

A claim form for Housing Benefit and Council Tax Benefit

Newham London

Please post this form to:

Newham Benefits Service
PO Box 23504
London E15 4UU

or telephone 020 8430 2000 for an appointment to see a benefit officer about the form.

In the list below are the types of people who can use this form to claim Housing Benefit, Council Tax Benefit, and Second Adult Rebate.

Please tick the type that applies to you

- Tenant of a private landlord
- Housing association tenant
- Tenant of Newham Council
- Home owner

People who pay rent or Council Tax can also use this form to claim free school meals

Use black ink to fill in the form. Do not use pencil.

Make sure you answer *all* the questions that this form requires you to answer.

Answer **No** or **Yes** questions by putting a **tick** in the relevant box. Do not answer questions with a cross or by putting a line through questions you think do not apply to you.

Providing evidence

Whether posting it or bringing it to your interview, it is important to provide the evidence the form asks you for. If you are unable to provide any evidence, contact us as soon as possible on 020 8430 2000 to discuss what to do.

Part 1 About you and your partner

Do you have a partner who normally lives with you?

No

By partner we mean someone of either sex. This includes

Yes

If you have a partner, you must include their details. Partners can only make one claim between them.

- married partners
- civil partners
- people living together as if they were married or civil partners.

Surname or family name

Other names

Any other names you have used

Title (Mr, Mrs, Ms, other)

Address, including room number if you have one

Do not tell us your partner's address if it is the same as yours.

Postcode

Postcode

Office use only:

Date form requested:

/ /

Date form issued:

/ /

Issued by:

Part 1 About you and your partner - continued

You

Your partner

Date of birth

 / /
 / /

National Insurance number

You can find this on payslips or letters from social security or the tax office.

We cannot normally decide your claim if we do not have proof of your National insurance number and proof of your identity.

Letters Numbers Letter

If you are applying for a National Insurance number, please tick this box.

If you cannot provide a National Insurance number, please explain why in the box below.

Letters Numbers Letter

If your partner is applying for a National Insurance number, please tick this box.

If your partner cannot provide a National Insurance number, please explain why in the box below.

Important! We need proof of your National Insurance number and your partner's National Insurance number.

We also need to see 2 original documents confirming your identity and 2 original documents confirming your partner's identity.

Daytime phone number

E-mail address

Giving your e-mail address, if you have one, may help resolve any questions about your claim more quickly.

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

No
Yes Tell us about this below

No
Yes Tell us about this below

When did you claim?

 / /
 / /

Which council did you claim from?

If you claimed in Newham, tell us your benefit reference

What name did you claim in?

What address did you claim for?

 Postcode

 Postcode

When did you move out of this address?

 / /
 / /

Part 1 About you and your partner – continued

	You	Your partner
Have you told the council that paid your benefit that you have moved?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If you or your partner have moved home in the last 12 months, tell us your last address	<input type="text"/> <input type="text"/> <input type="text"/> Postcode	<input type="text"/> <input type="text"/> <input type="text"/> Postcode
Were you the home owner, a private tenant, a council tenant, or a boarder at this address?	<input type="text"/>	<input type="text"/>
Are you or your partner in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about this below	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about this below
When did you go in?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When will you come out? (if you know this)	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you or your partner get Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?
	Care: £ <input type="text"/>	Care: £ <input type="text"/>
	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>
Do you or your partner get Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does anyone get Carer's Allowance for looking after you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Part 1 About you and your partner – continued

	You	Your partner
Have you or your partner ever claimed Carer's Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Still tick 'Yes' if you were not paid any Carer's Allowance. This could have been because you were better off getting another social security benefit.		
Do you or your partner pay towards the upkeep of a student?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below
How much do you pay?	£ <input type="text"/>	£ <input type="text"/>
How often?	<input type="text" value="Every"/>	<input type="text" value="Every"/>
Do you or your partner have a vehicle from a Mobility scheme?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Please tick if you or your partner are:		
- an apprentice	<input type="checkbox"/>	<input type="checkbox"/>
- on youth training	<input type="checkbox"/>	<input type="checkbox"/>
- in legal custody	<input type="checkbox"/>	<input type="checkbox"/>
- severely mentally impaired	<input type="checkbox"/>	<input type="checkbox"/>
- registered blind	<input type="checkbox"/>	<input type="checkbox"/>
- long-term sick or disabled	<input type="checkbox"/>	<input type="checkbox"/>

We will contact you if we need any more information about this

Part 1 About you and your partner – continued

For how long have you lived in this country?

