

Name:

Address:

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

Postcode:

Housing Benefit and Council Tax Support claim form for private tenants

This form is for you to give us the information we need to work out your Housing Benefit and Council Tax Support. It explains what you and we have to do when you make a claim.

If you are claiming Universal Credit you cannot claim Housing Benefit. You must contact Jobcentre Plus or Department for Work and Pensions to claim help towards your housing costs. You can claim Council Tax Support from Rochford District Council.

Please do the following.

- Look at the checklist on page 28 (section S) for the types of proof you will have to give us with this form.
- Read and sign the declaration on page 33 (section T) before you return this form to us.
- 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 boxes blank.
- Give us original documents only. We do not accept photocopies.

If you need help to fill in this form, or you have a question for us, please come to our office at the address shown above, phone us on 01702 318197 or 01702 318198, or email us at **revenues&benefits@rochford.gov.uk**

Remember

- Return your filled-in, **signed** form to us straightaway.
- You must give us any proof (that you have not sent with this claim form) within one month of us sending this form to you.

For office use only

Date of contact	/	1	Claim number	
Date of issue	/	/	C/Tax ref	
Date received	/	/		

Notes for filling in this form

About this form

This form may seem long, but every question is important. Each section starts with a question to help you decide if you need to fill in that section.

Proof

We need to see proof of some of the things you tell us about. There is a checklist at the end of this form to help you.

We cannot pay Housing Benefit or Council Tax Support until we have seen the proof we have asked for. You can send your documents by email to **revenues&benefits@rochford.gov.uk**

Filling in the form

If you are filling in this form by hand, use black ink. Do not use pencil. If you make a mistake, just put a line through it 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 one answer from a list of answers, put a tick in the relevant box.

If someone else fills in this form for you, they must fill in section U on page 33.

What to do next

When you have filled in this form, sign it and send it to us with the proof we need to see.

Even if you cannot get the proof straightaway, **you should still send this form to us as soon as you have filled it in**. If you do not send this form to us straightaway, you might lose money. If you cannot get the proof within two or three weeks, let us know – we may be able to help you.

Changes you must tell us about

Tell us straightaway if:

- any of your children leave school or leave home;
- anyone moves into or out of your home, including lodgers, subtenants and boarders;
- your income (including benefits) or the income of anyone living with you, changes;
- the amount of your savings or investments (for example, ISAs or shares) changes;
- you or anyone living with you becomes a student, starts an apprenticeship, goes into hospital or a nursing home, or goes into prison;
- you or anyone living with you starts work, gets a pay rise or leaves a job;

Notes for filling in this form (continued)

- your rent changes;
- you move;
- you or your partner are going to be away from home, for any length of time;
- you get any decision from the Home Office about your right to stay in the UK; or
- you have any other changes that you think we should know about.

You must tell us about any changes straightaway. You can tell us by phone or email at revenues&benefits@rochford.gov.uk, but we may ask you to write to us to confirm the change.

If you do not tell us about these changes, you may lose money you are entitled to or you may get too much Housing Benefit or Council Tax Support.

You must tell Revenues and Benefits about these changes. Telling another council department, or relying on another agency to tell us, is not enough.

Failure to tell us within 21 days of any change that could affect your Council Tax Support could lead to a penalty of £70 or a prosecution.

It is an offence to not tell us about any change of circumstances that might affect your Housing Benefit or Council Tax Support. We may take court action against you if you keep information from us. If we pay you too much Housing Benefit or Council Tax Support, you will have to pay it back.

How we collect and use your information

We will use the information you give in this form, and any proof you send us, to process your claim for Housing Benefit, Council Tax Support, or both.

We may give your information to other organisations such as the Department for Work and Pensions and HM Revenue & Customs, but only if the law allows us to.

We may check the information you or someone else provides. We may also exchange information about you with other organisations, to:

- make sure the information you have given is correct; and
- prevent or detect crime.

The other organisations we may exchange information with include government departments, local authorities and, in certain circumstances, private-sector companies such as banks and organisations that may lend you money.

We will not give information about you to anyone else, or use the information about you for other purposes, unless the law allows us to, in line with Data Protection legislation.

