

A CLAIM FORM FOR HOUSING BENEFIT AND COUNCIL TAX BENEFIT/DISCOUNT

(HELP WITH YOUR RENT AND COUNCIL TAX)



PLEASE TELL US YOUR FULL NAME AND ADDRESS

Official Use Only	Date of first contact	
	Claim form sent	
	Information Complete	
	Processed	Initials
	Claim Number	

Part 1 Some General Information

Fill in this form if you need help to pay your rent, your council tax or both. Please get in touch with us if you need any help or advice about filling in this form. Our address and telephone numbers are on part 17 of this form. We are here to help you.

When filling in this form please refer to the guidance notes which are on a separate sheet.

You must pay your full rent and council tax until we let you know if you can get benefit.

You are required to tell us about any changes that affect the amount of benefit you get. However, from time to time we will also randomly select claims for review. These reviews will be done by post, telephone or home visit.

If you are claiming Second Adult Rebate, only fill in Part 2, Part 4 and Part 17 of this form.

Please read the form carefully and answer all of the questions. When you have filled in the form return it to us at once, never delay – any delay may cost you money. Please answer by ticking (✓) the boxes that apply to you.

We will also use this form to check if you should have a single persons discount on your council tax.

Including yourself how many people aged 18 or over live at the above address?

Which benefit(s) do you want to claim?

Both Housing Benefit and Council Tax Benefit

Housing Benefit

Council Tax Benefit

Tell us which you are?

I am a council tenant

I am a private tenant

I am a boarder/lodger

I own and live in my own home

I am a housing association tenant

I am a sub tenant

When did you move in? (ddmmyy)

If you have not moved in tell us when you expect to move? You must tell us when you have moved in. (ddmmyy)

If you are a tenant when did your tenancy start? (ddmmyy)

Part 2 About you and your partner

Do you have a partner who normally lives with you?

No

Yes

We use *partner* to mean

- a person you are married to or a person you live with as if you are married to them, or
- a civil partner or a person you live with as if you are civil partners

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

Part 2 About you and your partner – continued

You

Your partner

Surname or family name

Other names

Any other names you have used

Include maiden names, all former married names and all changes of surname or family name.

Title (Mr, Mrs, Ms and so on)

Address

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

Date of birth (ddmmyy)

National Insurance number

You can find this on payslips or letters from Social Security or the tax office. We cannot decide your claim if we do not have your National Insurance number.

Letters	Numbers	Letter
<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"/>

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

Letters	Numbers	Letter
<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"/>

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

Your Landline phone number

What is this number?

home work textphone

home work textphone

Your Mobile phone number

Is it alright to text you about your claim?

No

No

Yes

Yes

Your e-mail address

I check my e-mail address regularly so you can e-mail me about my claim.

No I don't check regularly

No I don't check regularly

Yes I do check regularly

Yes I do check regularly

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

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

Part 2 About you and your partner – continued

You

Your partner

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

No
 Yes Tell us about it below.

No
 Yes Tell us about it below.

When did you last claim?

(ddmmyy)

(ddmmyy)

What name did you use for the claim?

What address did you claim for?

Postcode

Postcode

Are you or your partner in hospital at the moment?

No Yes Tell us about it below.

No Yes Tell us about it below.

When did you go in?

(ddmmyy)

(ddmmyy)

Do you or your partner get Attendance Allowance or Disability Living Allowance for care?

No
 Yes We need to see proof of this

No
 Yes We need to see proof of this

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

No
 Yes We need to see proof of this

No
 Yes We need to see proof of this

Have you or your partner been told that you are entitled to Carers Allowance, even if you do not receive it, because you are getting another benefit instead?

No
 Yes We need to see proof of this

No
 Yes We need to see proof of this

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

No
 Yes

No
 Yes

Are you or your partner registered as blind?

No
 Yes

No
 Yes

Are you or your partner living away from home at the moment?

No
 Yes Tell us your present address

No
 Yes Tell us their present address

Postcode

Postcode

What is your nationality?

If your nationality is not British, on what date did you last enter and apply to stay in the UK?

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

(ddmmyy)

(ddmmyy)

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 What date did you arrive in the UK?

No
 Yes What date did you arrive in the UK?

