

Housing Benefit and Council Tax Benefit claim form



THURROCK  **COUNCIL**

Please fill in this box in CAPITALS

Name
Address
Postcode

Office use only (D.F.C.)	
Date issued	/ /
Date received	/ /
Date returned (if different)	/ /
Claim number	/ /
Date action taken	/ /
HB No.	

Please return this claim form with all your supporting evidence. Failure to return this form to us within 30 days will result in your claim only being considered from the Monday following receipt of your form with all the supporting evidence.

Don't delay - claim today!

For general questions or advice, telephone the Benefits Hotline 01375 652950

FAILURE TO RETURN THIS FORM TO US WITHIN 30 DAYS WILL RESULT IN YOUR CLAIM ONLY BEING CONSIDERED FROM THE MONDAY FOLLOWING RECEIPT OF YOUR FORM AND ALL SUPPORTING EVIDENCE.

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 fail to answer a question, we will have to send the form back, and this will delay the claim.

Please return the form either by post or in person to:

- Thurrock Council, PO Box 1, Civic Offices, New Road, Grays, Thurrock, Essex RM17 6LT
Open 9.00am to 4.30pm Monday to Friday
or in person to any of the local Council Offices (Ockendon and Tilbury offices also open 9.00am - 12.30pm Saturday)

If you cannot get out of the house easily and there is nobody who can help you fill in the form, we can come and help you. Please telephone us on the Benefits hotline below.

You can contact us on 01375 652950 (Benefits Hotline)

Please complete this form if you need help with either your Council Tax or Rent Payments.



INVESTOR IN PEOPLE

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; and
- is 18 or over; and
- is on a low income; 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.

When we usually pay benefit from

If this is your first claim: We will usually pay your benefit from the Monday after we get your form.

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 and Council Tax Benefit.

We may pass the information to other agencies or organisations such as the Department for Work and Pensions and the Inland Revenue, 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.

Changes you must tell us about

Tell us straightaway if:

- any of your children leaves school or leaves home; or
- anyone moves in or out of your home (including lodgers 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.

Housing Benefit and Council Tax Benefit claim form



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?

By partner we mean a person of the opposite sex or of the same sex who you are married to or live with as if you are married or in a civil partnership. 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.

You

Your partner

Surname or family name	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>
Any other surnames or family names you have used	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs, Ms and so on)	<input type="text"/>	<input type="text"/>
Address Do not tell us your partner's address if it is the same as yours	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
Date of birth	<input type="text" value=" / /"/>	<input type="text" value=" / /"/>
What date did you move in to this address? i.e. first spent the night there	<input type="text" value=" / /"/>	<input type="text" value=" / /"/>
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 see evidence that this is your National Insurance number (see part 17).	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>
	If you do not have a National Insurance number, or cannot find it, tick this box. <input type="checkbox"/>	If your partner does not have a National Insurance number, or cannot find it, tick this box. <input type="checkbox"/>
Your daytime phone number	<input type="text"/>	<input type="text"/>
Your email address You do not have to tell us these, but it may help us to deal with your claim more quickly.	<input type="text"/>	<input type="text"/>

You

Your partner

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

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

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

Have you told the council that you have moved?

No Date left
 Yes /

 Postcode

No Date left
 Yes /

 Postcode

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

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.

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)?

 /

You

Your partner

Do you or your partner get Disability Living Allowance?

No
 Yes How much?

Care: £

Mobility: £

No
 Yes How much?

Care: £

Mobility: £

Do you or your partner get Attendance Allowance?

No
 Yes How much?

£

No
 Yes How much?

£

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

No
 Yes

No
 Yes

Note: Invalid Care Allowance was renamed Carer's Allowance from 1 April 2003

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
 How often?

Every

No
 Yes
 How often?

Every

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

No
 Yes

No
 Yes

Are you or your partner a student?

No
 Yes

No
 Yes

Do you study full time or part time?

Full time Part time

How much of your income is taken into account when working out your grant?