If you want to know more about the information we have about you, or the way we use that information, please phone us on 01702 318197 or 01702 318198, or email us at **revenues&benefits@rochford.gov.uk**

Section A	About you and your partner							
See the check	list on page 28 to	o help yo	ou fill in th	nis seo	ction.			
			You		١	Your partne	r	
Title (Mr, Mrs, M	iss, Ms)							
Surname								
Other names								
Age and date of	birth	Age	Date of bir / /	th	Age	Date of b	oirth	
National Insuran	ce number							
Phone number		Home			Mobile			
Email address								
Are you:								
Single?	married or in a Civil partnership?		rced or [arated?	wido	owed?	living to as a co		
lf you have sepa	rated from your partn	ier, please	answer the	questi	ons belov	W.		
Date you separa	ited / /		his separati manent?	ion	Yes	No		
Their new add	ress:							
Are you in hospi	tal?	Yes	No		Yes	No		
If yes, when did hospital?	you go into	/	/			/ /		
Does anyone ge for looking after	t Carer's Allowance you?	Yes	No		Yes	No		
lf yes, please giv person who gets	ve the name of the s it.							
Ireland, Scotland	r partner come to live d, Wales, the Republi le of Man in the last 5	c of Ireland			Yes	No		
What is your nat	ionality?							
you last enter the	itish, what date did e UK? (The UK is rn Ireland, Scotland	/	1			/ /		

Section A (continued)

About you and your partner

What date did you apply to stay in the UK?

Are you off work because you are sick?

If yes, tell us the date you last worked.

Do you get Statutory Sick Pay?

If yes, when did you start to get it?

Do you get Attendance Allowance or Disability Living Allowance (care component) or Personal Independence Payment (Daily Living Component)?

	You				Your partner				
	/	/			/	/			
Yes		No		Yes		No			
	/	/			/	/			
Yes		No		Yes		No			
	1	/			1	1			
Yes		No		Yes		No			

Section B

About dependent children who live with you

See the checklist on page 29 to help you fill in this section.

Do any dependent children live with you (children who you get Child Benefit for)?

Yes No

If no, go to section C. If yes, please tell us about them below.

If you have more than two children you <u>must</u> provide your latest Tax Credit Award letter – ALL PAGES

		First	child		Secon	d child	
Surname							
Other names							
Age							
Date of Birth		/	/		/	/	
Are they registered blind?	Yes		No	Yes		No	
What is their relationship to you, for example, son or daughter?							
If the child is over 16, what date will you stop getting Child Benefit for them?		/	/		/	/	
Do they get Disability Living Allowance or Personal Independence Payment?	Yes		No	Yes		No	

Section B (continued)

About dependent children who live with you

		Third	child	 	Fourth	child	
Surname							
Other names							
Age							
Date of birth		/	/		1	/	
What is their relationship to you, for example, son or daughter?							
If the child is over 16, what date will you stop getting Child Benefit for them?		/	/		/	/	
Do they get Disability Living Allowance or Personal Independence payment?	Yes		No	Yes		No	
Are they registered blind?	Yes		No	Yes		No	
		Fifth c	hild	 	Sixth c	hild	
Surname		Fifth o	hild		Sixth c	hild	
Surname Other names		Fifth c	hild		Sixth c	child	
		Fifth c	hild		Sixth c	:hild	
Other names		Fifth c	hild		Sixth c	child	
Other names Age			:hild /				
Other names Age Date of birth What is their relationship to you, for			2hild /				
Other names Age Date of birth What is their relationship to you, for example, son or daughter? If the child is over 16, what date will you stop getting Child Benefit for			/				
Other names Age Date of birth What is their relationship to you, for example, son or daughter? If the child is over 16, what date will you stop getting Child Benefit for them? Do they get Disability Living Allowance or Personal			/			/	

If you have any more children, please go to section R on page 27 and give us the same information you have given about your other children.

Section C

About any other people who live with you

See the checklist on page 29 to help you fill in this section.

Does anyone else live in your home who does not pay you rent as a boarder or as a tenant? This includes children you do not get Child Benefit for.

Yes No

If no, go to section D. If yes, please tell us about them below.

First person Second person Title (Mr, Mrs, Miss, Ms) Surname Other names Date of birth 1 1 1 1 What is their relationship to you? Do they get Income Support, income-based Jobseeker's Allowance, income-related Yes No Yes No **Employment and Support** Allowance, Pension Credit, or Universal Credit? Please give us their National Insurance number. Do they work? Yes No Yes No If yes, how many hours a week? How much do they get paid before £ £ tax, National Insurance and so on? Please say whether they are paid weekly or monthly. If they have other income, how much is it and how often is it paid £ £ to them? How much do they have in savings? £ £ Tell us the names of any other benefits they get and how often they get them. £ £ How much do they get?