By “this country” we mean England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Islands, the Isle of Man or a combination of these countries.

Have you lived in another country at any time in the last 2 years?

No

Yes For how long were you living away from this country ?

What is your nationality?

Have you been awarded any of the following?

Please tick and give the date the award ends, if appropriate.

- Refugee status?
- Indefinite Leave to Enter or Remain?
- Exceptional Leave to Remain? Awarded until: / /
- Humanitarian Protection? Awarded until: / /
- Discretionary Leave to Remain? Awarded until: / /

If you have ticked any of these boxes we need to see evidence of the award. If you are a refugee, we need to see the letter granting you refugee status. If you have ticked any other box, we need to see:

- a passport containing the immigration stamp granting you leave; or
- a letter from the Home Office granting you leave.

Have you claimed asylum?

No Go on to Part 2 - About children

Yes On what date did you claim asylum?

 / /

Are you still waiting for a decision about your asylum claim?

No

Yes

Are you still waiting to hear the result of your appeal against an asylum decision?

No

Yes

Newham Council may approach the Home Office to check information you have given on this form and to obtain further relevant information.

Part 2 About children living with you

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

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

Are there any children living with you? No Go to **Part 3** on page 10

Yes How many children are there?

If there are more than 6 children, use a separate sheet of paper to tell us all the information we need about children.

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

We can use the details you give us on this form to work out whether your children could get **free school meals**.

Your child can get free school meals if they go to a state school and you get, Income Support, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance or the Guarantee Credit element of Pension Credit.

They can also get free school meals if you get Child Tax Credit, but only if it doesn't include an amount for childcare and your income is below a certain level.

If you want us to work out free school meals, please tick this box.

	First child	Second child	Third child
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other 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="/ /"/>
What is the child's sex?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's usual address if different from yours	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Important! We need to see evidence of the Child Benefit

Part 2 About children - continued

	First child	Second child	Third child
Is the child registered blind?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Important! We need to see evidence that the child is registered blind

	First child	Second child	Third child
Does the child get Disability Living Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?
	Care: £ <input type="text"/>	Care: £ <input type="text"/>	Care: £ <input type="text"/>
	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>

	First child	Second child	Third child
Do you pay a registered childminder, nursery, or after-school club any childminding costs for this child?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below

Tell us the name and registration number of the minder

<input type="text"/>	<input type="text"/>	<input type="text"/>
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How much do you pay a week?

£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
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	First child	Second child	Third child
Does the child go to school or college?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below

Name and address of school or college

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

If the child has ever changed school or college, please give the name and address of the previous school or college

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

Important! We need to see evidence of the childminding costs

Part 2 About children - continued

	Fourth child	Fifth child	Sixth child
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other 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="/ /"/>
What is the child's sex?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's usual address if different from yours	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Important! We need to see evidence of the Child Benefit

Is the child registered blind?	No	<input type="checkbox"/>	No	<input type="checkbox"/>	No	<input type="checkbox"/>
	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>

Important! We need to see evidence that the child is registered blind

Part 2 About children - continued

	Fourth child	Fifth child	Sixth child
Does the child get Disability Living Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?
	Care: £ <input type="text"/>	Care: £ <input type="text"/>	Care: £ <input type="text"/>
	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>
Do you pay a registered childminder, nursery, or after-school club any childminding costs for this child?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tell us the name and registration number of the minder	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do you pay a week?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Does the child go to school or college?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below	Yes <input type="checkbox"/> Tell us about this below
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name and address of school or college	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
If the child has ever changed school or college, please give the name and address of the previous school or college	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

Important! We need to see evidence of the childminding costs

Part 3 About other people who live with you

Do any adults usually live with you and your partner?

No Go to **Part 4** on page 13

Yes How many other people are there?