(ddmmyy)

(ddmmyy)

We will write to you about this

We will write to you about this

Have you come to live in England as the result of a maintenance undertaking?

No If yes, tell us about it.
 Sponsors' name & address

Yes Home Office reference

Date of undertaking

We need to see proof of your identity and National Insurance Number. We also need to see the same for your partner if you have one. We must see two original documents such as a birth certificate, passport, or driving licence. If you have sent these to us within the last year we do not need to see them again.

Part 3 About children

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

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

Are there any children in your household as described above?

No Go to **Part 4**.

Yes Tell us about the children you want to claim for. If you want to claim for more than 3 children, use a separate sheet of paper.

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

	First child	Second child	Third child
Surname or family name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth (ddmmyy)	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<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"/>
Usual address if different from yours	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them? We need to see proof of this.	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the child registered blind or getting Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?
Care	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Mobility	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Do you pay any child-minding costs for this child? For example, to a child-minder, nursery or after-school club.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below
Tell us the name and registration number of the minder.	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do you pay a week?	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week

We need to see proof of this. We need to see proof of this. We need to see proof of this.

We need to see proof that your child-minder, nursery or after-school club is registered and proof of the amount you pay. We also need to see proof of any Disability Living Allowance you get for any of your children.

Part 4 About other people who live with you

Do any adults normally live with you and your partner?

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

No Go to **Part 5**.

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

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

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

We call these people partners.

No

Yes Tell us their names below:

is the partner of:

And

is the partner of:

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

First person

Second person

Third person

Last name

Other names

Date of birth (ddmmyy)

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--

Their relationship to you or your partner

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

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

No

Yes

No

Yes

No

Yes

Do they get Disability Living Allowance or Attendance Allowance, or 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

No

Yes

No

Yes

Part 4 About other people who live with you – continued

	First person	Second person	Third person
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below
How much?	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
Are they severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below
When are they expected to come out? (ddmmyy)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below
When did they go in? (ddmmyy)	<input type="text"/>	<input type="text"/>	<input type="text"/>
When are they expected to come out? (ddmmyy)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before deductions	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before deductions	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before deductions
	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Do they have any other income at all? Make sure you tell us about all other income they have. This includes any benefits or allowances you have not told us about on this form and interest from savings and investments.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below
1 Where does this income from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/> Every	£ <input type="text"/> Every	£ <input type="text"/> Every

We need to see proof of the earnings, income and interest of any other people in your home *unless* they are a boarder or sub-tenant who pays a rent to you or your partner.

If you do not send us this proof we will have to make the highest rate of deduction for these people. If any of these people are unwilling to give you this proof we may be able to contact them direct to get it. If you would like us to do this please write and let us know.

Part 4 About other people who live with you – continued

	First person	Second person	Third person
2 Where does this income come from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/> Every	£ <input type="text"/> Every	£ <input type="text"/> Every
3 Where does this income come from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/> Every	£ <input type="text"/> Every	£ <input type="text"/> Every
Do they have any other income or interest from investments that you have not told us about?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about it below	Yes <input type="checkbox"/> Tell us about it below	Yes <input type="checkbox"/> Tell us about it below
	<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 5 About being self-employed

Are you or your partner Self-employed?

No Go to **Part 6**

Yes Please 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 proof 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"/>
When did the business start? (ddmmyy)	<input type="text"/>	<input type="text"/>
What is the business address?	<input type="text"/> <input type="text"/> Postcode	<input type="text"/> <input type="text"/> Postcode
Do you have any business partners?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us their name and address	Yes <input type="checkbox"/> Tell us their name and address
	<input type="text"/> <input type="text"/> Postcode	<input type="text"/> <input type="text"/> Postcode

Part 5 About being self-employed – continued

	You	Your partner
How many hours a week do you 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 and how often?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?
	£ <input type="text"/> Every	£ <input type="text"/> Every
Do you get Return to Work Credit (RTWC)?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?
	£ <input type="text"/> Every	£ <input type="text"/> Every

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

Do you pay into a private pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?
	£ <input type="text"/> Every	£ <input type="text"/> Every

We will need to see proof of these payments.

