

Claim form for Housing Benefit & Council Tax Support

Please make sure you answer all the questions using **black** ink only.

Do not use pencil, correction fluid or tape.

Answer all “no” or “yes” questions by putting a ‘✓’ in the relevant box.

If you need help with this form please ring us on 01225 47 77 77.

Please read through the notes on the following pages before completing the form.



You must return this form to us as soon as possible, even if you are waiting for proof of your income, rent or any other details. If you do not you may lose some benefit.

Your name and address

Name: _____

Address: _____

Postcode: _____

OFFICE USE ONLY

Date issued / /

Date received (stamp):

Claim number

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Are you (please tick one) **a private tenant?**

a Curo tenant?

a housing association or social landlord tenant?

living in a hotel or bed & breakfast?

an owner occupier?

**Bath & North East
Somerset Council**

Notes for filling in the claim form for Housing Benefit and Council Tax Support

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About this form

We have designed this claim form to be easy to fill in. It may look rather long, but there needs to be enough questions to make sure that everyone who claims gets the right amount of benefit.

You may not have to fill in all of the form (for example, a few questions would not apply to most pensioners) 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 section.

About Housing Benefit and Council Tax Support

Housing Benefit can pay all or part of your rent. It may also give you some extra money towards things you have to pay for, like children's play areas and cleaning shared areas. It can also help with certain support charges if they are included with your rent.

Council Tax Support can pay all or part of your Council Tax. It cannot help with water charges.

Local Housing Allowance

Local Housing Allowance (LHA) arrangements are a way of working out Housing Benefit for people who rent from a private landlord. The rate used to work out how much benefit you can get is based on the size of your household and how many bedrooms you need.

Evidence/Proof

We will need to see evidence of some of the things you write about on the form. There is a checklist after the declaration to 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 need.

Filling in the form

Use black ink on the form. Do not use pencil. If you make a mistake, just cross it out and write the correct answer next to it. Do not use correction fluid or tape. Answer 'Yes' or 'No' questions by putting a tick in the relevant box. If you are picking an answer from a list, tick the appropriate box. If someone else fills in the form for you, there is a special space for them to sign as well.

If you need help to fill in the form

Please contact us if you need help to fill in the form. Our contact details are shown in part 19.

What to do next

When you have filled in and signed the form, either post it to us or visit one of our offices with the evidence we need. Our contact details are shown in part 19.

Do not send valuable items such as bank books or passports in the post. Bring them to us and we will get the information we need and give them back to you.

If you cannot get the evidence we need straight away, do not worry. Send the form to us with the evidence you do have and let us know that you will be sending some evidence later. If you do not send the form to us straight away, you might lose money.

Changes you must tell us about

You must tell us if:

- any of your children leave school or leave home
- anyone moves into or out of your home, including lodgers and subtenants
- your income or income of anyone living with you, (including benefits) changes
- your capital or savings change
- you or anyone living with you becomes a student, starts a youth training scheme, goes into hospital or nursing home, goes to prison, or changes or leaves a job
- your rent changes
- you move
- you or your partner are going to be away from home for more than a month
- you or anyone living with you starts work
- you receive any decision from the Home Office
- there are any changes to your childcare costs, or
- anything you have told us about changes.

This is not a full list. If you are not sure, ask us for advice. If you do not 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 any changes.

Don't rely on someone else to pass the message on. It is an offence not to tell us about any changes of circumstances that affect your benefit. We may take court action against you, and if we pay you too much benefit, you will probably have to pay it back.

How we collect and use information

We will use the information you give in this form, and in any supporting evidence you send, to process your claim for Housing Benefit and Council Tax Support. We may pass the information to other agencies or organisations such as the Department for Work and Pensions and Her Majesty's Revenue & Customs, as allowed by law.

We may check information you have provided, or information about you that someone else has provided, with other information we hold. We may also get information about you from certain third parties, or give information to them to:

- make sure the information is accurate
- prevent or detect fraud, and
- protect public funds.