By adults we mean people over 16 who nobody gets Child Benefit for.

If there are more than 3, use a separate sheet of paper to tell us all the information we need about them

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

	First person	Second person	Third person
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other 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 or your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>

Some examples of the relationship are aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner, subtenant, lodger or friend

Do they get Income Support or Income-Based Jobseeker's Allowance?

No

Yes

No

Yes

No

Yes

Do they get Income-related Employment and Support Allowance?

No

Yes How much?

£ a week

No

Yes How much?

£ a week

No

Yes How much?

£ a week

Does it include either a support or work-related component?

No

Yes

No

Yes

No

Yes

When did they start getting it?

Do they get Pension Credit?

No

Yes

No

Yes

No

Yes

Do they get Disability Living Allowance or Attendance Allowance?

No

Yes How much?

£ a week

No

Yes How much?

£ a week

No

Yes How much?

£ a week

Are they registered blind?

No

Yes

No

Yes

No

Yes

Important! We need to see evidence that they are a student, for example a student certificate.

Part 3 Other people who live with you - continued

	First person	Second person	Third person
Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us which <input type="text"/>	Yes <input type="checkbox"/> Tell us which <input type="text"/>	Yes <input type="checkbox"/> Tell us which <input type="text"/>
Important! We need to see evidence that they are a student, for example a student certificate.			
Are they severely mentally impaired?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below £ <input type="text"/> a week	Yes <input type="checkbox"/> Tell us about this below £ <input type="text"/> a week	Yes <input type="checkbox"/> Tell us about this below £ <input type="text"/> a week
Does this include money for food?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does this include money for 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"/>
Are they in legal custody at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about this below When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> Tell us about this below When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> Tell us about this below When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/>
When will they come out (if you know this)?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do they normally work for 16 or more hours a week?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us their earnings before deductions £ <input type="text"/>	Yes <input type="checkbox"/> Tell us their earnings before deductions £ <input type="text"/>	Yes <input type="checkbox"/> Tell us their earnings before deductions £ <input type="text"/>

Important! We need to see evidence of their earnings

Part 3 About other people who live with you - continued

	First person	Second person	Third person
Do they have any other income at all?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Name of first other income	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	<input type="text"/> £ <input type="text"/> a week	<input type="text"/> £ <input type="text"/> a week	<input type="text"/> £ <input type="text"/> a week
Name of second other income	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	<input type="text"/> £ <input type="text"/> a week	<input type="text"/> £ <input type="text"/> a week	<input type="text"/> £ <input type="text"/> a week
Name of third other income	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	<input type="text"/> £ <input type="text"/> a week	<input type="text"/> £ <input type="text"/> a week	<input type="text"/> £ <input type="text"/> a week

Important! We need to see evidence of other incomes

Do they get any interest or dividends from savings or investments?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
How much was the last payment or credit?	<input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
How often are payments or credits made?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are any of these people partners? No Yes Tell us their names

Partners can be people of the opposite sex or the same sex.

This includes:

- married partners
- civil partners;
- people living together as if they were married or civil

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

Part 4 About rent

Do you pay rent for your home?

Tick 'Yes' even if you already get help from Housing Benefit.

No Go to **Part 9** on page 21

Yes Answer the questions below

When did you start renting your home?

 / /

When did you move to this address?

 / /

If you have not moved in yet, tell us when you expect to move in. Please remember to let us know when you have actually moved in.

Are you living away from home at the moment?

No

Yes Tell us about this below

Tell us why you are not living at home

When did you last live at home?

 / /

When do you expect to go back home?

 / /

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

 Postcode

Have you sublet your home?

No

Yes Who lives there now?

Do you pay rent to the council?

No Continue on the next page

Yes Go to **Part 9** on page 21

Part 4 About rent - continued

What sort of tenancy do you have?

For example an assured shorthold, assured, or protected tenancy

How long is the tenancy for?

 / / to / /

Please tick to show if the tenancy is let as:

- furnished
- partly furnished
- minimally furnished
- unfurnished

How much rent do you pay and how often? (For example, every week/ fortnight/ 4 weeks/ month)

£ every

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

No

Yes Tell us the details below

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

How much of the rent do they pay and how often? (For example, every week/ fortnight/ 4 weeks/ month)

£ every

Has your rent changed in the last 12 months?