Part 6 About working for an employer

Do you or your partner work for an employer? No Go to Part 7
Yes Please answer the questions on this page.
If you work for more than one employer, tell us about all the employers on another piece of paper and send it with this form.

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

	You	Your partner
What kind of work do you do?	<input type="text"/>	<input type="text"/>
What is the name and address of who you do this work for?	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>
When did you start this job?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (ddmmyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (ddmmyy)
Are you employed for a limited period?	No <input type="checkbox"/> Yes <input type="checkbox"/> When will you finish?	No <input type="checkbox"/> Yes <input type="checkbox"/> When will you finish?
	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (ddmmyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (ddmmyy)

Part 6 About working for an employer – continued

You

Your partner

How much do you get paid and how often?

£ Every

£ Every

How are you paid? for example in cash, by cheque or straight into a bank or building society account.

When was your last pay rise?

 (ddmmyy)

 (ddmmyy)

When will your next pay rise be?

 (ddmmyy)

 (ddmmyy)

How many hours a week do you work?

Are you getting Statutory Sick Pay (SSP), Statutory Paternity/ Maternity Pay (SMP/SPP) or Adoption Pay from your employer at the moment?

No

Yes

No

Yes

Are you getting any other sick pay or maternity pay from your employer at the moment?

No

Yes

No

Yes

Are you getting Return to Work Credit (RTWC)?

No

Yes How much and how often?

No

Yes How much and how often?

£ Every

£ Every

Do you pay into a private or company pension scheme?

No

Yes How much and how often?

No

Yes How much and how often?

£ Every

£ Every

We must see proof of any earnings before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as proof. If you get tips or bonuses not included in your wages, tell us about these in Part 7.

Part 7 About any other work

Do you or your partner do any other work at all?

This could be voluntary work or any other work, even if it is not paid work.

No Go to **Part 8**

Yes Tell us about it below.

You

Your partner

What other work do you do?

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

 Postcode

 Postcode

Part 7 About any other work – continued

	You	Your partner
When did you start this work? (ddmmyy)	<input type="text"/>	<input type="text"/>
How many hours a week do you usually work?	<input type="text"/>	<input type="text"/>
Do you get paid? If you only get expenses or tips, still tick 'Yes' and give details.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below
How much do you get paid and how often?	£ <input type="text"/> Every	£ <input type="text"/> Every
Do you get Return to Work Credit (RTWC)?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often?
	£ <input type="text"/> Every	£ <input type="text"/> Every

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

Part 8 About benefits, pensions and allowances

In this part please tell us about any benefits, pensions or allowances that you or your partner are getting now or have claimed but are still waiting to hear if you will get anything.

Do you or your partner get any benefits, pensions or allowances or have either of you claimed any but have not yet heard if you will get anything?

No Go to Part 9
Yes Tell us about these benefits, pensions or allowances below.

Income Support, Pension Credit or Jobseekers Allowance

	You		Your partner	
	How much?	How often?	How much?	How often?
Income Support	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Pension Credit Guarantee Credit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Pension Credit Savings Credit	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Income-based Jobseekers Allowance	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Contribution-based Jobseekers Allowance.	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>

Pensions and benefits at retirement

	You		Your partner	
	How much?	How often?	How much?	How often?
State Retirement Pension	£		£	
Widows Pension	£		£	
Occupational or Private Pensions (1st)	£		£	
Date of next increase (ddmmyy)				
Occupational or Private Pensions (2nd)	£		£	
Date of next increase (ddmmyy)				
Tell us who pays these Occupational or Private Pensions and their address				

Benefits and allowances for disability

	You		Your partner	
	How much?	How often?	How much?	How often?
Attendance Allowance	£		£	
Carer's Allowance	£		£	
Constant Attendance Allowance	£		£	
Disability Living Allowance for care	£		£	
Disability Living Allowance for mobility	£		£	
Employment & Support Allowance (ESA)	£		£	
Incapacity Benefit	£		£	
Industrial Death Benefit	£		£	
Industrial Disablement Benefit	£		£	
Industrial Injuries Benefit	£		£	
Severe Disablement Allowance	£		£	