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

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

We are the data controller for the information on this form for the purposes of the Data Protection Act. Information will normally be held for six years.

If you want to know more about what information we have about you, or the way we use that information, please ask us.

Part 1: About you and your partner

What date did you move into your current home?

/	/
---	---

If you have not moved in yet, when do you expect to move in?

/	/
---	---

Do you have a partner who normally lives with you?

No Yes

A partner is someone (of the same or opposite sex) you live with as part of a couple, as if you were married or civil partners. If you are married, in a civil partnership or have a partner, you must put their details on this form.

	You	Your partner
Last name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
First names	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Title (Mr/Mrs/Miss etc.)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Any other names you have used	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Address (include the room or flat number). Do not tell us your partner's address if it is the same as yours.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	Postcode <input style="width: 80%;" type="text"/>	Postcode <input style="width: 80%;" type="text"/>
Date of birth	/ /	/ /
National Insurance number 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 National Insurance number.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" 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"/>
	If you are waiting to be allocated a National Insurance number, tick this box. <input type="checkbox"/>	If your partner is waiting to be allocated a National Insurance number, tick this box. <input type="checkbox"/>
	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>
Your daytime telephone number	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Email	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Preferred method of contact	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
If you have moved home in the last 12 months, tell us your last address	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	Postcode <input style="width: 80%;" type="text"/>	Postcode <input style="width: 80%;" type="text"/>

We need to see at least two original documents as proof of your identity and your partner's identity (if you have one). We will accept documents such as:

- a passport;
- a driving licence;
- a letter from Jobcentre Plus;
- a letter from the Department for Work & Pensions;
- a letter from your social worker or doctor;
- a P45 or P60;
- a birth certificate;
- a marriage certificate;
- two recent bank or building society statements;
- a gas, electricity or water bill;
- a credit card or credit card statement;
- a letter from HM Revenue & Customs;
- a letter from The Pension Service; or
- a letter from your solicitor.

We need to see one original document as proof of National Insurance number for you and your partner (if you have one). We will accept documents such as:

- a National Insurance number card (RD3);
- a letter from the Department for Work & Pensions;
- a P45 or P60;
- payslips or salary slips;
- a letter from HM Revenue & Customs; or
- a letter from The Pension Service.

Part 1: About you and your partner *(continued)*

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

	You		Your partner	
	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

If 'Yes', when did you claim?

--	--

What address did you claim for?

Postcode	Postcode

Have you or your partner come to live in the UK, Ireland, Isle of Man or Channel Islands in the last five years?

	You		Your partner	
	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

If 'Yes', when?

/ /	/ /
-----	-----

What nationality are you and your partner?

--	--

Are you or your partner an asylum seeker?

	You		Your partner	
	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

We will need to see letters from the Home Office Border & Immigration Agency.

Are you or your partner in hospital at the moment?

	You		Your partner	
	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

If 'Yes', when did you go in?

/ /	/ /
-----	-----

When do you expect to come out?

/ /	/ /
-----	-----

Do any of the following circumstances apply to you or your partner?

	You	Your partner
● In legal custody	<input type="checkbox"/>	<input type="checkbox"/>
● Registered blind	<input type="checkbox"/>	<input type="checkbox"/>
● Under 22 years old and have been in care	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: About your children who live with you

How many children live with you? If you have none, write 'none' and go to part 3.

By children we mean young people under 20 who are still at school. Tell us their details below.

If you have more than six children, use a separate sheet of paper and tick this box.

First child

Second child

Last name

First names

Date of birth

 / /
 / /

Their relationship to you

Gender of child

Male Female

Male Female

Who gets the Child Benefit for them?

Third child

Fourth child

Last name

First names

Date of birth

 / /
 / /

Their relationship to you

Gender of child

Male Female

Male Female

Who gets the Child Benefit for them?

Fifth child

Sixth child

Last name

First names

Date of birth

 / /
 / /

Their relationship to you

Gender of child

Male Female

Male Female

Who gets the Child Benefit for them?

If any of the children are registered blind or getting Disability Living Allowance, give their names.