£ a year

Do they study full time or part time?

Full time Part time

How much of their income is taken into account when working out their grant?

£ a year

Please 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

-
-
-
-
-
-

We must see evidence of your 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 17.

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

- under 16; or
- aged 16 or 17 and registered for work or youth training; or
- aged 16, 17 or 18 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?

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? We need to see proof of this.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
If over 15 years old, the expected school-leaving date	<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"/>
Does the child have any savings, such as bank, building society or other accounts?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
How much are their savings?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
	We need to see evidence of this.	We need to see evidence of this.	We need to see evidence of this.	We need to see evidence of this.
Is the child registered blind?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	We need to see evidence of this.	We need to see evidence of this.	We need to see evidence of this.	We need to see evidence of this.

Part 2 About children – continued

	First child	Second child	Third child	Fourth child
Does the child get Disability Living Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?
	Care: £	Care: £	Care: £	Care: £
	Mobility: £	Mobility: £	Mobility: £	Mobility: £
Do you pay a registered childminder, nursery or after-school club any childminding costs for this child?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us the name and registration number of the minder.	Yes <input type="checkbox"/> Tell us the name and registration number of the minder.	Yes <input type="checkbox"/> Tell us the name and registration number of the minder.	Yes <input type="checkbox"/> Tell us the name and registration number of the minder.
	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?
	£	£	£	£
	We need to see evidence of this.	We need to see evidence of this.	We need to see evidence of this.	We need to see evidence of this.

Part 3 About other people who live with you

Do any adults usually live with you and any partner you have? By adults we mean people over 16 who nobody gets Child Benefit for.

- No Go to Part 4.
 Yes Answer all questions in this section.

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?	/ /	/ /	/ /

	First person	Second person	Third person
Do they get Income Support, income-based Jobseeker's Allowance or Pension Credit?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do they get Disability Living Allowance or Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week
Are they registered blind?	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 a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <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"/> When are they expected to be released? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to be released? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to be released? <input type="text"/> / <input type="text"/> / <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out (if you know this)? <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 any deductions. £ <input type="text"/> We need to see evidence of their earnings.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. £ <input type="text"/> We need to see evidence of their earnings.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. £ <input type="text"/> We need to see evidence of their earnings.

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

First person	Second person	Third person
No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> Name of first other income	Yes <input type="checkbox"/> Name of first other income	Yes <input type="checkbox"/> Name of first other income
<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	How much is it before deductions?	How much is it before deductions?
£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
Name of second other income	Name of second other income	Name of second other income
<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	How much is it before deductions?	How much is it before deductions?
£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
Name of third other income	Name of third other income	Name of third other income
<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	How much is it before deductions?	How much is it before deductions?
£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
We need to see evidence of all other incomes.	We need to see evidence of all other incomes.	We need to see evidence of all other incomes.

Are any of the people who normally live with you married to each other or living together as if they were 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 17.

Office use only

What sort of tenancy do you have?

For example, shorthold, assured tied, introductory or something like this.

Do you have a written tenancy agreement?

No

Yes Please supply this

How long is the tenancy for?

 / / to / /

Please tick to show if the property is let as:

furnished

That is, completely furnished

partly furnished

That is, some furniture, but not all

minimally furnished

That is, just two or three items

unfurnished

That is, no furniture at all

How much is the rent for your home?

£ every

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

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 changed in the last 12 months?

No

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

When is the next rent increase due?

 / /

Has your rent been registered as a fair rent by a rent officer?

No

Yes Please send us the notice of registration (R05).

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?

Part 4 About rent – continued

Does your rent include money for the following?

Meals

No

Yes

How much each week?

£

Which meals are included?

All

Breakfast

Evening

Water authority charges

No

Yes

How much each week?

£

Heating

No

Yes

How much each week?

£

Lighting

No

Yes

How much each week?

£

Hot water

No

Yes

How much each week?

£

Fuel for cooking

No

Yes

How much each week?

£

Laundry done for you

No

Yes

How much each week?