Section C (continued)

About any other people who live with you

First person Second person Are they a student? Yes No Yes No Are they an apprentice? Yes No Yes No Do they have a severe learning disability, mental illness or form of Yes No Yes No dementia? Do they provide care for you or your partner for more than 35 hours a Yes No Yes No week? Are they in hospital, in prison or on remand? Yes No Yes No If yes, what date did they go into hospital, prison or on remand? 1 1 1 1 Are any of these people married to each other or living with each other Yes No No Yes as if they were married? If yes, please give us their names If there are any more adults living with you, please go to section R on page 27 and give us the same information you have given us about the other adults.

Section D

About people you rent rooms to

See the checklist on page 29 to help you fill in this section.

Do you rent any rooms to a subtenant If no, go to section E. If yes, please tel	Yes	econd	No persor) 1				
Surname		-					-	
Other names								
How much rent do you charge them each week?	£				£			
Does their rent include heating?	Yes		No		Yes		No	
Does their rent include meals?	Yes		No		Yes		No	

Section E

About Income Support, Pension Credit (Guarantee Credit), Employment and Support Allowance, Jobseeker's Allowance and Universal Credit

See the checklist on page 29 to help you fill in this section.

		You	Your	Your partner		
Do you get Pension Credit (Guarantee Credit)?	Yes	No	Yes	No		
Do you get Income Support, Income based Job Seeker's Allowance or Income-related Employment and Support Allowance?	Yes	No	Yes	No		
Do you get Universal Credit?	Yes	No	Yes	No		
If you have claimed Universal Credit,	you mu	st complete the w	vhole form.			

1

Yes

If yes, what date was it awarded from?

Are you or your partner waiting to hear about a claim for any of the above benefits?

If yes, what date did you claim?

If you get Income Support, Pension Credit (Guarantee Credit), income-based Jobseeker's Allowance, Income-related Employment and Support Allowance, please go to section N on page 19. If not, please go to section F below.

1

If you get Universal Credit you cannot claim Housing Benefit. You must contact the Jobcentre Plus or Department for Work and Pensions to claim help towards your housing costs. You can claim Council Tax Support from Rochford District Council.

Section F

About students

1

No

1

1

1

Yes

1

No

1

See the checklist on page	29 to help you	fill in this section.
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	You			`	Your pa	artner		
Are you or your partner a student?	Yes		No		Yes		No	
If no, go to section G. If yes, please tell us about your course below.								
What date did your course start?		1	1			1	1	
What date will your course end?		1	1			1	1	
Do you get a student loan, grant or bursary?	Yes		No		Yes		No	
If yes, how much do you get?	£				£			
How often is it paid, for example, weekly or monthly?								

Section G

About your work and your income

Yes

No

See the checklist on page 30 to help you fill in this section.

Are you or your partner employed or a company director? If yes, please fill in section G1.

G1 If you are employed

Are you or your partner self-emple If yes, please fill in section G2.	oyed?	Yes No
G1 If you are employed		
	You	Your partner
Please give the date you started work.	/ /	
Is your employment for a fixed period?	Yes No	Yes No
If yes, please give the date the employment will end.		
How often are you paid? For example, every week, fortnight, four weeks or month?		
If you work in education are you paid in 12 instalments?	Yes No	Yes No
How much do you get paid?	£	£
How many hours a week do you work?		
Do you get regular pay rises?	Yes No	Yes No
If yes, how often do you get them For example, every year, every six months.	?	
Please give your employer's name and address.		
What is your payroll number?		

Please tell us the type of work you do.





If you have more than one job, please go to section R on page 27 and give us the same information you have given us about your other job.

Section G (continued)

About your work and your income

G2 If you are self-employed		
	You	Your partner
What date did you start trading?	/ /	1 1
What is your business?		
Tell us your business address.		
Are you still trading?	Yes No	Yes No
If no, what date did you stop trading?	/ /	/ /
How many hours do you work each week?		
Is your partner on the payroll of the business?	Yes No	Yes No
If yes, how much are they paid?	£	£
How often they are paid? For example, every week or every month.		
Are there any other people on the payroll of the business?	Yes No	Yes No
If yes, please give their full names.		
Do you use any part of your home for your business?	Yes No	Yes No
If yes, please tell us about this. For ex for storage.	kample, you may use a room	as an office, or a garage

Section G (continued)

About your work and your income

If you are self-employed (conti G2

Do you have accounts, audited or not audited, for the last financial year?

If no, please tell us when they will be ready.

Do you hold an exemption certificate, for National Insurance? For example, an age-exemption certificate.

Do you get a New Enterprise Allowance?

Is your business a partnership?

If yes, what percentage of the total profit or loss is yours?

nued)	Yo	u		١	artner		
Yes		No		Yes		No	
	/	1			/	1	
Yes		No		Yes		No	
Yes		No		Yes		No	
Yes		No		Yes		No	
			%				%

Your partner

No

Yes

Section H

About your pension

No

You

See the checklist on page 30 to help you fill in this section.