If you have children, we need to see evidence such as a letter from Child Benefit, Child Tax Credits or a birth certificate.

You

Your partner

Do you make payments to a registered childcare provider to look after a child aged 15 or under (16 or under if the child is disabled)?

No Yes

No Yes

How much?

 £ per week

 £ per week

Please state the name and registered number of the childcare provider

 Name

 Name

 Number

 Number

Do you receive childcare vouchers? No Yes

No Yes

How much?

 £

 £

We need to see evidence of child care costs, such as invoices or receipts on headed paper.

Part 3: About other people who live with you

Do any adults normally live with you and your partner?

By adults we mean people over 16 who nobody receives Child Benefit for. You should also include carers when a bedroom has been allocated for their use.

No

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

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

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

No

Yes Tell us their names.

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

	First person	Second person	Third person
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Their relationship to you (For example, aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner or a friend.)	<input type="text"/>	<input type="text"/>	<input type="text"/>

If they are a joint tenant or joint owner, write this in and go to part 4.

Do they get Income Support, income-based Jobseeker's Allowance, ESA or Pension Credit?

No

Yes

No

Yes

No

Yes

Do they get Disability Living Allowance or Attendance Allowance, or are they registered blind?

No

Yes

No

Yes

No

Yes

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

No

Yes

No

Yes

No

Yes

Part 3: About other people who live with you *(continued)*

	First person	Second person	Third person
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Expected release date	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
When did they go in?	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
When are they expected to come out?	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Are they working at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How many hours per week?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tell us their earnings before deductions for things like tax and National Insurance.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often are they paid?	<input type="text"/>	<input type="text"/>	<input type="text"/>
We need to see proof of their earnings.			
Do they have any other income at all?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Tell us their other income before deductions for things like tax and National Insurance.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often are they paid?	<input type="text"/>	<input type="text"/>	<input type="text"/>
We need to see proof of their income.			
Subtenants			
Are any of the people who live with you subtenants or boarders who pay you or your partner rent or money for board and lodgings?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Amount charged?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do you give them meals?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Amount charged?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do you give them heating?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Amount charged?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Please provide evidence of these charges.			

Part 4: About pensions, allowances, benefits and tax credits

Are you or your partner getting, or waiting to hear about any pensions, allowances, benefits or tax credits?

No

Yes Please tell us about them below.

Read the list below and tick '**No**' if you do not receive the income or have not applied for it. Tick '**Yes**' if you do receive the income or have applied for it.

	(tick either box)		You		Your partner	
	No	Yes	If 'Yes', give the amount.	How often is it paid?	If 'Yes', give the amount.	How often is it paid?
Income Support	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Job Seekers Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Employment and Support Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Pension Credit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Widow's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
War Widow's Pension or Widower's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
War Disablement Pension	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Widowed Mother's Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Disability Living Allowance Care Component	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Disability Living Allowance Mobility Component	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Carer's Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Maternity Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Severe Disablement Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Attendance Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Incapacity Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Industrial Injuries Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Child Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Child Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Working Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>

We need proof of pensions, allowances, benefits, or tax credits. We can accept letters from The Pension Service, Jobcentre Plus, the Department for Work and Pensions or HM Revenue & Customs.

Part 5: About being self-employed

Are you or your partner self-employed? No
 Yes

If 'Yes' please answer the questions on this page. You must send us your audited 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, you will need to complete a self-employed form. For less than three months you will need to complete an initial self-employed form, for more than three months you will need to complete a full self-employed form. These forms can be obtained from our website, or you may wish to contact us by telephone or at one of our offices.

	You	Your partner
What kind of work do you do?	<input type="text"/>	<input type="text"/>
When did the business start?	/ /	/ /
What is the address of the business?	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode <input type="text"/>	Postcode <input type="text"/>
Do you have any business partners?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Tell us their name and address	<input type="text"/> <input type="text"/> Postcode <input type="text"/>	<input type="text"/> <input type="text"/> Postcode <input type="text"/>
How many hours do you normally work?	<input type="text"/>	<input type="text"/>
Do you get a Business Start-up Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
Do you pay into a private pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>

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

Other information regarding self-employment you think may be useful:-

Part 6: Your earnings

Are you or your partner working (including voluntary work), receiving Statutory Sick Pay or Statutory Maternity/Paternity Pay?