£

Cleaning rooms or windows

No

Yes

How much each week?

£

Gardening

No

Yes

How much each week?

£

Garage or parking space

No

Yes

How much each week?

£

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

No

Yes

Personal care and support

No

Yes

How much each week?

£

Do you pay any service charges separate from your rent?

No

Yes

How much each week?

£

For example, for cleaning or lighting in shared areas, an alarm system, a warden, general counselling or support, meals, or lift maintenance.

What for?

Part 5 About where you live – continued

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"/>
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?

No
Yes

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

No
Yes 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 and Pension Credit (Guarantee Credit)

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

No Go to Part 7.
Yes Which one?

Answer both the questions in this part, then go to Part 10.

You

Your partner

Are you or your partner actually getting Income Support, income-based Jobseeker's Allowance or Pension Credit? (Guarantee Credit) at the moment?

No
Yes When did you start getting it?
 /

No
Yes When did they start getting it?
 /

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

No
Yes When did you claim?
 /

No
Yes When did they claim?
 /

Are you or your partner self-employed?

This includes being a director or company secretary of any business.

No Go to Part 8.

Yes 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?

When did the business start?

 / /
 / /

What is the business address?

 Postcode

 Postcode

Are there any other partners in the business?

No

Yes Tell us their name and address.

 Postcode

No

Yes Tell us their name and address.

 Postcode

How many hours a week do you usually work?

Do you get a Business Start-up Allowance?

No

Yes How much?

 £

How often?

 Every

No

Yes How much?

 £

How often?

 Every

Do you pay into a private pension scheme?

No

Yes How much?

 £

How often?

 Every

No

Yes How much?

 £

How often?

 Every

We must see evidence of your earnings before we can decide how much benefit you can get. Read the checklist at Part 17 to see what you can use as evidence.

Do you or your partner work for an employer?

No Go to Part 9.

Yes Answer the questions in this part.

Do you work for more than one employer?

No

Yes Tell us about all the employers on a separate sheet 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?

What is your employer's name and address?

 Postcode

 Postcode

When did you start this job?

 / /
 / /

What is your payroll, employee or staff number?

Are you employed for a fixed period?

No

Yes When will you finish?

 / /

No

Yes When will they finish?

 / /

How often do you get paid?

 Every

 Every

How much do you get paid before tax and National Insurance are taken off?

 £

 £

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?

 / /
 / /

When will your next pay rise be?

 / /
 / /

How many hours a week do you usually work?

Give details of any regular overtime, bonuses or commission.

Are you getting Statutory Sick Pay (SSP) or Statutory Maternity Pay (SMP) from your employer at the moment?

No

Yes

No

Yes

When did it start?

 / /
 / /

Part 8 About working for an employer – continued

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

No
Yes

No
Yes

When did it start?

 / /
 / /

Do you pay into a private or company pension scheme?

No
Yes How much?

No
Yes How much?

£

£

How often?

How often?

Every

Every

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 17 to see what you can use as evidence. If you get tips or bonuses, tell us about these in Part 14.

Part 9 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 10.

Yes Answer the questions on this page.

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

When did you start this work?

 / /
 / /

How many hours a week do you usually work?

Do you get paid?

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

No
Yes How much do you get before any deductions?

No
Yes How much do they get before any deductions?

£

£

How often?

How often?

Every

Every

We must see evidence of any earnings before we can decide how much benefit you can get. Read the checklist at Part 17 to see what you can use as evidence.

Part 10 About benefits, tax credits and state pensions

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 11.
 Yes Tell us about the benefits below.

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

Benefits and allowances

Contribution-based Job Seeker's Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Child Tax Credit	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Working Tax Credit	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Employment Training Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Child Benefit	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Short-term Incapacity Benefit	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Long-term Incapacity Benefit	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Employment Support Allowance (contribution-based)	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Employment Support Allowance (income-based)	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Attendance Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Disability Living Allowance: Mobility Component	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Care Component	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Carer's Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Severe Disablement Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Maternity Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Fostering Allowance	<input type="checkbox"/>	£		<input type="checkbox"/>	£	
Any other benefit, pension or money from the government	<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 chosen to defer your State Retirement Pension?

