

A claim form for Housing Benefit and Council Tax Benefit

LIB HCTB1 06/06

For office use only

Date of initial contact

Local authority office date stamp

Initials

Date of issue

Local authority office date stamp

Initials

Date received

Local authority office date stamp

Initials

If you are just claiming **Second Adult Rebate**, only fill in **Parts 1, 3, 14, 15, 16 and 17** of this form and please tick this box

Are you (please tick one box):

a council tenant?

an owner-occupier?

a private tenant?

a housing association or social landlord tenant?

Part 1 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.

	You	Your partner
Surname or family name	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>
Any other names you have used	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs, Ms, other)	<input type="text"/>	<input type="text"/>
Address, including room number if you have one 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 <input type="text"/>	Postcode <input type="text"/>
What date did you start living as this address?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
National Insurance (NI) 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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
You can find this on payslips or letters from the DWP or the tax office. We cannot normally decide your claim if we do not have your NI number. We need to see proof of this.	If you do not have an NI number, or cannot find it, tick this box. <input type="checkbox"/>	If your partner does not have an NI number, or cannot find it, tick this box. <input type="checkbox"/>

We need to see proof of your and your partner's identity and NI number. See the checklist at Part 15.

Date of birth

You

/ /
dd mm yyyy

Your daytime phone number

Code Number

What is this number? Please tick

Home Work Mobile Textphone

If you have an email address that we could use to contact you please enter it in this box.

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

No
Yes Please tell us about it below.

When did you last claim?

/ /

Which council did you claim from?

What name did you use for the claim?

What address did you claim for?

Postcode

If you have moved from this address, have you told the council you claimed from?

No If no, please inform them
Yes

If you or your partner have moved home in the last 12 months, tell us your last address if it is different from above.

Postcode

Tell us whether you were the homeowner, a private tenant, a council tenant or a lodger at this address.

Your partner

/ /
dd mm yyyy

Code Number

Home Work Mobile Textphone

No
Yes Please tell us about it below.

/ /

Postcode

No If no, please inform them
Yes

Postcode

	You	Your partner
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 two years?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
What is your nationality?	<input type="text"/>	<input type="text"/>
If your nationality is not British, on what date did you last enter and apply to stay in the UK? <small>The UK is England, Northern Ireland, Scotland and Wales.</small>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Are you or your partner in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.
When did you go in?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When will you come out, if you know this?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you or your partner get Disability Living Allowance?	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"/>
Mobility	£ <input type="text"/>	£ <input type="text"/>
Do you or your partner get Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does anyone get Carer's Allowance for looking after you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you or your partner been told that you are entitled to Carer's Allowance, even if you do not receive it, because you are getting another benefit instead?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

If you are not on Pension Credit, we need to see proof of Disability Living Allowance, Attendance Allowance, and Carer's Allowance.

Do you or your partner pay towards the upkeep of a student?

You

No
 Yes How much do you pay and how often?
 £ every

Your partner

No
 Yes How much do they pay and how often?
 £ every

Are you or your partner a student?
 By *student* we mean anyone who is attending a course of study at an educational establishment, including student nurses.

No
 Yes Tell us if this is full or part time.
 Full time Part time
 Length of course?
 What year are you in?

No
 Yes Tell us if this is full or part time.
 Full time Part time
 Length of course?
 What year are you in?

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

£ a year

£ a year

Please tick if you or your partner are:

- a care leaver
- an apprentice
- on youth training
- in legal custody
- severely mentally impaired
- registered blind
- long-term sick or disabled
- bailed to an address other than your home

-
-
-
-
-
-
-
-

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

No
 Yes

No
 Yes

We need to know about any children in your household who are:

- under 16,
- aged 16 or 17 and registered for work or youth training, or
- aged 16, 17, 18 or 19 and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ (advanced).

No Go to Part 3.

Yes If there are more than four children, use a separate sheet of paper to tell us all the information we ask for on this page and send it with the form.

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

	First child	Second child	Third child	Fourth child
Last 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" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
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"/>
	<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.

	First child	Second child	Third child	Fourth child
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Is the child registered blind?
We need to see proof of this

No
Yes

No
Yes

No
Yes

No
Yes

Has the child ceased to be registered blind in the last 28 weeks?