No

Yes Please tell us about this below.

You

Your partner

Who do you work for?

What is the company's address?

Postcode

Postcode

What kind of work do you do?

When did you start this job?

 / /
 / /

How many hours do you normally work each week?

 hours

 hours

How much are you paid?

£

£

How often are you paid? (weekly, fortnightly, four-weekly, monthly)

How is your wage paid? (by cheque, cash, into your bank account)

When is your next pay rise due?

 / /
 / /

Do you work regular overtime or get regular bonuses, tips or commission?

No Yes

No Yes

How much do you get?

£

 each

£

 each

If this job is for a fixed period, please tell us the date it will end?

 / /
 / /

Are you getting Statutory Sick Pay (SSP)?

No Yes

No Yes

Are you getting Statutory Paternity Pay (SPP)?

No Yes

No Yes

Are you getting Adoption Pay?

No Yes

No Yes

Are you getting Statutory Maternity Pay (SMP)?

No Yes

No Yes

How much?

£

£

When did it start?

 / /
 / /

Do you pay into a private or company pension scheme?

No Yes

No Yes

How much and how often?

£

 every

£

 every

We need to see proof of earnings, Statutory Sick Pay or Statutory Maternity Pay etc. If you work for an employer, we can accept the following proof:

Continued on the next page

Part 6: Your earnings (continued)

- Five of your most recent payslips if you are paid weekly, three if you are paid fortnightly, or two if you are paid four-weekly or monthly. We cannot accept hand written payslips.
- If you do not have any payslips you will need to ask your employer to complete a certificate of earnings form. This form can be obtained from our website, or you may wish to contact us by telephone or at one of our offices.
- If you have only recently started a new job, please provide a letter from your employer on headed paper giving details of your expected earnings. You will need to send payslips when you receive them to confirm your earnings.
- If you pay into a private pension scheme, we need to see a letter from your pension company confirming the pension scheme and evidence of the amount you pay, such as payments on your bank statement.

All documents provided must be originals. We cannot accept photocopies.

About any other work

	You		Your partner	
Do you have more than one job?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
What is the name and address of your second employer?				
	Postcode		Postcode	
When did you start this job?	/ /		/ /	
How many hours do you normally work each week?	hours		hours	
How much are you paid?	£		£	
How often are you paid? (weekly, fortnightly, four-weekly, monthly)				
If you or your partner have more than two jobs, please provide details on a separate sheet of paper, and tick this box.	<input type="checkbox"/>			

Part 7: Other income you receive

Do you or your partner receive any of the income types listed below? No Yes

You must fill in **all** the boxes. Please write 'none' if something does not apply to you or your partner.

	You	Your partner	How often?
Works, occupational or service pension	£	£	
When was your last increase?	/ /	/ /	
Who pays you this pension?			
Private or other pension	£	£	
When was your last increase?	/ /	/ /	
Who pays you this pension?			
Are you over 60 and have chosen to receive your works pension at a future date?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	
When do you expect to receive this?	/ /	/ /	

Please provide proof of how much you get and how often. If you are not sure what proof you can provide, please contact us for advice. You do not need to tell us about any payments you receive from the Eileen Trust, Independent Living Fund or the MacFarlane Trust.

All documents provided must be originals. We cannot accept photocopies.

Part 7: Other income you receive *(continued)*

	You	Your partner	How often?
Maintenance for children	£	£	
Maintenance for yourself	£	£	
Annuity or Home Income Plan	£	£	
Charitable or voluntary payments	£	£	
Councillor allowances	£	£	
Training allowances	£	£	
Income from a trust fund	£	£	
Any other income	£	£	
Please say where this income comes from			

If you receive any income from property or land you own please ensure details of this are included in part 10.