Other Benefits and allowances for families, parents and widows

	You		Your partner	
	How much?	How often?	How much?	How often?
Bereavement Allowance	£		£	
Child Benefit	£		£	
Custodian or Adoption Allowance	£		£	
Guardian's or Fostering Allowance	£		£	
Maintenance payments for you or your children	£		£	
Maternity Allowance	£		£	
Widowed Mother's Allowance	£		£	
Widowed Parent's Allowance	£		£	

Tax Credits

	You		Your partner	
	How much?	How often?	How much?	How often?
Child Tax Credit	£		£	
On what date is it due to end? (ddmmyy)				
Working Tax Credit	£		£	
On what date is it due to end? (ddmmyy)				

War and Armed Forces Pensions

	You		Your partner	
	How much?	How often?	How much?	How often?
Armed Forces Pension	£		£	
War Disablement Pension	£		£	
War Pension	£		£	
War Widow's/Widower's Pension	£		£	

Part 8 About benefits, pensions and allowances – continued

Do you or your partner get any other benefit, pension or allowance not already listed in **Part 8** or are you waiting to hear about it?

No Go to **Part 9**

Yes Please answer the following questions.

If 'yes', tell us what this income is, how much you or your partner get and how often it is paid

If you or your partner have claimed but have not been paid or are due to get any other income, tell us here

**We need to see proof of all the benefits, pensions, allowances and Tax Credits that you and your partner receive. This should be a notification letter or order book if you are paid that way. We need to see all the pages of a notification letter.
Read the checklist at Part 16 to see what you can use as proof.**

Part 9 About being a student

In this part tell us if you or your partner are a student. By student we mean anyone who is attending a course of study at an educational establishment, including student nurses.

Are you or your partner a student?

No Go to **Part 10**

Yes Tell us about you and, or your partner's course and income below.

You

Your partner

Tell us the name of the course and the name and address of the college or university.

Is the course full-time or part-time?

Start

End

Start

End

What date does the academic year start and end? (ddmmyy)

If you get a grant how much is it and how often is it paid?

£	Every
---	-------

£	Every
---	-------

If you get a student loan how much is it and how often is it paid?

£	Every
---	-------

£	Every
---	-------

If you get money from your parents or a deed of covenant, how much is it and how often is it paid?

£	Every
---	-------

£	Every
---	-------

We must see proof of any grant, covenant or other income, you or your partner get for being a student. We must also see proof of any student loan that you or your partner get.

Part 10 About money you pay out

Do you or your partner help to support a son or daughter under 25 who is at college or university?

No Go to **Part 11**

Yes Tell us about what you pay below.

	You	Your partner
How much do you give them and how often do you give it?	£ Every	£ Every

We must see proof of how much you give them and their grant assessment form if they get a grant.

Part 11 About other money coming in

Do you or your partner have any money coming in that you have not already told us about on this form, or are you owed any money, or have you delayed receiving any other money?

No Go to **Part 12**
 Yes

This includes maintenance or child support for you, your partner or any of the children you have told us about on this form; and any cash payments, or rent from land or property, money from a trust fund, student grants or loans. Also tell us about any money you get from people living in your house as boarders, lodgers or sub-tenants. You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust, or the Skipton Fund.

Tell us about the money in the boxes below

Other money 1

What is the money for?

Who gets it?

How much do they get and how often?

When did they start getting this income? (ddmmyy)

£ Every

Other money 2

What is the money for?

Who gets it?

How much do they get and how often?

When did they start getting this income? (ddmmyy)

£ Every

Other money 3

What is the money for?

Who gets it?

How much do they get and how often?

When did they start getting this income? (ddmmyy)

£ Every

Part 11 About other money coming in – continued

Does anyone owe money to you or your partner?

No

Yes What for and how much?

how much? £

Are you or your partner expecting to get any money in the next 12 months, for example, a redundancy payment or a payment instead of notice or a holiday?

No

Yes What for and how much?

how much? £

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

Part 12 About bank accounts, savings, investments and property

We need to know if you or your partner have any bank accounts, savings, investments or property in the UK or abroad.

This includes cash, current accounts and savings accounts with a bank or building society, Post Office accounts, premium Bonds, National Savings Certificates and stocks and shares.

Please answer all the following questions:

Do you or your partner have any bank accounts?