No

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

When is the next increase due?

 / /

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

No

Yes Please send us the notice of registration (RO5)

Do you have any weeks when you do not have to pay rent?

No

Yes How many in a year?

Are you in rent arrears?

No

Yes By how many weeks?

Part 4 About rent - continued

Who receives the Council Tax bill for your home?

You or your partner

Your landlord

Someone else Tell us who receives the Council Tax bill

Does your rent include money for the following?

Tick the boxes to show what your rent includes and give the amount you pay each week.

	No	Yes	How much each week?	Which meals are included?
Meals	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="text"/>
Water charges	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Heating	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Hot water	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Fuel for cooking	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Laundry	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Cleaning rooms or windows	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Gardening	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	
Garage or parking space	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	

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

Yes

Personal care £

General counselling and support £

Do you pay any service charges separate from your rent?

No

Yes How much each week? £

For example, for cleaning or lighting in shared areas, an alarm system, meals, or lift maintenance.

What for?

Important! We must see evidence of your tenancy, your rent, and the service charges you have to pay before we can decide how much benefit you can get

Part 5 About where you live

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 or 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 or rooms	<input type="checkbox"/>	Residential nursing home	<input type="checkbox"/>
Bungalow	<input type="checkbox"/>	Hostel	<input type="checkbox"/>	Residential care home	<input type="checkbox"/>
Other - give details	<input type="checkbox"/>	<input type="text"/>			

Does your home have central heating?

No

Yes

Does your home have a garden?

No

Yes

Has your home been adapted for people with disabilities?

No

Yes

How many floors are there in the property?

Which floor(s) do you live on?

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

No

Yes Which part of the building do you live in?

At the front In the middle At the back

How many rooms are there in the property?

In the whole property?

Just for you and your household?

That you share with other people?

	In the whole property?	Just for you and your household?	That you share with other people?
Living rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedsitting rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms or shower rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 5 About where you live - continued

Do you use your home for business?

No

Yes

Have you ever owned the property you are renting?

No

Yes On what date did you sell the property?

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 this below

What is the address?

Postcode

Do you pay rent on this home?

No

Yes How much?

Part 7 Paying your landlord

This section only applies to tenants of registered social landlords, to tenants of charities or voluntary organisations who provide care, support or supervision, or to tenants of hostels.

We will normally pay your Housing Benefit to you unless you ask us to pay your landlord. In some circumstances we will be unable to pay your landlord simply because you request it and we may have to ask you for more information before deciding whom to pay.

Before we can pay your landlord we may need to ask for bank details if we do not already have them.

Do you want us to pay Housing Benefit to your landlord?

No Go on to Part 8 on page 20

Yes

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

Please pay my Housing Benefit straight to my landlord. I understand that:

- I must always tell you about any changes 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 will have to pay back the extra benefit; and
- I may be prosecuted if I do not tell you about any changes of circumstances

Signature

Date

 / /

Now ask your landlord to sign this agreement

Landlord's name

I agree to accept Housing Benefit payments for the tenant named in this form. I understand that by law:

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

Signature

Date

 / /

Landlord's phone number

Landlord's e-mail address

Part 8 Paying Housing Benefit to you

We will normally pay Housing Benefit into your bank account. To do this, we need your bank details. If you have any queries about bank accounts, please contact us on 020 8430 2000.

We will sometimes make the first payment to your landlord.

Unless you are the tenant of a registered social landlord or the tenant of a charitable or voluntary organisation we will usually be unable to pay Housing Benefit to your landlord even if you ask us to.

However, we can consider paying your landlord in certain circumstances. If you want to know more about when we can pay your landlord, please refer to the accompanying form "Paying your landlord".

About the account you want to use

What name or names is the account in?

Please write the name or names as they appear on the cheque book, passbook or statement.

If the account includes the name of someone other than you or your partner, please describe their relationship to you.

Full name of the bank or building society

Sort code - of the bank, building society or other account provider. Please tell us all six numbers, for example: 12-34-56.