	You	Your partner
Does anyone owe money to you, your partner or any children you are claiming for?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
What for?		
How much?	£	£
Are you expecting to get any money in the next 12 months?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
What for? (For example, a redundancy payment or a payment instead of notice or holiday)		
How much?	£	£
When do you expect to get this?	/ /	/ /

We need evidence of all your income. These must be original documents. Without these we cannot pay benefits.

Part 8: About being a student

	You	Your partner
Are you or your partner a student?	No <input type="checkbox"/> Yes <input type="checkbox"/> Answer the questions below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Answer the questions below.
Is the course full time or part time?	Full time <input type="checkbox"/> Part time <input type="checkbox"/>	Full time <input type="checkbox"/> Part time <input type="checkbox"/>
What are the hours of study?		
How much is your student loan, grant or bursary for the academic year?	£	£
When does the course start and finish?	Start / / Finish / /	Start / / Finish / /

We need to see a letter from your place of education confirming enrolment and proof of your loan, bursary or grant. We will accept a loan, bursary or grant award notice showing a breakdown of the award.

Part 9: About Bank/Building Society accounts, savings, investments and property

You must tell us about all your Bank or Building Society accounts, even empty or overdrawn ones.

We also need to know about any other savings you have invested, such as bonds, saving certificates, stocks and shares and unit trusts.

Do you or your partner have any Bank/Building Society accounts, savings, investments or property in the UK or abroad?

No

Yes

Answer the questions below.

Name of Bank/Building Society/ISA	Account Number	You	Your partner
		£	£
		£	£
		£	£
		£	£
		£	£
		£	£
		£	£
		£	£
		£	£

Do you have any of the following?

	You		Your partner	
Cash savings	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>
Premium Bonds	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>
Post Office accounts	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>
PEPs	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>
Money or property held in trust	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> £ <input type="text"/>

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

No

Yes

Please give details below.

Stocks, shares, bonds and unit trusts

Name of company	Number held	Type (delete as applicable)
		stocks / shares / bonds / unit trusts
		stocks / shares / bonds / unit trusts
		stocks / shares / bonds / unit trusts

National Savings Certificates

Issue number		Number of units	
Issue number		Number of units	
Issue number		Number of units	

If you need more space, please use a separate sheet of paper, and tick this box.

Part 9: About Bank/Building Society accounts, savings, investments and property *(continued)*

Other investments	You	Your partner
How much is held?	£ <input style="width: 150px;" type="text"/>	£ <input style="width: 150px;" type="text"/>
Where is the money saved or invested?	<input style="width: 500px; height: 20px;" type="text"/>	

We accept the following as proof:

- Bank, Building Society and Post Office statements or passbooks, even if the account is overdrawn. These must cover at least the last two months. We cannot accept balance slips showing the current amount.
- A letter from your Bank or Building Society. This should show the type of account held, the account number, the current balance and details of any transactions for the previous two months.
- For investments or other savings, such as unit trusts, savings certificates, stock and shares, bonds and so on, we need original documents showing proof that you own them.

All documents provided must be originals. We cannot accept photocopies.

Part 10: About land and property

Do you or your partner own any other property or land besides the one you are claiming for?

This includes properties in this country and abroad.

No

Yes Answer the questions below.

Please confirm if this is a property or land

Property

Land

What is the full address of the property or land?

Postcode

Is the property or land up for sale?

No Yes

When did you put it on the market?

Please provide proof.

/	/
---	---

What is the current value?

£

Is the property or land mortgaged?

No Yes

How much do you owe on the mortgage?

£

How much are the monthly mortgage payments?

Please provide proof.

£

Is this property occupied?

No Yes

Do you receive any rent for the property?

No Yes

Please provide proof.

Amount

How often?

Please give occupants' names and relationship to you or your partner (such as parent, ex-partner, tenant).

--

If a member of your family, is this person

Over 60?

Disabled?

All documents provided must be originals. We cannot accept photocopies.

Part 11: About lump sum payments

Have you or your partner received any of the following?

