

Do you or your partner have a vehicle from a mobility scheme?

No Yes

Are you or your partner a student?

No Yes

Do you study full time or part time?

Full time Part time

No Yes

No Yes

No Yes

No Yes

No Yes

No Yes

Do they study full time or part time?

Full time Part time

Tick if you or your partner are:

- an apprentice
- on youth training
- in legal custody
- severely mentally impaired
- registered blind
- long-term sick or disabled

-
-
-
-
-
-

You may be able to get more benefit if there are children in your household and they are:

- under 16; or
- aged 16 to 20 and in full-time further education or approved training.

Are there any children in your household?

No Go to Part 3.

Yes If there are more than 4 children, use a separate sheet of paper to tell us all the information we ask for on this page.

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

	First child	Second child	Third child	Fourth child
Surname or family name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<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"/>
What is the child's sex?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Usual address if different from yours	<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"/>
Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

We need to see proof of this.

Is the child registered blind? No Yes No Yes No Yes No Yes

Does the child get Disability Living Allowance? No Yes No Yes No Yes No Yes

Do you pay a registered childminder, nursery or after-school club any childminding costs for this child?

No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
	If yes, please tell us the name and registration number of the childcare provider.		If yes, please tell us the name and registration number of the childcare provider.		If yes, please tell us the name and registration number of the childcare provider.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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How much do you pay a week? How much do you pay a week? How much do you pay a week? How much do you pay a week?

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

Do any adults usually live with you and any partner you have?

No Go to Part 4.

Yes Answer all questions in this section.

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

Do not tell us about people who just share a hall, bathroom or toilet with you.

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

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.

First person

Second person

Third person

Surname or family name

Other names

Date of birth

 / /
 / /
 / /

Their relationship to you or your partner

Some examples are aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner, subtenant, lodger or friend.

When did they move in?

 / /
 / /
 / /

Do they get Income Support, income-based Jobseeker's Allowance, Pension Credit or Employment and Support Allowance (income-related)?

No

Yes

No

Yes

No

Yes

Do they get Disability Living Allowance or Attendance Allowance?

No

Yes

No

Yes

No

Yes

Are they registered blind?

No

Yes

No

Yes

No

Yes

Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?

No

Yes Tell us which.

No

Yes Tell us which.

No

Yes Tell us which.

Do they pay rent or money for board and lodgings to you or your partner?

No

Yes How much?

 £ a week

No

Yes How much?

 £ a week

No

Yes How much?

 £ a week

Are they severely mentally impaired?

No

Yes

No

Yes

No

Yes

Are they in legal custody at the moment?

No

Yes When are they expected to be released?

 / /

No

Yes When are they expected to be released?

 / /

No

Yes When are they expected to be released?

 / /

Are they in hospital at the moment?

First person

No
 Yes When did they go in?

/ /

When will they come out (if you know this)?

/ /

Second person

No
 Yes When did they go in?

/ /

When will they come out (if you know this)?

/ /

Third person

No
 Yes When did they go in?

/ /

When will they come out (if you know this)?

/ /

Do they normally work for 16 hours or more a week?

No
 Yes Tell us their earnings before any deductions.

£

No
 Yes Tell us their earnings before any deductions.

£

No
 Yes Tell us their earnings before any deductions.

£

Do they have any other income?
 This includes any benefits, allowances, tax or pension credits you have not told us about on this form and interest from savings and investments.

No
 Yes First other type of income

How much is it before deductions?

£ a week

Second other type of income

How much is it before deductions?

£ a week

Third other type of income

How much is it before deductions?

£ a week

No
 Yes First other type of income

How much is it before deductions?

£ a week

Second other type of income

How much is it before deductions?

£ a week

Third other type of income

How much is it before deductions?

£ a week

No
 Yes First other type of income

How much is it before deductions?

£ a week

Second other type of income

How much is it before deductions?

£ a week

Third other type of income

How much is it before deductions?

£ a week

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

No
 Yes Tell us their names.

is the partner of

And

is the partner of

We must see evidence of all income and interest from savings for the people shown above. Read the checklist in Part 16.