No
Yes We need to see proof of this.

No
Yes We need to see proof of this.

No
Yes We need to see proof of this.

No
Yes We need to see proof of this.

Does the child get Disability Living Allowance?

No
Yes How much?

No
Yes How much?

No
Yes How much?

No
Yes How much?

We need to see proof of this

Care

Care

Care

Care

Mobility

Mobility

Mobility

Mobility

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

No
Yes Please tell us about it below.

No
Yes Please tell us about it below.

No
Yes Please tell us about it below.

No
Yes Please tell us about it below.

Tell us the name and registration number of the minder.

How much do you pay a week? Please let us know if there is any difference between term time and school holiday child care costs

a week

a week

a week

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 of this.

Is the registered child minder related to the child that they are caring for?

No
Yes

No
Yes

No
Yes

No
Yes

If you have ticked Yes to the child minder being related to your child, is this child cared for in your own home?

No
Yes

No
Yes

No
Yes

No
Yes

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

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

If you want to tell us about more than three people, use a separate sheet of paper.

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

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

No Go to Part 4.
Yes Fill in this section.

Last name

Other names

Date of birth

National Insurance Number

Their relationship to you or your partner

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

Do they get Income Support, income-based Jobseeker's Allowance or Pension Credit (Guarantee or Savings Credit or Both)?

Do they get Disability Living Allowance or Attendance Allowance?

Are they registered blind?

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

First person	Second person	Third person
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

No
Yes

No
Yes

No
Yes

No
Yes How much?

No
Yes How much?

No
Yes How much?

£ a week

£ a week

£ a week

No
Yes

No
Yes

No
Yes

No
Yes Tell us which.

No
Yes Tell us which.

No
Yes Tell us which.

<input type="text"/>	<input type="text"/>	<input type="text"/>
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We will need to see proof of their income

	First person	Second person	Third person
Do they pay rent 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
Does this include money for food?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>
Does this include money for heating?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>
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 come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> 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?	<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"/>
When are they due to come out (if you know)?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do 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"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. £ <input type="text"/>
	We need to see proof of their earnings.	We need to see proof of their earnings.	We need to see proof of their earnings.

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

First person

No
 Yes Tell us about it below.

Second person

No
 Yes Tell us about it below.

Third person

No
 Yes Tell us about it below.

1 Where does this income come from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

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

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

We need to see proof of their income.

We need to see proof of their income.

We need to see proof of their income.

Are any of the people you have told us about married to each other, civil partners, or living together as if they are married or civil partners. We call these people *partners*.

No
 Yes Tell us their names below.

<input type="text"/>	is the partner of	<input type="text"/>
<input type="text"/>	is the partner of	<input type="text"/>

Does any other person not listed on this form use your address as a 'care-of' address, or as an address to receive their mail or correspondence only?

If so, please give their name(s) and actual address(es) in the box to the right

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

No Go to Part 5.
Yes

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

You

No
Yes When did you start getting it?
 / /

Your partner

No
Yes When did they start getting it?
 / /

If you have answered yes to both of the questions above, please go straight to part 10 - About where you live. Otherwise answer the question below and then continue to the next page.

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

No
Yes When did you claim?
 / /

No
Yes When did they claim?
 / /

Which benefit are you getting or waiting to hear about?

- Income Support
- income-based Jobseeker's Allowance
- Pension Credit

Which benefit are they getting or waiting to hear about?

- Income Support
- income-based Jobseeker's Allowance
- Pension Credit

If you are in receipt of, or awaiting a decision on, Income Support, income-based Jobseeker's Allowance or Pension Credit, the relevant agency will provide us with the information that we need to process your claim.

Are you or your partner self-employed?

No Go to **Part 6**.

Yes Answer the questions on this page.

You must send us your trading accounts for the last financial year. We are able to provide a self-employed earnings declaration for people who are unable to provide accounts. If you have only recently set up 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.

What kind of work do you do?

You

Your partner

When did the business start?

 / /
 / /

What is the business address?

 Postcode

 Postcode

Do you have any business partner?