No

Yes Tell us about **bank accounts**. If there are more than 2 bank accounts, tell us about the others on a separate piece of paper and send it with this form.

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

Name of bank

Name of bank

Account number

Account number

What name is the account in?

What name is the account in?

How much is in the account?

£

How much is in the account?

£

We must see account statements/passbooks showing the last 2 months' transactions.

Do you or your partner have any building society accounts?

No

Yes Tell us about **building society accounts** on the next page. If you have more than 2 building society accounts, tell us about the others on a separate piece of paper and send it with this form.

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

Name of building society

Account number

What name is the account in?

How much is in the account?

Name of building society

Account number

What name is the account in?

How much is in the account?

We must see account statements/passbooks showing the last 2 months' transactions.

No

Yes Tell us about **post office accounts**. If you have more than 2 post office accounts, tell us about the others on a separate piece of paper and send it with this form.

Do you or your partner have any post office accounts?

This includes savings accounts, Girobank accounts and post office card accounts.

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

Type of account

Account number

Whose name is the account in?

How much is in the account?

Type of account

Account number

Whose name is the account in?

How much is in the account?

We must see account statements/passbooks showing the last 2 months' transactions.

No

Yes Value.

£

Do you or your partner have any premium bonds?

We must see these premium bonds to confirm how much they are worth.

No

Yes Tell us about these below.

Do you or your partner have any National Savings Certificates?

Issue number

Value

How many?

Issue number

Value

How many?

We must see these National Savings Certificates to confirm the number held.

Do you or your partner have any stocks, shares, bonds or unit trusts?

No

Yes Tell us about this below

Company name

How many?

Company name

How many?

We must see the share certificates or warrants to work out how much they are worth.

No

Yes Tell us about this below

We must see proof of these, for example, certificates or letters from the company.

Have you or your partner, received

- a Far Eastern Prisoners of War Compensation payment?
- a compensation payment made to victims of atrocities that happened during the second world war

No

Yes Tell us about this below

How much?

£

Is it included in your savings shown above?

No

Yes

We need to know this to make sure we do not count it as part of your savings.

Have you or your partner received a payment from the VCJD (Creutzfeldt-Jakob Disease) Trust?

No

Yes We will write to you about it.

Do you or your partner own or partly own any land or property other than the house you live in?

No Go to **Part 13**.

Yes What is the address?

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

What is your estimate of how much the property or land is worth?

£

Do you or your partner have a mortgage or loan on the property?

No

Yes

If 'yes', how much do you or your partner still owe?

£

Does an elderly or disabled relative live in the property?

No

Yes

We need to see proof of any mortgage on this property – a statement or letter from the lender, for example.

Part 12 About bank accounts capital, savings, investments and property – continued

Does a former partner live in the property? No
Yes

Are you or your partner trying to sell the property? No
Yes

If the property is for sale, how long has it been on the market? months

We need to see proof that you are selling the property – such as a letter from the estate agent.

We may also need to get a valuation of any land or property, we will write to you if we do.

We must see proof of any accounts, savings, investments or property before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as proof.

Part 13 About rent

Do you pay any rent for your home? No Go to Part 14
Yes

Do you pay rent to the Council? No Read on
Yes Go to Part 14

If you pay rent to a Housing Association or Private Landlord you will need to complete a separate form called “Rent/Payment Details”. This will give us the information we need to work out any housing benefit you may get. If you do not have a form and want to claim housing benefit (help with your rent), please tick (✓) the box and we will send you one.

Part 14 Backdating

We can usually award benefit from the Monday after the day we receive your claim. Sometimes we can pay benefit from an earlier date if you have a good reason for not claiming earlier. If you want us to consider paying your benefit from an earlier date, tell us when you want benefit from and why you did not claim earlier. Our backdating claims policy is available on www.sholland.gov.uk or on request.

I would like to claim benefit from (ddmmyy)

During this earlier period, were your circumstances different to those you have told us about on this form? No
Yes Tell us about this below.

What has changed? We need proof of change of circumstances for this period

Why you have not claimed before?

Part 15 Anything else you need to tell us

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

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

Part 16 Checklist

Please tick to tell us what proof you are sending with this form or sending later. We must see **original** documents, not copies.