Do you rent your home?

No Go to Part 6.

Tick 'Yes' if you would pay rent but already get Housing Benefit.

Yes Answer all the questions in this section.

How much is the rent for your home?

£ every

(For example, every week/fortnight/4 weeks/month.)

What date did your tenancy start?

/ /

May we discuss the progress of your claim with your landlord? We will not disclose personal/income information.

No

Yes Please sign here.

I authorise the Council to discuss the progress of my claim with my landlord.

Signed

Date

Do you rent your home from the Council?

No

Answer all the questions in this section.

Tick 'Yes' if you would pay rent but already get Housing Benefit.

Yes

Go to Part 6.

What is your landlord's name and address?

By landlord we mean the person or organisation who owns the property you live in.

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.

Postcode

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

No

Yes What is the relationship?

is my landlord's or agent's

Related includes related through marriage, even if the marriage has ended. Some examples are exwife, ex-husband, aunt, brother, daughter, father, grandson, grandmother, son-in-law or stepdaughter. or agent's

Are you or your partner a director, shareholder or employee of your landlord?

No

Yes

Have you or your partner owned your current home in the last 5 years?

No

Yes

Does anyone else share the rent with you and your partner?

No

Yes Tell us their names and their relationship to you and your partner.

How much of the rent do you pay?

£ every

(For example, every week/fortnight/4 weeks/month.)

Has your rent been registered as a fair rent by a rent officer? No Yes

Are there any weeks when you do not have to pay rent? No Yes How many in a year?

Are you behind with your rent? No Yes By how many weeks?

Does your rent include money for the following? No Yes

Meals No Yes Which meals are included? All Breakfast Evening

Water authority charges No Yes

Heating No Yes

Lighting No Yes

Hot water No Yes

Fuel for cooking No Yes

Is anything included or separate from your rent that you have not already told us about?
 What is it?

Part 5 About where you live

What sort of building do you live in? Tick one box only.

- | | | |
|--|---|--|
| Detached house <input type="checkbox"/> | Flat in a house <input type="checkbox"/> | Caravan, mobile home or houseboat <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"/> | Hotel <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"/> |
| Detached Bungalow <input type="checkbox"/> | | |
| Other (please say what) <input type="text"/> | | |

How many rooms are there in the building?	In the whole building?	Just for you and your household?	That you share with other people?
Living rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedsitting rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms or shower rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Separate toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
What are these other rooms?	<input type="text"/>		

Do you use your home for business purposes?

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?

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

Part 6 About Income Support, income-based Jobseeker's Allowance, Pension Credit (Guaranteed Credit) and Employment and Support Allowance (income-related)

	You	Your partner
Are you or your partner getting Income Support, income based Jobseeker's Allowance, Pension Credit (Guarantee Credit) or Employment and Support Allowance (income related) at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you start getting it? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they start getting it? <input type="text"/> / <input type="text"/> / <input type="text"/>
Are you or your partner still waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance, Pension Credit (Guarantee Credit) or Employment and Support Allowance (income-related)?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you claim? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they claim? <input type="text"/> / <input type="text"/> / <input type="text"/>

Are you or your partner getting any of the benefits or credits listed below, or are you waiting to hear about benefits or credits you have claimed? Read the list of benefits and credits below and tell us about any that you or your partner are getting now or have claimed. Please put a line through any boxes that do not apply to you or your partner. We will need to see evidence of the benefit or credit, such as an award letter.

No Go to Part 8.
 Yes Tell us about the benefits below.