No

No

Yes Tell us their name and address.

Yes Tell us their name and address.

If you have more than one business partner, please give details on a separate sheet of paper.

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

 Postcode

 Postcode

How many hours a week do you usually work?

Do you get a Business Start-up Allowance?

No

No

Yes How much and how often?

Yes How much and how often?

 £ every
 £ every

Do you pay into a private pension scheme? We need to see proof of this.

No

No

Yes How much and how often?

Yes How much and how often?

 £ every
 £ every

We must see evidence of your earnings before we can decide how much benefit you can get. Read the checklist at Part 15 to see what you can use as evidence.

Do you or your partner work for an employer?

No Go to Part 7.

Yes Answer the questions on this page. If you or your partner work for more than one employer, 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?	<input type="text"/>	<input type="text"/>
What is your employer's name and address?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 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"/>
What is your payroll, employee or staff number?	<input type="text"/>	<input type="text"/>
Are you employed for a limited period?	No <input type="checkbox"/> Yes <input type="checkbox"/> When will you finish? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When will they finish? <input type="text"/> / <input type="text"/> / <input type="text"/>
How often do you get paid?	Every <input type="text"/>	Every <input type="text"/>
How much do you get paid before tax and National Insurance are taken off?	£ <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"/>
When was your last pay rise?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When will your next pay rise be?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

	You	Your partner
How many hours a week do you usually work?	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>
Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you getting any other sick pay or maternity pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay into a private or company pension scheme? We need to see proof of this if deductions are not made directly from your wages.	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? <input style="width: 200px; height: 20px;" type="text"/> £ every	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? <input style="width: 200px; height: 20px;" type="text"/> £ every
Do you receive any tips or bonuses?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? <input style="width: 200px; height: 20px;" type="text"/> £ every	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? <input style="width: 200px; height: 20px;" type="text"/> £ every

We must see evidence of any earnings before we can decide how much benefit you can get. Read the checklist at Part 15 to see what you can use as evidence.

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

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

No Go to Part 8.

Yes Answer the questions on this page.

What other work do you do?

You [Text input box]

Your partner [Text input box]

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

[Text input box]
[Text input box]
[Text input box]
[Text input box] Postcode

[Text input box]
[Text input box]
[Text input box]
[Text input box] Postcode

When did you start this work?

[Text input box] / [Text input box] / [Text input box]

[Text input box] / [Text input box] / [Text input box]

How many hours a week do you usually work?

[Text input box]

[Text input box]

Do you get paid?

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

No

Yes Tell us about it below.

No

Yes Tell us about it below.

How much do you get before any deductions?

£ [Text input box]

£ [Text input box]

How often are you paid?

Every [Text input box]

Every [Text input box]

We must see evidence of any earnings before we can decide how much benefit you can get. Read the checklist at Part 15 to see what you can use as evidence.

Are you or your partner getting any benefits or waiting to hear about benefits you have claimed?

No Go to **Part 9**.

Yes Tell us about the benefits on this page. Tell us the full rate of the benefits before any deductions.

Read the list of benefits below and tell us about any you or your partner are getting now or have claimed.

- Child Benefit
- Child Tax Credit
- Fostering Allowance
- Contribution-based Jobseeker’s Allowance
- Maternity Allowance
- Working Tax Credit
- Incapacity Benefit
- Industrial Injuries Disablement Benefit

- Industrial Death Benefit
- Carer’s Allowance
- Severe Disablement Allowance
- Statutory Sick Pay
- Statutory Maternity Pay
- Statutory Paternity Pay
- Adoption Allowance
- Adoption Pay

- Armed Forces and Reserve Forces Compensation Scheme
- Bereavement Benefits
- Guardian’s Allowance
- Pension Credit (including Savings Credit)
- State Retirement Pension
- War Disablement Benefit
- War Pension or War Widow’s Pension
- Reduced Earnings Allowance
- Widow’s or Widower’s Benefit

If you are getting or have claimed any benefit that is not listed, tell us about it on a separate sheet of paper and send it with the form.