 - -

Account number

This is 7 to 10 numbers long.

More information if it is a building society account

Building society roll or reference number

Some building society accounts use a roll or reference number. The number is on the passbook. The roll or reference can contain letters and numbers and can be up to 18 characters long. If you are not sure if the account has a roll or reference number, ask the building society.

Important! We must see original evidence of your bank details that includes your name on it before we can pay Housing Benefit to you.

Anything else you need to tell us

Please use this space to tell us anything else you think we should know about.

If you are giving us a completed "Paying your landlord" form, please tick this box.

Part 9 About Income Support, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance and Pension Credit

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

No Go to **Part 10** on page 22

Yes Answer the questions below

You

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

No

Yes When did you start getting it?

/ /

Your partner

No

Yes When did they start getting it?

/ /

Are you or your partner actually getting income-related Employment and Support Allowance at the moment?

No

Yes When did you start getting it?

/ /

No

Yes When did they start getting it?

/ /

Are you or your partner actually getting the Guarantee Credit element of Pension Credit at the moment?

No

Yes When did you start getting it?

/ /

No

Yes When did they start getting it?

/ /

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

No

Yes When did you claim?

/ /

No

Yes When did they claim?

/ /

Are you or your partner still waiting to hear about a claim for Pension Credit?

No

Yes When did you claim?

/ /

No

Yes When did they claim?

/ /

Important! We must see evidence of your benefits, allowances or pension before we can decide how much benefit you can get.

Part 10 About being self-employed

Are you or your partner self-employed?

No Go to **Part 11** on page 23

Yes Answer the questions below

You

Your partner

What kind of work do you do?

When did the business start?

 / /
 / /

What is the business address?

 Postcode

 Postcode

Are there any other partners in the business?

No

Yes Tell us their name and address

 Postcode

No

Yes Tell us their name and address

 Postcode

How many hours do you usually work each week?

Did you get a Business Start-up Allowance?

No

Yes How much?

£

How often?

Every

No

Yes How much?

£

How often?

Every

Do you pay into a private pension scheme?

No

Yes How much?

£

How often?

Every

No

Yes How much?

£

How often?

Every

Important! You must send us your trading accounts for the last financial year.

If you have only recently set up the business and do not have a full year's accounts, we will need to see some other evidence of your income. We will write to you about this.

Part 11 About working for an employer

Do you or your partner work for an employer?

- Tick **Yes** to this question if you work full-time or part-time, even if the work is on a temporary or casual basis, and even if the work is unpaid.
- Also tick **Yes** if you are off work temporarily because of something like sickness, maternity leave, or Jury Service.

No Go to **Part 12** on page 25

Yes Answer the questions below. If you work for more than one employer, tell us about all the employers on a separate sheet of paper and send it with this form.

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

Are you off work temporarily because of sickness or maternity leave?

No

Yes From what date?

/ /

No

Yes From what date?

/ /

What kind of work do you do?

What is your employer's name and address?

 Postcode

 Postcode

Your employer's phone number

When did you start this job?

/ /

/ /

What is your payroll, employee or staff number?

Is the job temporary?

No

Yes When will it finish?

/ /

No

Yes When will it finish?

/ /

How often do you get paid?

Every

Every

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

£

£

How are you paid?

For example, in cash, by cheque, or straight into a bank or building society account

When was your last pay rise?

/ /

/ /

When will your next pay rise be?

/ /

/ /

Part 11 About working for an employer - continued

	You	Your partner
How many hours a week do you usually work?	<input type="text"/>	<input type="text"/>
Give details of any regular overtime, bonuses or commission	<input type="text"/>	<input type="text"/>
Are you getting Statutory Sick Pay, Statutory Maternity Pay, Statutory Paternity Pay, or Adoption Pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you getting any other sick pay, maternity pay, or paternity pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?
	£ <input type="text"/>	£ <input type="text"/>
	How often?	How often?
	Every <input type="text"/>	Every <input type="text"/>

Important! We must see evidence of any earnings before we can decide how much benefit you can get. We normally need your last 5 wage slips, if you are paid every week, your last 2 wage slips if you are paid every month, or your last 4 pay slips if you are paid fortnightly.