You

Your partner

Pensions	You			Your partner		
	Yes	How much do you get?	How often is it paid?	Yes	How much do they get?	How often is it paid?
State retirement pension	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Pension Credit (Savings Credit)	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Widow's Allowance or Bereavement Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Widowed Parent's Allowance or Widow's Pension	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
War Widow's or War Dependant's Pension	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
War Disablement Pension	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Industrial Injury/Disablement Pension	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Exceptionally Severe Disablement Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>

Benefits and allowances

Contribution-based Job Seeker's Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Child Tax Credit	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Working Tax Credit	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Employment Training Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Child Benefit	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Incapacity Benefit	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Employment and Support Allowance - contribution based	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Attendance Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Disability Living Allowance: Mobility Component	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Care Component	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Carer's Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Severe Disablement Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Maternity Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Fostering Allowance	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>
Any other benefit, pension or money from the government	<input type="checkbox"/>	£	<input type="checkbox"/>	<input type="checkbox"/>	£	<input type="checkbox"/>

Are you repaying a Social Fund loan or overpayment for any of these benefits? No Yes If yes, which one?

Have you or your partner deferred (put off) receiving a pension? No Yes If yes, please give details

Do you or your partner have any money coming in (or expect to have some money coming in) that you have not already told us about on this form? You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the Macfarlane Trust.

No Go to Part 9.
 Yes Answer the questions on this page. Please put a line through any boxes that do not apply to you or your partner.

	You			Your partner		
	Yes	How much do you get?	How often is it paid?	Yes	How much do they get?	How often is it paid?
Private Pension 1 paid by	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Private Pension 2 paid by	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
		Date of next increase	<input type="text"/> / <input type="text"/> / <input type="text"/>		Date of next increase	<input type="text"/> / <input type="text"/> / <input type="text"/>
Pension Protection Fund Payments	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Youth Training Scheme payment or Training Credits	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Maintenance for you	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Maintenance for your child - including CSA	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Student grant or loan	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Payments from boarders	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Weekly amount from letting or sub-letting part of a property	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Payments from a charity	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Any other income e.g. Redundancy or Loan Protection Payments (please give name)	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>

We must see evidence of any money or pension coming in before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as evidence.

Part 9 About working for an employer

	You	Your partner
Do you or your partner work for an employer?	No <input type="checkbox"/> Go to Part 10. Yes <input type="checkbox"/> Answer the questions in this part.	No <input type="checkbox"/> Go to Part 10. Yes <input type="checkbox"/> Answer the questions in this part.
Do you work for more than one employer?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Tell us about all the employers on a separate sheet of paper and send it with this form. Include all the information asked for below.		
If you are sending a separate sheet of paper, tick this box. <input type="checkbox"/>		
What kind of work do you do?	<input type="text"/>	<input type="text"/>

	You	Your partner
What is your employer's name and address?	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Postcode	Postcode
When did you start this job?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
How much do you get paid before tax and National Insurance are taken off?	£ <input type="text"/>	£ <input type="text"/>
How often do you get paid?	<input type="text"/>	<input type="text"/>
How are you paid? For example, in cash, by cheque or straight into a bank or building society account.	<input type="text"/>	<input type="text"/>
How many hours a week do you usually work?	<input type="text"/>	<input type="text"/>
Give details of any regular overtime, bonuses, commission or tips.	<input type="text"/>	<input type="text"/>
Are you getting Sick Pay, Maternity Pay, Paternity Pay or Adoption Pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
When did it start?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> How often? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> How often? <input type="text"/>

We must see 5 weekly, 3 fortnightly or 2 monthly consecutive pay slips before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as evidence.

Part 10 About being self-employed

	You	Your partner
Are you or your partner self-employed?	No <input type="checkbox"/> Go to Part 11. Yes <input type="checkbox"/> Answer the questions on this page.	No <input type="checkbox"/> Go to Part 11. Yes <input type="checkbox"/> Answer the questions on this page.
	You must send us your trading accounts for the last financial year. If you have only recently set up the business and do not have a full year's accounts, we will need to see some other evidence of your income. We will write to you about this.	
	You	Your partner
What kind of work do you do?	<input type="text"/>	<input type="text"/>

	You	Your partner
When did the business start?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is the business address?	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
Are you a Director of the business?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are there any other partners in the business?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their name and address.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their name and address.
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
How many hours a week do you usually work?	<input type="text"/>	<input type="text"/>
Do you get a Business Start-up Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?
	£ <input type="text"/>	£ <input type="text"/>
	How often?	How often?
	Every <input type="text"/>	Every <input type="text"/>
Do you pay into a private pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?
	£ <input type="text"/>	£ <input type="text"/>
	How often?	How often?
	Every <input type="text"/>	Every <input type="text"/>

We must see evidence of your earnings before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as evidence.