Do you or your partner get State Retirement Pension, New State Pension, Pension Credit (Savings Yes Credit), Widow's Pension, War Disablement Pension or a private or company If yes, tell us

/ pension?	
s about them below.	

If you do not get any of these pensions, go to section I.

	You	ĺ	Your pa	rtner
	How much do you get?	How often is it paid?	How much do you get?	How often is it paid?
State Retirement Pension/ New State Pension	£		£	
Pension Credit (Savings Credit)	£		£	
Widow's Pension	£		£	
Widow's Disablement Pension	£		£	
Private or Company Pension	£		£	

Section H (continued)	About your pension						
		You	Your p	artner			
If you have a private or company pension, what is the name of the company?							
Please tell us below about any of	ther pensions yo	u receive.					
Do you have a pension pot that y	/ou can withdraw	/ money from?	Yes	No			
If yes, please tell us about any money you are currently drawing and the total amount of money in the pot.							
Section I	Abo	ut your incom	10				
See the checklist on page 3	30 to help you	u fill in this se	ection.				
Do you or your partner get, or hav for any of the benefits listed below		ed	Yes	No			
If yes, please fill in the relevant be	oxes below. If no	o, go to section J					
	Yo		Your pa				
	How much do you get?	How often is it paid?	How much do you get?	How often is it paid?			
Child Benefit	£		£				
Contribution-based Jobseeker's Allowance	£		£				
Contribution-based Employment and Support Allowance	£		£				
Universal Credit	£		£				
Child Tax Credit - you must provide your full award letter	£		£				

Section I (continued)	About your income						
	Yo	u	Your pa	artner			
	How much do you get?	How often is it paid?	How much do you get?	How often is it paid?			
Working Tax Credit	£		£				
Disability Living Allowance (care component), or Personal Independence Payments (daily living)	£		£				
Disability Living Allowance or Personal Independence Payments (mobility component)	£		£				
Attendance Allowance	£		£				
Bereavement Allowance	£		£				
Severe Disablement Allowance	£		£				
Industrial Injuries Benefit	£		£				
Maintenance payments for you	£		£				
Maintenance payments for your children	£		£				
Guardian's Allowance, Foster Allowance or Statutory Adoption Pay	£		£				
Maternity Allowance, Paternity Pay or Statutory Maternity Pay	£		£				
Widowed Parent's Allowance	£		£				
Carer's Allowance	£		£				
If you get Carer's Allowance, who do you care for?							

If you have applied for any of the benefits above in the last three months, please tell us which benefits you have applied for below.

How many bank acc	ounts do you have?		
		You	Your partn
Name of the bank	Account number	Balance	Balance
	er have any building societ 3. If yes, please tell us abou		
If no, go to section J overdrawn.		ut them below. Inclu	
If no, go to section J overdrawn.	3. If yes, please tell us abou	ve?	de accounts that a
If no, go to section J3 overdrawn. How many building s Name of the	3. If yes, please tell us about ociety accounts do you have tell us about the second sec	ve? You	de accounts that a
If no, go to section J3 overdrawn. How many building s Name of the	3. If yes, please tell us about ociety accounts do you have tell us about the second sec	ve? You Balance	de accounts that a Your partn Balance
If no, go to section J3 overdrawn. How many building s Name of the	3. If yes, please tell us about ociety accounts do you have tell us about the second sec	ve? You Balance	de accounts that a Your partn Balance £

savings, investments or payments?

If no, go to section K. If yes,	please fill in the	e relevant boxes	3.	
	Yo	bu	Your	partner
	Amount	Account number	Amount	Account number
Post Office account	£		£	
Credit Union account	£		£	

Section J

See the checklist on page 30 to help you fill in this section.

Do you or your partner have any bank accounts? J1

About your money, savings and investments

pag	e 27 and give us the same information you have given us a
J3	Do you or your partner have any of the following

No Yes



Yes

	No	
--	----	--

No

Section J (continued)

About your money, savings and investments

	Ye	bu	Your p	artner	
	How many do you own?	Date of issue	How many do you own?	Date of issue	
National Savings Certificates	£		£		
	Number of units	Names of investment companies	Number of units	Names of investment companies	
Shares, stocks or unit trusts	£		£		
	Amo	ount	Amo	ount	
ISAs	£		£		
Income or Premium Bonds	£		£		
Far East Prisoner of War	What date Amount did you receive it?		Amount	What date did you receive it?	
Payment, or compensation payment to victims of atrocities	£	/ /	£	/ /	
during World War Two	Amount	Who paid you the lump sum?	Amount	Who paid you the lump sum?	
Any lump sums you have received in the last 52 weeks	£		£		
	Amo	ount	Amount		
Cash savings	£		£		
If you have any other savings, please tell us about them below					