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

	You	Your partner
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method? <input type="text" value="£"/> every <input type="text"/> by <input type="text"/>	<input type="checkbox"/> How much, how often and by what method? <input type="text" value="£"/> every <input type="text"/> by <input type="text"/>
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method? <input type="text" value="£"/> every <input type="text"/> by <input type="text"/>	<input type="checkbox"/> How much, how often and by what method? <input type="text" value="£"/> every <input type="text"/> by <input type="text"/>
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method? <input type="text" value="£"/> every <input type="text"/> by <input type="text"/>	<input type="checkbox"/> How much, how often and by what method? <input type="text" value="£"/> every <input type="text"/> by <input type="text"/>

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?

This includes occupational pensions, work pensions and private pensions, maintenance or child support for you or your partner, money from a trust fund, training allowances, a student grant or loan, any cash payments, and any money you get from people living in your house as boarders, lodgers or subtenants.

No Go to **Part 10**.

Yes Answer the questions on this page.
 You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust, MacFarlane Trust or the Skipton Fund.

	Other money 1	Other money 2	Other money 3
What is the money for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets it?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do they get?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often?	Every <input type="text"/>	Every <input type="text"/>	Every <input type="text"/>
How is this paid?	<input type="text"/>	<input type="text"/>	<input type="text"/>
When did they start getting this income?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
When is the income likely to go up?	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>

Other money 1

Other money 2

Other money 3

Does anyone owe money to you or your partner?

No
 Yes Tell us about it below.

No
 Yes Tell us about it below.

No
 Yes Tell us about it below.

What for?

How much?

£

£

£

Who is it owed to?

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 holiday.

No
 Yes Tell us about it below.

No
 Yes Tell us about it below.

No
 Yes Tell us about it below.

What for?

How much?

£

£

£

We must see evidence of any money coming in before we can decide how much benefit you can get. Read the checklist at Part 15 to see what you can use as evidence.

Do you own your home or have a mortgage?

No Go to the next question.

Yes Go to Part 12.

Are you a council tenant?

No Answer the questions below.

Yes Go to Part 11.

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 or studio flat | <input type="checkbox"/> | Residential nursing home | <input type="checkbox"/> |
| Detached bungalow | <input type="checkbox"/> | Hostel | <input type="checkbox"/> | Residential care home | <input type="checkbox"/> |
| Semi-detached bungalow | <input type="checkbox"/> | Other – give details | <input type="checkbox"/> | _____ | |
| | | | | _____ | |

Does your home have central heating?

No

Yes

Does your home have a garden?

No

Yes

Does your home have a garage?

No

Yes

Does your home have a parking space?

No

Yes

How many floors are there?

Do you and your household occupy only part of the building you have ticked?

No

Yes As you look at the building from the street, where in the building do you live?
Tick more than one box if necessary

At the front In the middle At the back At the left At the right

What is the property let as?

Tick the box that applies.

- Furnished
- Partly furnished
- Hardly any furniture
- Unfurnished

Who is responsible for internal decoration? You Landlord

Does the accommodation have central heating? Yes No

How much rent are you or your partner charged and how often?

For example, every week, every fortnight, every four weeks or monthly.

£ every

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

No
 Yes Tell us the details below.

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

How much of the rent do they pay and how often?

For example, every week, every fortnight, every four weeks or monthly.

£ every

Has your rent changed in the last 12 months?

No
 Yes Send us proof of the date it changed and how much it changed.

When is the next rent increase due?

/ /

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

No
 Yes Please send us the notice of registration form RO5.

Do you have 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?

We must see evidence of your rent and tenancy before we can decide how much benefit you can get.

You should supply a current tenancy agreement or declaration/letter from your landlord.

Please read the checklist in part 15 for other examples of what we will accept as proof of your rent.

We can not pay benefit until you have provided proof of your rent

Who has to pay the Council Tax bill for your home?

Tick the box that applies.

You or your partner

Your landlord

Someone else

Tell us who this is below

What is the Council Tax reference number?

Does your rent include money for the following?

Meals

No

Yes How much?

 £ every

For which meals?
Please tick.

Breakfast

Lunch

Evening meal

Water authority charges

No

Yes How much?

 £ every

Heating

No

Yes How much?