Part 11 About any other work

	You	Your partner
Do you or your partner do any other work? This could be voluntary work, therapeutic work or any other work.	No <input type="checkbox"/> Go to Part 12.	No <input type="checkbox"/> Go to Part 12.
	Yes <input type="checkbox"/> Answer the questions on this page.	Yes <input type="checkbox"/> Answer the questions on this page.
What other work do you do?	<input type="text"/>	<input type="text"/>
What is the name and address of the person you do this work for?	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode

Do you have other investments, redundancy payments, premium bonds, Tessas, ISAs, SAYE, cash etc? If yes, please give details. (Please also use this space if you need to tell us more about any of the above savings.)

No
Yes

--	--

Have you or your partner received any backdated benefit or deferred payments, such as State pension, which you have added to your savings?

No Yes If 'Yes' please give details.

--

Do you or your partner own or partly own any property or land except the home you live in, either in the UK or abroad? Tick 'Yes', even if you have a mortgage or loan for the property or land. This includes jointly owned properties.

No Yes What is the address?

Postcode

How much is it worth?

--

If you have a mortgage or loan for this, how much is left to repay?

--

Have you or your partner received a compensation payment relating to the Second World War?

No Yes

Part 13 Backdating

We can usually award benefit from the Monday after the day we get 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 before.

Tell us the date you want to claim benefit from.

/ /

Tell us all the reasons why you could not claim before today.

--

Part 14 Anything else you need to tell us

Use the box below to tell us anything else you think we should know about. Use a separate sheet of paper and attach it to this form if you need to.

If you are sending separate sheets of paper with this form, tell us how many.

Part 15 Declaration

Even if someone else has partly or fully filled in this form for you, you **MUST** sign this declaration if you can. If you have a partner, it would be helpful if they sign below to confirm that all the details about them are correct. Please read this declaration carefully before you sign and date it.

I understand the following:

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit or both, or to assess any discount or grant for Council services. You may check the information with other sources as the law allows.
- You may use any information I have provided for this and any other claim for social security benefits that I have made or may make. This includes any Discretionary Housing Payment. You may give some information to other government organisations, such as government departments and local councils, if the law allows this.

I know I must let the Council's Benefit Section know immediately in writing about any change in my circumstances or their circumstances of anyone living with me, which might affect my claim. If I do not, you may take action against me. This may include court action.

I declare that this is my claim for Housing Benefit and/or Council Tax Benefit and the information I have given on this form is correct and complete. I authorise the Council to make any necessary enquiries to check that the information is true and correct.

I have read and understood this declaration, and my responsibilities in reporting any changes in my circumstances to the Council.

Signature of person claiming

Date

Partner's signature

Date

If this form has been partly or fully filled in by someone who is not the person claiming, please tell us why you are filling in this form for the person claiming.

As far as possible, I have confirmed with the person claiming that the answers I have written on this form are correct. If I am making this claim on behalf of the above person, I understand that I am liable for what I have written on the form and accept that the declaration applies to me.

Name of the person who filled in the form

Signature of the person

Relationship to the person claiming

Date

/ /

Part 16 Checklist

Please tick to tell us what evidence you are sending with this form. We must see original documents, not copies. If you bring them to our reception, we will take the details we need and give you the documents back straight away.

If you do not provide all the evidence we need, we might not be able to pay you any benefit. We need the same evidence for your partner, if you have one, and for any other adults living in your home.

If you cannot send the evidence we need at the moment, send the form back to us now and send the evidence later. We can start to process your claim, but we will not be able to pay you any benefit until we have all the evidence. Please tell us now in Part 14 if you cannot supply the evidence within one month.