Section K	About any other income								
See the check	list on page 31 to	help	you fi	ll in th	nis seo	ction.			
Do you or your p	partner have any othe	r incom	e?			Yes		No	
If no, go to section	on L. If yes, please te	ll us ab	out it be	elow.					
			Υοι	L		Y	our pa	artner	
Do you get a reg charity or from a family?	ular income from a member of your	Yes		No		Yes		No	
lf yes, please tel	l us how much you ge	et, how	often yo	ou get i	t and w	hat it is	for.		

Do you or your partner get any other income that you have not already told us about? This includes insurance	You				Your partner			
us about? This includes insurance annuities and home income plans.	Yes		No		Yes		No	

If yes, please tell us how much you get, how often you get it and what it is for.

Section L

About other property

See the checklist on page 31 to help you fill in this section.

Do you or your partner own or have a share in any other property or land, in this country or abroad?

No

Yes

If no, go to section M. If yes, please give the address or addresses below.

Is the property up for sale?	Yes		No	
If yes, what date was it put up for sale?		/	/	

Section L (continued)

About other property

Do you or your partner get any rent from this property?

If yes, please tell us how much you get and how often it is paid? For example, every week or every month.

If you or your partner used to live in this property, please tell us the date that you left.

Has the person who lives in your property ever been your partner?

If yes, are they a lone (single) parent?

Do their dependent children live with them?

Does an elderly or disabled relative live in the property?

If yes, please tell us their date of birth.

Yes		No	
£			
	/	/	
Yes		No	
	/	/	

Section M		About payments you	make			
See the chec	klist on page	e 32 to help you fill in this so	ection.			
		ay for childcare for any child nild who is under 16?	Yes	No		
lf no, go t	o section M2. If	yes, please tell us about the childe	care below.			
How much child	care do you pay	y each week?	£			
Please tell us w						
Do you receive childcare costs?		Yes	No			
lf yes, please te	Il us how much	you receive each week?	£			
Ű	-	and registration number of your re pple who look after your children.	gistered child	minder or the		
Do you pay for o	childcare:					
School term	time only	school holidays only		rm-time and lool holidays		

Section M	

About payments you make

M2 Do you or your partner pay into a private pension scheme?

If no, go to section N. If yes, please tell us about it below

Who is paying into a private pension scheme?

How much is paid into the private pension scheme?

How often do you pay? For example, every week or every month?

Section N

About your home

See the checklist on page 32 to help you fill in this section.

If you are claiming Universal Credit you cannot claim Housing Benefit. You must contact Jobcentre Plus or Department for Work and Pensions to claim help towards your housing costs. You can claim Council Tax Support from Rochford District Council.

Please give the full address and postcode of the property for which you are claiming Housing Benefit, Council Tax Support or both.

If you have lived at the above address for less than 12 months, please give the full address you lived at before.

Do you rent from a:

Housing association?

private landlord or estate agents?

Please give us the name and business address of your landlord.

Name

Address

If an estate agent is acting for your landlord, please give the estate agent's name and business address.

Name

Address

Yes	No
You	Your Partner
£	

Section N (continued)	About your	home
What date did your tenancy s	start?	1 1
What date did you move into	your home?	/ /
them for rent and meals.	es in someone's home and pays lives in someone's home and has	Yes No
Are you a joint tenant?		Yes No
If yes, please give the names	of the other joint tenants	
Are you responsible for payir	ng the Council tax for your home?	Yes No
Is it your main or only home?		Yes No
If yes, please give the names	of the other joint tenants	
Tick one of the boxes below t	o show the kind of accommodation yo	bu live in.
Detached house	Semi-detached house	Terraced house
Detached bungalow	Semi-detached bungalow	Terraced bungalow
Purpose-built flat	Converted flat	Flat over a shop
Rooms in a house	Maisonette	Hostel
Other - (Please tell us what	at kind of accommodation you live in)	

Section N (continued)

About your home

Does your home have:

central heating?

a garden?

a garage?

parking space?

How many floors are in your home?

Which floors do you live on, for example, ground, first or second?

Please tell us about the rooms in your home.