 £ every

Lighting

No

Yes How much?

 £ every

Hot water

No

Yes How much?

 £ every

Fuel for cooking

No

Yes How much?

 £ every

Laundry

No

Yes How much?

 £ every

Cleaning rooms or windows

No

Yes How much?

 £ every

Gardening

No

Yes How much? £ every

Garage or parking space

No

Yes How much? £ every

Do you have to rent the garage as part of your tenancy agreement? No
Yes

Personal care and support

No

Yes How much? £ every

Do you pay any service charges separate from your rent, for example, for cleaning or lighting in shared areas, an alarm system, a warden, general counselling or support, meals, or lift maintenance?

No

Yes How much? £ every

What for?

Are you living away from home at the moment?

No

Yes Tell us about it below.

Why are you not living at home?

When did you last live at home?

/ /

When do you expect to go back home?

/ /

What is the address of where you are living at the moment?

Postcode

Have you sublet your home?

No

Yes Who lives there now?

We must see evidence of your rent and tenancy before we can decide how much benefit you can get. Read the checklist at Part 15 to see what you can use as evidence.

If you are ACTUALLY GETTING Income Support, Income-Based Jobseekers Allowance or Pension Credits PLEASE GO STRAIGHT TO PART 13.

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. We need to have details of ALL your accounts, even if you have no money in them. If you do not have room below please use a separate sheet.

Do you or your partner have any of the following? PLEASE USE A SEPARATE SHEET IF YOU NEED TO

Bank Accounts	Yes <input type="checkbox"/> No <input type="checkbox"/>	Details	Bank Name: <input type="text"/>	Account No. <input type="text"/>	Amount	<input type="text"/>	£
		Details	Bank Name: <input type="text"/>	Account No. <input type="text"/>	Amount	<input type="text"/>	£
Building Society	Yes <input type="checkbox"/> No <input type="checkbox"/>	Details	B/S Name: <input type="text"/>	Account No. <input type="text"/>	Amount	<input type="text"/>	£
		Details	B/S Name: <input type="text"/>	Account No. <input type="text"/>	Amount	<input type="text"/>	£
Post Office Accounts	Yes <input type="checkbox"/> No <input type="checkbox"/>	Details	Type of account: <input type="text"/>		Amount	<input type="text"/>	£
		Details	Type of Account: <input type="text"/>		Amount	<input type="text"/>	£
Premium bonds	No <input type="checkbox"/>						
	Yes <input type="checkbox"/>	How many?	<input type="text"/>		Total	<input type="text"/>	£
Unit trusts, ISAs, PEPs, TESSAs or other investments	No <input type="checkbox"/>						
	Yes <input type="checkbox"/>	Details	<input type="text"/>		Total	<input type="text"/>	£
Income bonds or capital bonds	No <input type="checkbox"/>						
	Yes <input type="checkbox"/>	Details	<input type="text"/>		Total	<input type="text"/>	£
Money or property held in trust	No <input type="checkbox"/>						
	Yes <input type="checkbox"/>	Details	<input type="text"/>		Total	<input type="text"/>	£
Any other savings or investments	No <input type="checkbox"/>						
	Yes <input type="checkbox"/>	Details	<input type="text"/>		Total	<input type="text"/>	£
Shares – approximate value	<input type="text"/>		Name of the company the shares are held in	<input type="text"/>	Number of shares held	<input type="text"/>	
Shares – approximate value	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>		
Shares – approximate value	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>		

We must see evidence of any savings, investments or property before we can decide how much benefit you can get. Read the checklist at Part 15 to see what you can use as evidence.

Do you or your partner have any National Savings Certificates?

No

Yes We need to see original certificates as proof.

Do any of your or your partner's savings or investments include:

No

Yes Please give details

- money from the sale of a house, or
- money from a charity?

Apart from the address you are claiming for, do you or your partner own any property or land in this country or abroad?

No

Yes Please give details

If it is on a mortgage or a loan, still tick Yes.

Have you or your partner received:

No

Yes What payment did you receive? Who received the payment?

- a Far Eastern Prisoner of War Compensation payment, or
- a compensation payment made to victims of atrocities that happened during the Second World War?