Far Eastern Prisoner of War Compensation Payment

No

Yes

No

Yes

Compensation payment made to victims of atrocities that happened during the Second World War

No

Yes

No

Yes

Payment from the vCJD (Creutzfeldt-Jakob disease) Trust

No

Yes

No

Yes

Do any of your savings or investments include:

Money from the sale of a house?

No

Yes

Amount

£

Date received

/

/

Money from a charity?

No

Yes

Amount

£

Date received

/

/

Name of charity

Part 12: About where you live

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 it is

Do you own your home (or have a mortgage)?

No

Yes

You will need to complete this part if you pay rent to a private landlord, a housing association, or Curo Housing Group Ltd (even if you previously rented this property from the Council).

Do you rent your home?

No

Yes

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

Answer all the questions in this section. Your landlord's and agent's full name and address must be declared. Failure to do so will result in delay/loss of benefit.

What is your landlord's full name and address?

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

Postcode	Telephone

If your landlord has an agent, tell us their full name and address

By agent we mean the person or organisation you actually pay your rent to.

Postcode	Telephone

Have you or your partner (or children) ever been related to, or in a relationship with your landlord or agent (or their partners)?

No

Yes

What is the relationship?

Have you or your partner ever owned or part-owned the property you are renting?

No

Yes

Do you have to rent your home as a condition of your employment?

No

Yes

Are you living in accommodation that is maintained by a religious order?

No

Yes

Part 12: About where you live *(continued)*

How much rent are you charged? £ every
(weekly, fortnightly, four-weekly, monthly)

When did you start renting your home? (start of your tenancy) / /

Has your rent been registered as a fair rent by the Rent Officer? No Yes Unsure

Do you have a shorthold tenancy? No Yes

How long is your tenancy for? 6 months 12 months other (please state)

Are you a joint tenant? No Yes Please tell us who your joint tenants are below.

Do you have separate contracts? No Yes

How much of the rent do you pay and how often? £ every
(weekly, fortnightly, four-weekly, monthly)

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?

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?

Does your rent include money for any of the following?

Meals No Yes How much? £ every

For which meals (please tick) Breakfast Lunch Evening meal

Council Tax No Yes How much? £ every

Water authority charges 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 room or windows No Yes How much? £ every

Heating No Yes How much? £ every

Personal care and support 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 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, lift maintenance or Council Tax?

No Yes How much? £ every

Please tell us the type(s) of services below.

Part 12: About where you live (continued)

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	<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, rooms, or a studio flat	<input type="checkbox"/>	Residential nursing home	<input type="checkbox"/>
Detached bungalow	<input type="checkbox"/>	Hostel	<input type="checkbox"/>	Other	<input type="text"/>
If you live in a room what is the room number?	<input type="text"/>	If you live in a houseboat what is the length and beam?	<input type="text"/>		

How many rooms are there?

In the whole house

Just for you and your household

That you share with other people

Living rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedsitting rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathrooms and shower rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separate toilets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you use your home for business?

No

Yes

Please ensure part 5 is complete.

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

Tell us about it below.

Do you pay rent on this home?

No

Yes

How much?

£

What is the address?

 Postcode

Are you living away from your usual home at the moment?

No

Yes

Tell us more about it below.

Why are you not living at home?

(For example, in hospital, prison, fleeing domestic violence, or your home is uninhabitable.)

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?

Relationship to you

Payment received

£

every

Part 13: How you will be paid and the choices you have

Council Tax Support will be deducted from your Council Tax liability. You will be sent a revised bill.

Some Housing Benefit tenants have a choice about how their Housing Benefit is paid.

If you:

- rent from a housing association
- have a tenancy which started before 15/01/1989
- live in a hostel
- live in exempt accommodation. (This applies to care/supervision provided by a voluntary/charitable organisation. This does not include a landlord who is providing care.)
- live in accommodation where a substantial part of the rent is attributable to board. (For example, bed & breakfast / hotel tenancies.)

You can either have benefit paid into your own Bank/Building Society account **or** direct to your landlord. Please choose either option 1 or 2 below.

