

Name:  Address:  Address:  Revenues and Benefits  Council Offices  South Street  Rochford  Essex  SS4 1BW  Phone: 01702 318197 or 01702 318198  Postcode:  Email: revenues&benefits@rochford.gov.ul		
Address:  South Street  Rochford  Essex  SS4 1BW  Phone: 01702 318197 or 01702 318198	Name:	Revenues and Benefits
Rochford Essex SS4 1BW Phone: 01702 318197 or 01702 318198		Council Offices
Essex SS4 1BW Phone: 01702 318197 or 01702 318198	Address:	South Street
SS4 1BW Phone: 01702 318197 or 01702 318198		Rochford
Phone: 01702 318197 or 01702 318198		Essex
		SS4 1BW
		Phone: 01702 318197 or 01702 318198
	Postcode:	Email: revenues&benefits@rochford.gov.ul

# Self-employed income form

#### This is not a claim form for Housing Benefit or Council Tax Support.

This form is for you to give us the extra information we need to work out your Housing Benefit, Council Tax Support, or both.

If you are a director of a company, you do not need to fill in this form.

## Please do the following:

- Look at the checklist on page 7 (section H) for the types of proof you will have to give us with this form
- You must read and sign the declaration on page 8, (section I).
- Fill in this form in black ink. Do not use pencil.
- Answer **all** the questions.
- Tick the 'Yes' or 'No' boxes. Do not put crosses in or leave the boxes blank.

#### Remember

- Return your completed, signed form to us straight away.
- When you return this form to us, we may ask you for more information.
- If you have audited accounts for the last financial year, send these to us. You do not need to complete this form if you provide audited accounts for the last financial year.

When you are self-employed and you claim Council Tax Support, you may be treated as if you are earning a certain amount. This amount is called the 'minimum income floor'. For further information please refer to the Rochford District Council 'Council Tax Reduction Scheme' (S13A and Schedule 1a of the Local Government Finance Act 1992) which is available on our website.

#### For office use only

Date of contact	/ /	Benefit Claim Reference	
Date of issue	/ /	Council Tax Reference	
Date received	/ /		

Section A	About you			
Title (Mr, Mrs, M	iss, Ms)			
Surname				
First name (inclu names)	iding any middle			
Address and pos	stcode			
Phone number		Home	Business	
Email address				
Company websit	te	www.		
Section B		About your busine	SS	
Business name, postcode	address and			
Do you trade on	social media?		Yes	No
Type of business	5			
Do you have yoเ	ır own tools/equipm	ent for your trade?	Yes	No
What date did yo	our business start tra	iding?	/	/
On average, how many hours do you work each week?				
ls your business	a partnership?		Yes	No
		profit or loss is yours? agreement with this form.)		%
Please tell us the business partner				

Section B (continued)	A	bout your b	usiness		
Is your husband, wife or part	ner on the payroll of the	e business?	Yes	No	
<b>If yes</b> , how many hours a we	eek do they work?			I	
Are there any other people o	on the payroll?		Yes	No	
<b>If yes</b> , please give their full r	names.				
Do you use any part of your	home for your business	s?	Yes	No	
<b>If yes</b> , please tell us about the For example, you may use a room as an office, or a garage for storage.	1				
Section C	1	ncome			
in all the boxes. If any incom	This section is for you to tell us about all your <b>business</b> income and expenses. You must fill in all the boxes. If any income or expense does not apply to you, please write ' <b>none</b> ' in the box. <b>Do not leave any boxes blank</b> .				
You must tell us what perion these income and expense are for		h Year to	Day	Month	Year
Income			DI.		
We need to know your incon	ne for the period you na	ive written abo	ve. Please	e tell us:	
your income from sales, taki	ngs, earnings or work y	ou have done;	£		
any commission, interest and	d tips vou were paid:			+	
,			£		
any VAT refunded to you;			£	+	
				=	
		Total (A)	£		
Please tell us: any VAT you have paid out (	B)	(B)	£		
Take away <b>(B)</b> from <b>Total (<i>A</i> (before tax, national insuran</b>		=	£		

# Expenses

We need to know your expenses for the period you have written on expenses that are <b>for business</b> use only.	page 3	<u>.</u> You i	must in	clude
Your husband's, wife's or partner's wages	£			
Other people's wages	£			
How much your stock cost	£			
Do you rent a business premises?	Yes		No	
If yes, rent for your business premises	£			
Business rates	£			
Heating, Lighting and hot water on the business premises	£			
Cleaning of the business premises	£			
Landline and Internet on the business premises	£			
Do you have a separate mobile phone for business use only?	Yes		No	
If yes, mobile phone costs	£			
Rent for any part of your home that you use for business (if you are receiving Housing Benefit we cannot include this)	£			
Heating, lighting and hot water for any part of your home that you use for your business	£			
Business insurance	£			
Advertising	£			
Printing and stationery	£			
Postage	£			
Accountancy fees	£			