A Far Eastern Prisoner of War Compensation payment You Your partner

A compensation payment made to victims of atrocities that happened during the Second World War You Your partner

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 Please give details

Have you or your partner received a lump sum payment of a deferred State Pension?

No

Yes Please give details

- If you are a council tenant, your council will pay any Housing Benefit you are awarded into your rent account.
- If you are **not** a council tenant and are awarded Housing Benefit, in most cases you can choose where to have your money paid. Your council can arrange to pay your money:
 - straight into a bank, building society, GIRO account or National Savings Bank account
 - by cheque, or
 - direct to your landlord.
- If you are awarded Council Tax Benefit, your council will pay this into your Council Tax account.

Payment direct into an account

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

- it is safe and secure
- it is convenient – you decide when and how much you want to withdraw
- using an account may help you to save
- from some accounts you could 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 many different places.

The account can be:

- in your name
- in the name of your partner (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)
- in both the names of yourself and your partner
- in the name of the person acting on your behalf, or
- in both the names of yourself and the person acting on your behalf.

You must tick **Yes** to one of these questions.

Would you like your Housing Benefit paid straight into an account?

No Go to the next question.

Yes Go to page 27.

Would you like to be paid by cheque?

No Go to the next question.

Yes

Would you like your Housing Benefit to be paid direct to your landlord?

No

Yes Go to Part 14.

If you ticked **Yes**, do not forget to fill in the authorisation sheet at the end of this claim form. Then tear it off and give it to your landlord to sign.

Please use this space 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 any separate sheets of paper with this form, tell us how many.

I am enclosing a filled-in *Paying benefit to your landlord* form.

I will send you a filled-in *Paying benefit to your landlord* form later.

Please tick to say what evidence you are sending with this form. We must see **original documents**, not copies.

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.

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.

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 will not be able to pay you any benefit until we have all the evidence.**

• Evidence of identity

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

• Evidence of your address

Such as a recent gas or electricity bill or a TV licence.

• Evidence of National Insurance number

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

• Evidence 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 evidence of any interest or dividends you get on investments and savings. The evidence you send must show details for at least the **last two months**.

• Evidence of earnings

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

This means your last five payslips if you are paid every week, your last three payslips if you are paid every two weeks, or your last two payslips if you are paid every month. We can provide a proof of earnings slip 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 six months, a summary of your trading records so far.

• Evidence of other income

We also need 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 evidence of any money people pay you for board and lodgings.

• Evidence of benefits, allowances, Tax Credits or pensions

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

Such as current award notices or letters from the DWP or HM Revenue and Customs 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 recent tenancy agreement or a letter from your landlord. This must show your full name and address, your landlord's full name and address, the tenancy start date, the full rent charged and a breakdown of any services included in the rent.

• Evidence of other money paid out

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

Make sure you read and sign the declaration on page 30.

We can usually award benefit from the Monday after the day you notify us of your intention to make a claim – as long as we receive your completed claim form within one month of the date of issue. 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. **You should provide any supporting proof that you think will help with your request. e.g. letter from doctor or hospital**

Date you want to claim benefit from

For this earlier period, were your circumstances the same as on this form?

No If no, please give us details of how your circumstances were different. Please use a separate piece of paper to do this

Yes

Tell us why you have not claimed before.

Even if someone else has filled this form in you must sign this declaration if you can.
If you have a partner, they should also sign this declaration. This will allow us to process your claim more quickly.

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. Where I have provided information about other people on this form, I have explained to them that I have done this, explained to them what you will use their information for and obtained their consent to those uses. By signing this form, I am confirming that I have done this.
- **I understand** that if I give information that is incorrect or incomplete, or do not tell you about a change in circumstances, you may take action against me. This may include court action.
- **I agree** that you will use the information I have provided to process my claim for Housing Benefit and/or Council Tax Benefit. You may share information with the Council Tax Office, the Housing Department and other relevant Welfare Agencies, including Registered Social Landlords, for the purpose of dealing with my claim more effectively, unless I specifically notify you in writing that I do not agree to you sharing information in this way.
- **I understand** that you may use any information I have provided in connection with this and any other claim for DWP benefits, Local Authority benefits or Tax Credits that I have made or may make. You may use the information that I have provided to contact me about other benefits and 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 the information I have stated on this claim form will be used to assess my entitlement to Council Benefits. I accept that, if there are any changes in my circumstances or the circumstances of anyone who lives in my household, then I must report this **immediately in writing** to the Benefits Service. If I delay or fail to tell you about a change in circumstances then I may lose money, have to pay back benefit, and may be prosecuted.
- **I confirm** I have read the guidance notes that accompany this claim form which outline the postal address for correspondence and how I can obtain the relevant forms to report all future changes.