For all other private tenants, benefit must be paid directly into your Bank/Building Society account, so you will need to complete option 1. This is because your Housing Benefit will be assessed under Local Housing Allowance (LHA) rules. Please see the next page for details of when we can consider making payments direct to a landlord or agent instead.

Please contact us for advice if you do not have a Bank or Building Society account that your benefit can be paid in to.

Option for payment

1 Paid direct into your Bank or Building Society account

This is a safe and easy way to get your Housing Benefit. In most cases, we will pay your benefit every two weeks in arrears.

Please give the following details

Name and address of your Bank or Building Society

Postcode

Bank account number

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

Building Society account number

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

Bank sort code

Please tell us all 6 numbers e.g. 12-34-56

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

Building Society roll number

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

Type of Building Society account

--

Name(s) of account holder(s)
(Please write the name or names as they appear on the cheque book, passbook or statement.)

--

--

2 Paid direct to your landlord's Bank or Building Society account, if your landlord agrees to accept these arrangements

This method is just as safe and easy as the first, but we will pay your Housing Benefit to your landlord's account instead of yours. We will write to your landlord for their account details. Benefit will generally be paid four weeks in arrears.

Part 13: Local Housing Allowance (LHA) tenants only

If you have difficulty managing your affairs and would like payments of benefit made direct to your landlord, please answer the questions below.

About the person/organisation requesting payment of rent to the landlord (if not the tenant).

Name	
Organisation/relationship	
Address	
	Postcode
Telephone number	

The application for payment of rent to your landlord can be completed by the following:

- Tenant
- Family and friends
- Appointee
- Advice or Welfare Agency
- Landlord/Letting Agent
- Another service within the Council
- Medical Professional

If you consider that payments of Local Housing Allowance should be made to your landlord, please tick the appropriate statement below:

Reason for paying LHA to the landlord

Proof we need to see

I have/my partner has problems managing my/our money because of learning difficulties	<input type="checkbox"/>	Written proof from care workers or Social Services
I have/my partner has a medical condition or mental health problem which makes it difficult to manage my/our money	<input type="checkbox"/>	Written proof from care workers, Social Services, GP or hospital
I have/my partner has serious difficulties reading and writing	<input type="checkbox"/>	Written proof from support groups
I have/my partner has difficulty speaking and understanding English	<input type="checkbox"/>	Written proof from support groups
I am/my partner is dealing with an addiction to drugs, alcohol or gambling	<input type="checkbox"/>	Written proof from support groups, Social Services, GP or hospital
I am/my partner is escaping from domestic violence	<input type="checkbox"/>	Written proof from support groups, Social Services, Police
I have/my partner has recently been released from prison	<input type="checkbox"/>	Written proof from Probation Service, support groups, copy of the Court Order
I am/my partner is an undischarged bankrupt	<input type="checkbox"/>	Letter from bank or money advisors
I am/my partner is unable to open a bank account	<input type="checkbox"/>	Letter from bank or money advisors
I have/my partner has a history of rent arrears	<input type="checkbox"/>	Proof of rent arrears, eviction letter
I am/my partner is homeless	<input type="checkbox"/>	Written proof from support groups, social worker, homeless charity

Other reason - please tell us about it below.

It is important that you provide clear written/documented evidence to support the information given on this form. However if it is obvious that no evidence is available, we can accept written testimonies from professionals, key workers, or any relevant third party.

Part 13: Paying benefit to your landlord

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

Your declaration

Please pay my Housing Benefit straight to my landlord.

I understand that by law:

- I must always tell you about any change in my circumstances.
- If I do not tell you about any changes of circumstances and you pay me too much benefit because of this, I may have to pay back the overpaid benefit.
- That I may be prosecuted if I do not tell you about any change of circumstances.

Your signature

Full name (in CAPITAL LETTERS)

Date

Your landlord's declaration

I am willing 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 a 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.
- 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 other tenants. This will not affect their rent.