	Living rooms	Bedrooms	Bed-sitting rooms	Kitchens	Bath	irooms	Toilets	Others
How many rooms are in the whole property?								
How many rooms are used just by you and your family?								
How many rooms do you share with other people?								
How many peo	ople do you	ı share your h	nome with?					
Do you need a	a bedroom	for any care	rs who stay w	vith you?		Yes	1	No
Are you a care leaver previously provided with accommodation by Social Services? Yes No							No	
Who is responsible for furnishing your home? You Your landlord								
ls your fully home	furnished	?	partly furni	shed?		unfurn	ished?	
How much is	your rent?					£		

Yes	No	
Yes	No	
Yes	No	
Yes	No	

Section N (continued)

About your home

How often do you pay it, for example, weekly, four-weekly, monthly or yearly?

Could you or your partner afford the rent when you signed the tenancy agreement?

Have you or your partner claimed Housing Benefit in the last 52 weeks

Does your rent include any of the following?

Yes	No	
Yes	No	

How much do

No

	Yes	No		ou pay ou kno	
Lighting your home			£		
Lighting shared areas			£		
Hot water			£		
Gas or electricity for cooking			£		
Heating			£		
Cleaning your home			£		
Cleaning shared areas			£		
Laundry			£		
Personal laundry			£		
Council Tax			£		
Water charges			£		
Breakfast			£		
Lunch			£		
Evening meal			£		
Gardening			£		
Does your rent include counselling, support (for example, a warden or a personal alarm system), medical nursing or other care services? If yes, please tell us below what your rent includes.		Yes		No	
Has your rent been registered with the Valuation Office Agency as a fair rent?		Yes		No	
If yes, how much is the fair rent?		£			
What date was it registered?			/	/	

Section N (continued)	About your	home		
Is there anything else include cleaning, lift or building maint	d in your rent, for example, window enance?	Yes	No	
If yes, please tell us below wh	nat else is included.	·	· · ·	
Is your landlord related to yo	u or anyone who lives with you?	Yes	No	
If yes, please say how they a sister, mother and brother.	re related. Some examples are			
Did you, or anyone who lives before your tenancy started?	with you, know your landlord	Yes	No	
If yes, how did you or they kr	now your landlord?			
Do you have any children fro	m a relationship with your landlord?	Yes	No	
Do you share the property wi	th your landlord?	Yes	No	
If yes, please tell us what roc your landlord.	oms in the property you share with			
Do you pay your rent direct to	o your landlord?	Yes	No	
If no, who do you pay your re	nt to?			
Please give their name, addro	ess and phone number below.			

O1 Payment to you

We pay Housing Benefit by Bacs. This means we pay your Housing Benefit into your bank or building society account. This is a safer way of being paid and you do not have to wait for the payment to clear.

You must give us your bank or building society account details. We cannot pay into a post office account or a building society savings account.

What is the name of the bank or building society you want your Housing Benefit paid to?

What is the address and postcode?

Whose name is the account in?

What is the account number?

What is the sort code?

			1	
	-		-	

Please make sure your account number is correct and written clearly, or we may not be able to pay your benefit into your bank account.

O2 Payment to your landlord

If you rent your property from a housing association, or pay rent for a mobile home, we can pay your Housing Benefit to your landlord.

If you want your benefit to be paid direct to your housing association or mobile-home park, you and your landlord must sign this section.

I agree to accept direct payment of Housing Benefit for

Tenant's name

I agree to tell you as soon as the tenant moves out of the property, or if I believe that they are no longer entitled to the amount of Housing Benefit they receive. I will pay you any benefit I receive which the tenant is not entitled to.

If you pay me Housing Benefit after the date the tenant moved out, I will repay the money or allow it to be taken from any payments you make to me in the future, whether or not the tenant has any rent arrears.

I understand that you can ask me for rent statements, which show that payments of Housing Benefit have been paid to the tenant's rent account. I understand that I must keep records of rent accounts and that you cannot get involved in disputes between me and the tenant.

Signed (Landlord)	Date	/	/
(Lanuloru)	Dale		
Your name (in CAPITALS)			
Signed (Tenant)	Date	1	/
Your name (in CAPITALS)			

If you rent your property from a private landlord, we have to pay the benefit to you, not them. In certain circumstances where you find it hard to deal with your money, we may be able to pay your landlord.

Do you want us to pay your landlord?

Yes		No	
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If yes, we will send you a form to fill in. This will help us decide whether we can pay your landlord.

Section P

Sharing information with your landlord

Under the current Data Protection legislation we must have your permission before we can share information about you.

If you give us permission we can tell your landlord:

- whether or not you have claimed Housing Benefit;
- whether we have decided to pay you Housing Benefit; and
- that we need more information from you before we can decide whether to pay you Housing Benefit.

There may be other information about your claim that we need to check with your landlord (such as the date your tenancy started), before we can pay you Housing Benefit. We can ask your landlord for this information even if you have not given us permission.