No Yes

If Yes we will write to you about this.

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

This includes work-based pensions; pensions from abroad, maintenance or child support for you, your partner or any of the children you have told us about on this form; money from a trust fund; training allowances; a student grant or loan; and any cash payments. Also tell us about any money you get from people living in your house as boarders, lodgers or subtenants. 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 12.
 Yes Answer the questions on this page. Please put a line through any boxes that do not apply to you or your partner.

Other income and 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?
Private Pension 1 paid by <input type="text"/>	<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="text"/>	<input type="checkbox"/>	Date next increased	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>	Date next increased	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
	<input type="checkbox"/>	Date next increased	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>	Date next increased	<input type="text"/> / <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 payments you receive - 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 (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 17 to see what you can use as evidence.

Office use only

Do you or your partner have any bank accounts, savings, property or investments 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, stocks, shares and property.

No Go to Part 13.

Yes Answer all the questions in this part. We must see evidence of all the capital, savings and investments. Read the checklist at Part 17 to see what you can use as evidence. **We will need statements or pass books covering the last 3 months at least.**

Please answer these questions for yourself and your partner. Please include empty and overdrawn accounts, whether in one name or jointly held with anyone else. You should list children's accounts in Part 2.

	Account number/name/other details	Your balance	Partner's balance
All bank or post office accounts (including current accounts) None held <input type="checkbox"/>		£	£
		£	£
		£	£
Building society accounts None held <input type="checkbox"/>		£	£
		£	£
		£	£
Stocks, shares, unit trusts List the names of investments and number of shares held None held <input type="checkbox"/>		£	£
		£	£
		£	£
National Savings Certificates List the issue, purchase date and number of units None held <input type="checkbox"/>		£	£
		£	£
		£	£
Other investments, redundancy payments, premium bonds, Tessa's, ISAs, SAYE cash etc (Please also use this space if you need more room for any of the above savings) None held <input type="checkbox"/>		£	£

Please supply up-to-date statements or pass books for all accounts held, even if overdrawn, covering the last 3 months. Read the checklist in part 17

Office use only

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 allowed by the law.
- You may use any information I have provided in connection with 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 know immediately about any change in my circumstances or the 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 verify the information in this form.

Signature of person claiming

Date

Partner's signature

Date

If this form has been partly or fully filled in by someone other than 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

Name of the person who filled in the form

Signature of the person

Relationship to the person claiming

Date

If this claim is for Local Housing Allowance (LHA) and you think there will be a problem handling your own financial affairs, please tick this box and a further form will be sent to you with guidance on the type of evidence that will need to be provided.

Under the Race Relations Act, we must ask you questions about your background. We use the information you give us to help us with our equal-opportunities policies.

We will keep your information confidential and use it only to help provide equal opportunities for everyone.

You do not have to answer the questions if you don't want to.

What is your ethnic background?

Choose one section from A to E, then tick the appropriate box.

A White British

English

Irish

Scottish

Welsh

Any other white background (please say which)

B Mixed

White and black Caribbean

White and black African

White and Asian

Any other mixed background (please say which)

C Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background (please say which)

D Black or black British

Caribbean

African

Any other black background (please say which)

E Chinese or other ethnic background

Chinese

Any other ethnic background (please say which)

F Travelling community

Gypsy or Romany

Irish traveller

Other (please say which)

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 straightaway

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 calendar 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. We need to see evidence of any interest or dividends you get on investments and savings. We need to see this evidence for children in your household as well. The evidence you send must show details for at least the last 3 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 will give you a form for 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. Please do not send order books through the post.

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, agreements or receipts from registered child carers.

Those tenants affected by the Local Housing Allowance (LHA) from 7th April 2008 will normally be paid any Housing Benefit directly to themselves and it will be their responsibility to pay the full rent liability to the landlord. The LHA is based on:

- how many people live with you;
- how old they are; and
- where your home is.