Your landlord's signature

Full name (in CAPITAL LETTERS)

Date

Part 14: Permission to discuss

Sometimes a landlord or other third party may contact us about your claim, or on your behalf. If you ask anyone to contact us on your behalf, we will not be able to talk to them unless we already have your permission to do so.

If you **do not** wish us to discuss your claim with anyone else please tick here.

Please note - we may need to discuss payments with your landlord if we are paying your Housing Benefit directly to them.

If you give us permission to discuss your claim with your landlord or landlord's agent, please tick here, and complete the following:

Name of landlord

Name of agent/agency

If you give us permission to discuss your claim with someone else on your behalf, please tick here, and complete the following:

Name

Organisation/relationship

Address

Postcode

Telephone number

Name

Organisation/relationship

Address

Postcode

Telephone number

Name

Organisation/relationship

Address

Postcode

Telephone number

Part 15: Notes

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 separate sheets of paper with this form, please tell us how many.

You can also use this space to tell us about future changes to your circumstances that you know about now that may affect your claim for benefit.

Part 16: Backdating benefit

We normally pay benefit from the Monday after we receive your claim. Sometimes we can pay from an earlier date if you have good reasons why you have not claimed earlier. If you want us to consider paying your benefit from an earlier date, please give as much detail in the box below. If you do not provide sufficient reasons for your failure to claim from the earlier date, we may not be able to backdate your benefit.

Please tell us why you did not claim earlier.

Tell us the date you want to claim from.

/ /

Part 17: Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you are able to do so. If you have a partner they do not have to sign this form, but getting them to do so should 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.

I understand that if I knowingly give information that is incorrect or incomplete you may take action against me, and I understand that I could be prosecuted.

I agree that you will use the information I have provided to process my claim for Housing Benefit or Council Tax Support, or both. You may cross check the information with other sources within the Council, rent offices and other councils. Data held may be used in comparison for the purposes of prevention and detection of fraud.

I understand that you may use any information I have provided in connection with this and any other claim for DWP benefit that I have made or may make. You may give some information to other organisations, such as government departments, local authorities and private-sector companies, such as banks and organisations that may lend me money, if the law allows this.

I know that I must let you know about any changes in my circumstances which might affect my claim as soon as they happen.

I understand that if benefit is paid direct to my landlord and a dispute arises over the amount paid, that you may have to disclose all the details of my claim and subsequent correspondence to my landlord, their representative, and a court or an appeal tribunal.

Signature of person claiming

Date

Partners signature

Date

If this form has been filled in by someone else 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 person who filled in the form

Signature

Relationship to the person claiming

Organisation or contact number

Date

Part 18: Checklist

Please check that you have answered all the questions that apply to you and remember to sign the declaration. If you do not have the proof we need at the moment, send the form back to us now and send the proof later. We can start to process your claim, but we will not be able to pay you any benefit until we have all the proof.

	You		Your partner	
• Have you answered all the questions	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
• Have you signed the form	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Please tick to tell us what you are sending with this form.

	Enclosed	To follow	Enclosed	To follow
• Proof of identity and National Insurance Number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of your rent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of all benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of wages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of all your accounts and savings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of all income for anyone else living in your home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remember, if you do not provide all the information we have asked for on this form, we might not be able to pay you any benefit.

Part 19: Contact information



The best way to get advice or make a claim for Housing Benefit or Council Tax Support is to visit Council Connect in Bath, Keynsham or Midsomer Norton.

Opening times of our offices may vary.
Please check at www.bathnes.gov.uk/contactus or call 01225 47 77 77.



To speak to someone about your claim during office hours, please call 01225 47 77 77 and select the option for 'Benefits'.



benefits@bathnes.gov.uk



Visit www.bathnes.gov.uk and follow the links to 'Benefits'.



Customer Services
PO Box 2797
Bath
BA1 1WF

This form can be made available in a range of languages, large print, braille, on tape, electronic and accessible formats from Customer Services.
Tel: 01225 47 77 77 Fax 01225 47 78 09 Email: benefits@bathnes.gov.uk

**Bath & North East
Somerset Council**