Evidence of identity

Such as a birth certificate, marriage certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit, current Home Office letter, EU identity card or recent gas or electricity bill. We may need to see several of these documents for each person.

Evidence of National Insurance number

Such as a National Insurance number card, payslips or letters from social security or the tax office.

Evidence of savings, investments and property

Such as all your bank, building society or post office books, full bank statements, or certificates for premium bonds, National Savings Certificates, ISAs, Tessas, stocks, shares and unit trusts. The evidence you send must show details for at least the last 2 months.

Evidence of earnings

This means your last 5 payslips if you are paid every week, your last 3 payslips if you are paid every 2 weeks, or your last 2 payslips if you are paid every month. We can send a form to your employer to fill in if you do not have these payslips. If you or your partner are self-employed, we need to see your accounts for the last financial year or, if you have been trading for less than 6 months, a summary of your trading records so far. We can supply a form.

Evidence of other income

Such as pension slips from a former employer or a letter from the court showing how much maintenance you are getting. We need to see evidence of any money people pay you for board and lodgings.

Evidence of benefits, allowances, tax credits, pension credits or pensions

Such as current award notices or letters from the Department for Work and Pensions confirming how much you get. If you do not have evidence, let us know straight away.

Evidence of private rent and tenancy

Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord, or we can supply a form.

Evidence of other money paid out

Such as letters about student grants or maintenance, or agreements or receipts from registered child carers.

Part 17 Equal Opportunities

The government has asked us to gather information about our customers' ethnic background. It's your choice whether to fill in this section. Please show which of the following groups you and your partner (if any) consider you belong to by ticking one box for you and one for your partner.

	You	Your partner
White		
British	<input type="checkbox"/>	<input type="checkbox"/>
Irish	<input type="checkbox"/>	<input type="checkbox"/>
Other white	<input type="checkbox"/>	<input type="checkbox"/>
Mixed		
White and black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
White and black African	<input type="checkbox"/>	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	<input type="checkbox"/>
Other mixed	<input type="checkbox"/>	<input type="checkbox"/>

	You	Your partner
Asian		
Asian British	<input type="checkbox"/>	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	<input type="checkbox"/>
Indian	<input type="checkbox"/>	<input type="checkbox"/>
Kashmiri	<input type="checkbox"/>	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	<input type="checkbox"/>
Other Asian	<input type="checkbox"/>	<input type="checkbox"/>
Black		
Black British	<input type="checkbox"/>	<input type="checkbox"/>
Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
African	<input type="checkbox"/>	<input type="checkbox"/>
Other black	<input type="checkbox"/>	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

Sexual orientation

Bisexual Gay Heterosexual Lesbian Prefer not to state

Religion

Religion is "any religion, religious belief, faith or similar philosophical belief"

Christianity Muslim Hindu Buddhist Jewish Sikh No Religion

Other If "Other" – please state

Part 18 How you will be paid and the choices you have.

- If you are awarded **council tax benefit** we will credit this to your council tax account.
- If you pay rent to a **private landlord** we will pay any benefit directly to you. If you feel this will cause you difficulties please ring 01727 819459 for a "Direct Payments to Landlord form"
- If you pay rent to a **Housing Association** you can either have your housing benefit paid to you or direct to your Housing Association Please "tick" how you would like to be paid

To myself To my Housing Association

Payment to you or your landlord will be made by direct credit to a current or basic bank account. Please complete the details of the account to be credited.

Name of bank/building society

Branch

Account name

Account number Sort code

Your signature: Please pay any Housing Benefit I may be entitled to by the method I have ticked. I understand that once I have selected a payment method, the Council cannot change it without written instructions. I understand that if payments go to my landlord or agent, they must agree in writing to any change.

If you have not got a **current or basic account**, and have previously been unable to open one, banks have leaflets giving details of the new Basic Bank Accounts you can open. With a Basic Bank Account you will receive a cash-machine card, which you can usually use to draw cash in post offices, but not a debit card, cheque book or overdraft.

How did you hear about Housing/ Council Tax Benefit?