Section D (continued)	Expen	ses		
Remember your expenses n include expenses that are <b>fc</b>	nust be <u>for the period you have writt</u> or business use only.	en on page 3. `	You must	t
Protective clothing or produc	ets	£		
Bank charges on business a	accounts only	£		
Do you have a business loan	n/s?	Yes	No	
If yes, interest payments on loan agreement as evidence	the loan/s <b>(please send us your</b> ce)	£		
Please explain below why yo	ou took out the loan/s			
Repairing a business asset/s tools). Do not include motori us about motoring expenses		£		
Was the repair of the asset/s	s covered by insurance?	Yes	No	
If more than one, please list	them below and provide a breakdov	vn.		
Apart from a vehicle, have y	ou hired any equipment?	Yes	No	
If yes, give the hiring charge agreement/s as evidence).	e/s (please provide your hire	£		
If more than one, please list	them below and provide a breakdov	vn.		_
debts that cannot be collected	nd Customs have written off (that is, ed because the person that owes yonkrupt). Provide your letter from ms as evidence.			
Please tell us below who ov	ves you this money.			

# Section D (continued)

# **Expenses**

## **Motoring expenses**

We need details of your motoring expenses. You must include expenses that are **for business** use only.

Is your vehicle for business purposes only?

Yes No

If yes, complete all of the questions below.

If no, only provide fuel costs.

You must include amounts that are for business use only.

	Amount	How often is it paid?
Fuel	£	
Road tax	£	
Vehicle lease	£	
Repairs	£	
Vehicle insurance	£	
M.O.T	£	

## **Other Expenses**

We need to know any other expenses for the period you have written on page 3. You must include expenses that are **for business** use only. Use Section F if you have more than 2.

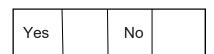
Туре	Amount	From	То
	£	/ /	/ /
	£	/ /	/ /

## Section E

# **Contributions**

#### **National Insurance**

Do you hold an exemption certificate for National Insurance (for example, an age-exemption certificate)?



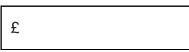
# Personal pension contributions

Do you pay into a personal pension scheme?



If yes, how much do you pay into it and how often?

You must send us your exemption certificate and/or proof of personal pension payments as evidence.



Section F	Any other information						
Please use this s	Please use this space to give us any other information that may help us process your claim.						
Section G	Any changes to your business						
	ny changes to your business that has caused your self employed income to ase? <b>If yes</b> , please give details below.						
	ew contract, a change of or loss of contract, a change in hours worked, a loss of employee.						
When did this cha	ange happen? / /						

## Section H Checklist

## Please send us the following documents (where relevant).

- Audited accounts
- Proof of the money you pay into a personal pension
- Business account statements showing bank charges
- National Insurance exemption certificate
- Partnership agreement
- Hire/Loan agreement

Please send us original documents as we cannot accept photocopies.

### **Data protection**

We will keep the information you have given us confidential. We will store it on a computer and use it to deal with your benefit claim. We will only give your details to someone else if we are asked to by law. This is in line with the current Data Protection legislation.

# **Preventing fraud**

We must protect the funds we manage. We may use the information you have provided on this form to prevent and detect fraud. We may also share this information with other organisations that manage public funds, to prevent and detect fraud.

Please read this declaration carefully.

I am self-employed and the information I have given on this form is true and I have given as much information as I can.

You can check the information I have given.

I will write to you to tell you about any changes to my financial or family circumstances.

I can be prosecuted if any of the information I give is untrue, or if I do not give you any information that I have and that is relevant to my claim.

When you have filled in this form, please read the form again and check that you have sent us all the proof we have asked for.

Finally, before you send the form to us, please read this declaration again and sign it and fill in the boxes below.

Your full name (in CAPITALS)		
Your signature	Date	/ /

If you need free and independent advice you can contact Citizens Advice.

**Opening Times for Initial Assessments:** 

Rochford Office, Back Lane, Rochford SS4 1AY

Open Tuesday 10.00am-2.00pm Open Thursday 10.00am-2.00pm Rayleigh Office, Civic Suite, Hockley Road,

Rayleigh SS6 8EB

Open Monday 10.00am–2.00pm Open Thursday 10.00am–2.00pm Open Friday 10.00am–2.00pm

Free Phone: 0808 2787877 or 0800 1448848

# If you need help filling in the form

You can phone us on 01702 318197 or 01702 318198 between 8.30am to 5.00pm, Monday to Friday.

You can come into the office from 8.30am to 12 noon Monday, Tuesday, Thursday and Friday or 12 noon to 5.00pm on Wednesday.

We are closed at the weekend. Our address is on the front of this form.

If you would like this information in large print, Braille or another language, please phone 01702 318197 / 318198.



Rochford District Council Council Offices South Street Rochford Essex SS4 1BW

Phone: 01702 546366 customerservices@rochford.gov.uk Website: www.rochford.gov.uk