Part 12 About any other work

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

Any other work includes voluntary work

No Go to **Part 13** on page 26

Yes Answer the questions on this page.

You

Your partner

What other work do you do?

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

Postcode

Postcode

Your employer's phone number

When did you start this work?

 / /
 / /

How many hours a week do you usually work?

Do you get paid?

No

No

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

Yes Tell us about this below

Yes Tell us about this below

How much do you get before any deductions?

£

£

How often?

Every

Every

Important! We must see evidence of any earnings before we can decide how much benefit you can get. We normally need your last 5 wage slips, if you are paid every week, your last 2 wage slips if you are paid every month, or your last 4 pay slips if you are paid fortnightly.

Part 13 About benefits and pensions

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

No Go to **Part 14** on page 28

Yes Tell us the full rate of the benefits before any deductions.

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

- Bereavement Allowance
- Carer's Allowance
- Child Benefit
- Child Tax Credit
- Contribution- based Jobseeker's Allowance
- Employment and Support Allowance
- Fostering Allowance
- Guardian's Allowance
- Incapacity Benefit
- Industrial Injuries Disablement Benefit
- Industrial Death Benefit
- Contribution- based Jobseeker's Allowance
- Maternity Allowance
- Pension Credit
- Retirement Pension
- Adoption Pay
- Severe Disablement Allowance
- Statutory Sick Pay
- Statutory Maternity Pay
- Statutory Paternity Pay
- War Disablement Benefit
- War Pension
- War Widow's Pension
- Widow's or Widower's Benefits
- Working Tax Credit

If you or your partner are getting a pension from a former employer or from a private pension scheme, please tell us about it in Part 14 on page 28

If there is not enough room on this form for all the benefits you and your partner are getting or have claimed, please use a separate sheet of paper to tell us about the others.

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

	You	Your partner
Do you or your partner get Contribution-based Employment and Support Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much and how often?	£ every	£ every
Does it include:		
- a support component?	<input type="checkbox"/>	<input type="checkbox"/>
- a work-related component? (Please tick)	<input type="checkbox"/>	<input type="checkbox"/>
Are you still waiting for a Work Capability Assessment?	No <input type="checkbox"/> Yes <input type="checkbox"/> You need to tell us when you receive a decision about your assessment	No <input type="checkbox"/> Yes <input type="checkbox"/> You need to tell us when you receive a decision about your assessment

Part 13 About benefits and pensions - continued

	You	Your partner
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear		<input type="checkbox"/>
Getting now	<input type="checkbox"/> Tell us the details below	<input type="checkbox"/> Tell us the details below
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
By what method?	<input type="text"/>	<input type="text"/>
(For example by benefit book or into a bank account).		
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> Tell us the details below	<input type="checkbox"/> Tell us the details below
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
By what method?	<input type="text"/>	<input type="text"/>
(For example by benefit book or into a bank account).		
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> Tell us the details below	<input type="checkbox"/> Tell us the details below
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
By what method?	<input type="text"/>	<input type="text"/>
(For example by benefit book or into a bank account).		
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> Tell us the details below	<input type="checkbox"/> Tell us the details below
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
By what method?	<input type="text"/>	<input type="text"/>
(For example by benefit book or into a bank account).		
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> Tell us the details below	<input type="checkbox"/> Tell us the details below
How much and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
By what method?	<input type="text"/>	<input type="text"/>
(For example by benefit book or into a bank account).		

Important! We need to see proof of benefits and pensions, such as current award notices or letters from social security.

Part 14 About students

Are you or your partner a student?

No Go to **Part 15** on page 30

Yes Answer the questions below. *If you or your partner are aged 60 or over, you do not need to answer these questions. If this applies to you, go on to Part 15 on page 30.*

You

Your partner

The name of the course

The type of course

The qualification the course leads to

When did the course begin?

Is this the final year of the course?

No

No

Yes

Yes

Is the course: full-time
 or part-time?

When does the academic year begin?

When does the academic year end?

The name and address of your college or university

Postcode

Postcode

Are you getting a training allowance from the Department of Education and Skills?

No

No

Yes

Yes

Are you eligible for a student loan?