Signature of the person claiming

Date

 / /

Partner's signature

Date

 / /

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

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

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

Relationship to the person claiming

Date

 / /

You should now send this form to us without delay, together with any documents needed for your claim.

Please send this form and the documents to the address written in the enclosed NOTES.

DO NOT SEND VALUABLE ITEMS THROUGH THE POST.

You should bring these to our reception point and we will photocopy them and give them straight back.

If you are going to send evidence or a filled in 'Paying benefit to your landlord' form at a later date, send these to us at the address written in the enclosed NOTES.

The NOTES contain all our contact details.

Sharing information with your landlord

Sharing information with your landlord could help us deal with your claim more quickly and reduce the risk of you falling behind with your rent because of your claim being delayed.

We may need to confirm information with your landlord before we can make a decision on your claim, for example, the start date of your tenancy. In these circumstances, we can contact your landlord without your permission.

Under the Data Protection Act 1998 we need your permission to discuss anything else.

We will only share information with your landlord if you give us permission to do so by signing this form.

If you give us permission, we would be able to tell your landlord whether:

- you have claimed Housing Benefit, or
- we have made a decision on your claim, or
- we need more information to make a decision on your claim, and what that information may be.

We will not give your landlord any specific information about:

- **your personal or household circumstances, or**
- **your financial circumstances.**

You can withdraw your permission at any time.

It will not affect your claim if you do not give us permission to discuss your claim with your landlord.

If you want to give us permission to discuss your claim with your landlord, please sign below.

I give my local council permission to share information about the progress of my Housing Benefit claim with my landlord or their representative.

Signature

Full name
(in CAPITAL
LETTERS)

Date

Address

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

If you want us to pay your benefit straight to your landlord, you must sign this declaration.

Your declaration

Please pay my Housing Benefit direct to my landlord.

- **I understand** that I must always tell you about any change in my circumstances straight away, in writing.
- **I understand** that if I do not tell you about any change of circumstances and you pay me too much benefit because of this, I may have to pay back the extra benefit.
- **I understand** that I may be prosecuted if I do not tell you about any change of circumstances.

Signature

Date

Full name
(in CAPITAL LETTERS)

Your landlord's declaration

I agree to accept Housing Benefit payments for the tenant named in this form.

I understand that by law:

- I must tell you straight away if I find out about any change in the tenant's circumstances
- you can stop paying benefit to me if I do not tell you about any change of circumstances
- I can be prosecuted if I accept Housing Benefit which I know I am not entitled to, and
- if you pay me too much Housing Benefit for any tenant, I may have to repay it. You can take the amount of overpaid benefit from the benefit I get for any other tenants. This will not affect their rent.

Signature

Date

Under the Race Relation Act we have a responsibility to gather details of our clients' backgrounds. This information is used to help us with our equal opportunities policies.

This information is confidential and will be used to improve access to our services and help provide equal opportunities for everyone.

The completion of this survey is voluntary.

A Please indicate which background you feel you belong to:

Asian

- Bangladeshi
- Indian
- Pakistani
- Kashmiri
- Other Asian background Please specify

Black

- African
- Caribbean
- Other black background Please specify

Chinese

Any Chinese background

Mixed ethnic background

- Asian and white
- Black African and white
- Black Caribbean and white
- Other mixed ethnic background

White

Any white background

Any other ethnic background

Any other ethnic background Please specify

B Please indicate your nationality:

- British or mixed British
- Scottish
- English
- Welsh
- Irish

Any other nationality Please specify