LHA is set by the Rent Service which is independent from us. The LHA will be published each month for the month to come. Once we assess your claim for Housing Benefit, your LHA will be fixed for one year and may only change if people move in or out of your home. LHA will apply to you if you make a new claim for Housing Benefit on or after 7 April 2008 and you rent a room or a home from a private landlord. LHA is usually paid straight to you (not to your landlord).

You can choose where to have your money paid - it can be straight into a bank account or building society account, or in exceptional cases direct to your landlord. Payment by cheque will only be made if you are unable to open a bank account.

Payment direct into an account

We recommend that you receive your money in this way because:

- it is convenient - you decide when and how much you want to take out of your account;
- from some accounts you can have regular bills paid (this could save you money but you will need to make sure that there is enough money in your account to pay the bills - **if not, you may be charged a fee; and**
- you can get your money from a range of different places (for example, by using a cash machine).

The account can be in:

- your name;
- your partner's name;
- both your and your partner's names;
- the name of the person acting on your behalf; or
- your name and the name of the person acting on your behalf.

Part 19 BACS request form

If you would like to receive payment direct into your bank account please complete this form clearly using black ink, and return to the above address.

Who is requesting payment?	<input type="text"/>
Benefit claim reference number	<input type="text"/>
Claimants Name	<input type="text"/>
Claimants Address	<input type="text"/>
Landlord Reference Number	<input type="text"/>
Landlords Name	<input type="text"/>
Landlords full postal address	<input type="text"/>
Landlords telephone number	<input type="text"/>
Name of Bank or Building Society	<input type="text"/>
Sort Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Roll No. if Building Society Acc.	<input type="text"/>
Account Holders Name	<input type="text"/>

COMPLETED BY:		
NAME:	SIGNATURE:	DATE: / /

For further information please contact Creditors on (01375) 652146

FOR OFFICE USE ONLY

Benefits

NEW DETAILS / AMENDED DETAILS

SIGNED:

ACTIONED BY:
DATE: / /

Creditors

CREATED / AMEDDED DETAILS

SIGNED:

DATE: / /

Claimant:

If you don't have your last five weekly or two monthly pay slips, please write your full name, address and national insurance number in the box opposite and ask your employer to fill in the details we ask for. Once this certificate is filled in, send it back to us as quickly as possible. You should only use this form if you can't provide payslips.

Name								
Address								
National insurance number								

Claimant's signature

To employer: Please answer the questions below, fill in the table with the employee's last five weekly or two monthly wages and then give this form back to your employee.

How often do you pay the employee (weekly, fortnightly, four weekly, calendar monthly)?

How do you pay the employee (cash, cheque, direct into bank, other)?

If you pay direct into bank account or other account, please give us the account details.

Sort Code

Account Number

Is the person named above employed for 16 hours or more? Yes No

Normal basic wage £

Number of hours they work each week

Date they started working for you / /

Put the employee's last five weekly or two monthly wages in the boxes below.

Date you paid your employee	Total amount they were paid	Income Tax	National insurance contributions	Working Tax Credit	Statutory Sick Pay	Any pension contribution they paid	Pay they got after tax and all deductions
	£	£	£	£	£	£	£
	£	£	£	£	£	£	£
	£	£	£	£	£	£	£
	£	£	£	£	£	£	£
	£	£	£	£	£	£	£

In the boxes below, please fill in the total amounts for this tax year.

Month or week number	Total amount they have been paid this year	All the Income Tax they have paid this year	National insurance contributions they have made this year	Statutory Sick or Maternity Pay they have had this year	Any pension contributions they have paid to date	Pay after all deductions for this year
	£	£	£	£	£	£

Date of last pay rise
 / /

Date of next pay rise
 / /

Employer's stamp	Signature
	Position held
	Date <input type="text"/> / <input type="text"/> / <input type="text"/>