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

If you cannot send the proof we need at the moment, send the form back to us now and send the proof later. We can register your claim, **but we will not be able to pay you any benefit until we have all the proof.** We will try to work out your benefit within 14 days of getting the **FINAL** information from you. Please get in touch if you have not heard from us within 21 days.

Please do not send valuable items through the post. If you can, bring them into our reception. We will take the details we need and give you the documents back straight away. If you cannot get into the office, phone us for more advice.

Please tick the box if you plan to send proof later.

Proof of your address

Such as recent gas or electric bill or TV Licence.

Proof of National Insurance Number

Such as a National Insurance Number Card, Payslips or letters from social security or the tax office.

Proof of capital, savings and investments

Such as all your bank, building society or post office books, full bank statements, or certificates for premium bonds, National Savings certificates, ISAs, stocks, shares and unit trusts.

We need to see proof of any interest or dividends you get on investments and savings.

Any proof to support your claim must cover the last 2 calendar months.

Proof of earnings

We also need to see this for any other adults living in your home.

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. You can also ask who you work for to fill in a Certificate of Earnings, available on request if one has not been enclosed.

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 have a form for this purpose called an SE1.

Proof of other income

We also need to see this for any other adults living in your home.

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 proof of any money people pay you for board and lodgings.

Proof of benefits, allowances, tax credits or pensions

Such as award notices, order books, letters from Social Security or Inland Revenue confirming how much you get.

If you do not have proof, let us know straight away.

Proof of private rent and tenancy

Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord.

Proof of other money paid out

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

Proof of Identity

Such as a birth certificate, marriage or civil partnership certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit, EEC identity card or recent gas or electricity bill.

We need to see at least 2 of these documents for each person.

PLEASE REMEMBER YOUR BENEFIT CANNOT BE WORKED OUT UNTIL WE HAVE RECEIVED ALL THE INFORMATION ASKED FOR.

Please make sure you read and sign the declaration on part 17 page 20.

Part 17 Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, getting them to sign this form should allow us to process your claim more quickly, but they do not have to sign.

Please read this declaration carefully before you sign and date it.

- **I declare** that the information I have given on this form is correct and complete as far as I know and believe.
- **I understand** that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.
- **I agree** that you will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit, or both. You may check some of the information with other sources as allowed by the law.
- **I understand** that you may use the information I have provided in connection with this and any other claim for social security benefits that I have made or may make. You may give some information to other organisations, such as government departments, local authorities and private-sector companies such as banks and organisations that may lend me money, if the law allows this.
- **I understand** that South Holland District Council is under a duty to protect the public funds it administers, and to this end may use the information I/we have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information see <http://www.sholland.gov.uk/council/fraud/corporate#nfi> or contact Customer Services at South Holland District Council on 01775 761161.
- **I know** that I must let you know in writing straight away about any change in my circumstances which might affect my claim.

Signature of person claiming

Partner's Signature

Date (ddmmyy)

Date (ddmmyy)

If this form has been filled in by someone other than the person claiming, please tell us why?

I declare that as far as possible, I have confirmed with the person claiming that the answers I have written on this form are correct.

Name of the person who filled in the form

Signature of the person

Relationship to the person claiming

Date (ddmmyy)

IF YOUR CIRCUMSTANCES CHANGE YOU MUST TELL US AT ONCE TO AVOID YOU HAVING TO PAY MONEY BACK LATER

WARNING: YOU MAY BE PROSECUTED IF YOU GIVE FALSE INFORMATION

Please telephone our 24 HOUR FREEPHONE hotline on 0800 085 1737 if you suspect anyone of fraud

How to contact us:

Please return this form to, or write to us at:

South Holland District Council
Customer Services
PO Box 8
Priory Road,
Spalding, Lincs PE11 2XQ

Call in and see Customer Services at the Council Offices in Priory Road, Spalding any weekday from 8.30am to 5.15pm except on Fridays when we close at 4.45pm.

Ring us on 01775 761161 and tell the operator that you have a benefit enquiry so they can put you through to the right person.

Fax us on 01775 711253

e-mail us using info@sholland.gov.uk

Visit us at www.sholland.gov.uk