We can also talk to your landlord about any Housing Benefit we have overpaid them. We will not discuss anything else with your landlord without your permission. We will not give your landlord any information about your personal circumstances.

If you do not give us permission to share information about your claim with your landlord, it will not affect your claim.

If you give us permission but then change your mind, phone us on 01702 318197 or 01702 318198 or email us at **revenues&benefits@rochford.gov.uk**

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

I give Rochford District Council permission to share information about my Housing Benefit claim with my landlord or their estate agent.

Signed	Date	/	1	

Section Q

Take-on-period for people over state pension age

We usually pay your Housing Benefit or Council Tax Support from the Monday after we get your claim form.

Q1 Take-on-period

If you are over State Pension Credit age and you are entitled to Housing Benefit, Council Tax Support or both, we can consider awarding benefit for a period of three months before you applied. This is known as 'take-on-period'.

Would you like to claim 'take-on-period'?

Yes		No	
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You will need to give us proof of your income, savings and rent for the three months before you claimed.

Section Q (continued)

Q2 Backdating

If you or your partner are both under State Pension Credit age or one of you is over State Pension Credit age, you can ask for your claim to be backdated for a maximum of one calendar month. You must show you have a good reason for not claiming before now.

Your claim can only be backdated for a maximum of one calendar month. Please tell us the date you would like to claim Housing Benefit from.

,		
	/	
'	1	

You will need to give us proof of your rent and your household's income and savings for the backdated period you have claimed for.

Please tell us below why you have not claimed before now. We may ask for more information later.

Section R

Further information

Please use this space to give us any other information. If you need more space, please use a separate sheet of paper.

Section S	Checklist
Please tick the relev original documents	ant box to tell us what proof you are sending with this form. We must see , not copies.
	de all the proof we need, we might not be able to pay you any ne same proof for you, your partner (if you have one) and for any other home.
within one month. W	he proof we need, send the form back to us now and send the proof to us We can start to work on your claim, but we will not be able to pay you any e all the proof we need.
Section A – About	you and your partner
	tity – we need to see one of the following documents for each adult you ase tick the box to show which documents you are sending with this form.
Birth certificate	
Marriage certific	cate
Civil partnership	o schedule
NHS medical ca	ard
Driving licence	
Passport	
	onal Insurance number – we need to see one of the following documents re claiming for. Please tick the box below to show which documents you s form.
National Insura	nce card
P45	
P60	
A benefit award	l letter
A private-pension	on slip
A pay slip	
are claiming for. Ple	I live – we need to see one of the following documents for each adult you ase tick the box to show which documents you are sending with this form. be for the address you are claiming for.
A utility bill from	a gas, electricity or water company
A phone bill (we	e cannot accept a mobile-phone bill)
A bank stateme	ent

We need to see **one** original document from **each** of the above three lists for every person. **One** to prove your identity, **one** to prove your National Insurance number and **one** to prove you are living at the property.

Section S (Continued)	Checklist
Section B – About depende	nt children who live with you
We need to see proof of (for example, a Child Ber	Child Benefit for each child nefit award letter).
Section C – About any othe	r people who live with you
 sending with this form. Five payslips, if they are Three payslips, if they are Two payslips, if they are Accounts for 12 months, Their latest full benefit av A letter from the student Proof of their savings and 	e paid every two weeks paid monthly if they are self-employed vard letter loans company, showing the amount of their student loan
Section D – About people y	
	the rent you are charging them every week or month. a or an up-to-date rent statement.
	Support, Pension Credit (Guarantee Credit), Employment bseeker's Allowance or Universal Credit
We need to see all the particular Please tick the box if you	ages of your latest benefit award letter. are sending this letter.
Section F – About students	
•	student loan, bursary or grant. show which documents you are sending.
Student loan	
Bursary	
Grant	

Checklist

Section G – About your work and your income

We need to see proof of what you and your partner earn. Please tick the relevant box to show which documents you are sending with this form.

-	-	-

Your last five payslips, if you are paid weekly

Your last three payslips, if you are paid every two weeks

Your last two payslips, if you are paid monthly

If you do not get payslips, please phone us on 01702 318197 or 01702 318198, or email us at **revenues&benefits@rochford.gov.uk** for a certificate of earnings. Your employer must fill it in and return it to us.

] Your latest accounts, if you are self-employed

If you are self-employed and you do not have accounts, please contact us for the form 'Housing Benefit and Council Tax Support for self-employed people'.

Sections H and I – About your pensions and your income

We need to see proof of your income. Please tick the relevant box to show which documents you are sending with this form.

All pages of your benefit award letter.

A bank statement which you have received in the last four weeks and which shows your pension or benefit being paid in.

- A private or company pension advice slip or letter, which shows the current pension amount that you get.
- A letter from your pension pot provider, showing how much you are drawing out or have available to draw out

All pages of your Child Tax Credit and Working Tax Credit award letters.

- A letter from the Child Support Agency which shows maintenance payments you get.
- A letter from the person who pays maintenance to you, or a court order notice to show that somebody pays maintenance to you.

Section J – About your money, savings and investments

Please tick the box to show which documents you are sending with this form.

- Bank statements, for at least the eight weeks before you made this claim
- Building society book

Post Office book

- Premium Bond Certificates
- National Savings Certificates
- ISA statements
- Shares certificates
- Unit-trust certificates

We need to see the advice slip that shows the amount of any interest or dividends you get on savings and investments.

Section S (Continued)

Checklist

Section K – About your other income

We need to see proof of any other income you receive. Please tick the box to show which documents you are sending with this form.

A certificate or a letter on headed paper from a charity, voluntary organisation or a family member which shows how much you receive.

A certificate that shows how much the annuity or home income plan pays you.

Proof of any other income. Please tell us below what proof of any other income you are sending with this form.

Section L – About other property

We need to see proof of any other property you own. Please tick the box to show which documents you are sending with this form.

We need proof of:

who owns t	he pro	perty and	d what	percentag	e of it	you own;

 \bot how much the property is worth (please provide a recent valuation from an estate agent);

how much you owe (the outstanding mortgage) on the property;

the current tenancy agreement (the original, not a copy);

the rent book or rent statement showing the rent you receive every month for the property; and

if appropriate, the property being up for sale.

Checklist

Section M – About payment you make

Please tick the box to show which documents you are sending with this form.

The registration certificate for the childminder.

A letter or invoice that shows the payments you make.

Proof of the government funding you receive.

Section N – About your home

Please tick the box to show which documents you are sending with this form.

If this is the first claim you have made since you moved address, we **must** see the following.

Your tenancy agreement (the original, not a copy) or proof of your last rent increase.

The notice of registration form (RO5) if you have a protected or regulated tenancy (that is, your rent has been agreed by the Valuation Office Agency), or a letter from your landlord or their agent, that shows:

- how much rent you pay;
- how often you pay your rent;
- when the tenancy started; and
- which services, if any, are included in your rent.

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.

If there is any other information you think we may need to be able to deal with your claim, please tell us in section R on page 27.

Section T

Declaration

Please read this declaration carefully

- This is my claim for Housing Benefit, Council Tax Support or both.
- 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 straightaway about any changes to my financial or family circumstances, or a change of address.
- 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.

		You			Your p	artner	
Your signature				Your signature			
Your full name (in CAPITALS)				Your full name (in CAPITALS)			
Date	1	/	,	Date	/	/	
Date	/	1		Date	/	/	

Section U

If you have filled in this form for someone else

You must fill this section in if you have filled in this	form for someone else.
Your name	
Your address	
Your signature	
Your phone number	
Your relationship to the person claiming Housing Benefit or Council Tax Support, or both. Examples include 'friend' and agent'.	
Date	/ /

Section V

If you want someone to act for you

If you want somebody to deal with your claim for you, you must fill in part 1 of section V. The person who will deal with your claim for you must fill in part 2 of section V.

Part 1 (you must fill in this part)

l want to act for me	(Write the name of the person who will act for you).				
Please tick the	relevant boxes to show what this person will do.				
	vive phone calls about my claim for Housing Benefit, Council Tax wort or both and my council tax account.				
	ive all post and emails about my Housing Benefit, Council Tax ort or both and my council tax account.				
You can discus	s my personal information with the person named above.				
Signed	Date / /				
Part 2 (the person who will act for you must fill in this part)					
I will act for					
	(write the name of the person who you will act for)				

and I must tell you about anything that may affect their claim for Housing Benefit, Council Tax Support or both.

Please explain below why you are acting for the person making the claim.

Section V (continued)

If you want someone to act for you

Your name		
Your address and postcode		
Phone number	Home	Mobile
Email address		

Signed		Date	/ /
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If you do not hold power of attorney for (that is, you are not legally entitled to act for) the person making the claim, we cannot accept your signature on this application form. The person making the claim must sign the form. If you need free and independent advice you can contact Citizens Advice.

Opening Times for Initial Assessments:

Rochford Office, Back Lane,Rochford SS4 1AYOpen Tuesday10.00am–2.00pmOpen Thursday10.00am–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