Yes

Yes

No Please explain why

No Please explain why

Is any of your, or your partner's, income taken into account when working out your student loan?

No

No

Yes How much?

Yes How much?

£

£

Part 14 About students - continued

	You	Your partner
Do you or your partner receive a grant or bursary?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	Name and address of the authority granting the award	Name and address of the authority granting the award
	Postcode	Postcode
	Basic grant or bursary	Basic grant or bursary
	£	£
	How often?	How often?
	Every	Every
Are there any supplements to the basic grant?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	Type of supplement	Type of supplement
	Amount	Amount
	£	£
	How often?	How often?
	Every	Every
	Type of supplement	Type of supplement
	Amount	Amount
	£	£
	How often?	How often?
	Every	Every
Is any of your, or your partner's, income taken into account when working out your grant?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?
	£	£

Important! We need to see proof of your course, the dates, and of the loans or grants you receive.

Part 15 About other money coming in

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

No Go to **Part 16** on page 32

Yes Answer the questions below.

How many other types of other money do you and your partner have coming in?

If there are more than 3 other types of other money, use a separate sheet of paper to tell us about the rest.

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

Other money coming in includes:

- pensions from former employers or from private pension schemes;
- maintenance or child support for you, your partner or any of the children you have told us about on this form;
- money from a trust fund;
- training allowances;
- payments from Social Services
- any charitable or voluntary payments, including payments in kind; and
- any cash payments.

Also tell us about any money you get from people living in your house as boarders, lodgers, or subtenants.

You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust.

Other money 1

What is the money for?

Who gets it?

How much do they get?

 £

How often?

 every

When did they start getting this income?

 / /

Who provides this income?

When is the income likely to go up?

 / /

Important! We need to see proof of any money coming in before we can decide how much benefit you can get. Evidence includes things like pension slips from your former employer, a letter from the court showing how much maintenance you are getting or evidence of money people pay you for board and lodging.

Part 15 About other money coming in - continued

Other money 2

What is the money for?

Who gets it?

How much do they get?

How often?

When did they start getting this income?

Who provides this income?

When is the income likely to go up?

Other money 3

What is the money for?

Who gets it?

How much do they get?

How often?

When did they start getting this income?

Who provides this income?

When is the income likely to go up?

Does anyone owe money to you or your partner?

No

Yes

How much?

Are you expecting to get any money in the next 12 months?

No

Yes

What for?

For example, a redundancy payment or a payment instead of notice or a holiday.

How much?

Important! We need to see proof of any money coming in before we can decide how much benefit you can get. Evidence includes things like pension slips from your former employer, a letter from the court showing how much maintenance you are getting or evidence of money people pay you for board and lodging.

Part 16 About bank accounts, savings, investments and property

We need to know if you or your partner have any bank accounts, savings, investments, or property, in the United Kingdom or abroad.

This includes cash, current accounts and savings accounts with a bank or building society, Post Office accounts, premium bonds, National Savings Certificates, and stocks and shares. *Please tell us about all the accounts you have, even if they are empty or overdrawn.*

If you have more capital, investments or savings than there is room to include, tell us about the others on a separate sheet.

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

	You	Your partner
Do you have any bank accounts?	No <input type="checkbox"/>	No <input type="checkbox"/>
Tell us about all your bank accounts , even empty or overdrawn ones.	Yes <input type="checkbox"/> Tell us more about this below	Yes <input type="checkbox"/> Tell us more about this below
Name of bank	<input type="text"/>	<input type="text"/>
Account number	<input type="text"/>	<input type="text"/>
How much is in the account?	£ <input type="text"/>	£ <input type="text"/>
Name of bank	<input type="text"/>	<input type="text"/>
Account number	<input type="text"/>	<input type="text"/>
How much is in the account?	£ <input type="text"/>	£ <input type="text"/>
Do you have any building society accounts?	No <input type="checkbox"/>	No <input type="checkbox"/>
Tell us about all your building society accounts , even if you do not use them regularly.	Yes <input type="checkbox"/> Tell us more about this below	Yes <input type="checkbox"/> Tell us more about this below
Name of building society	<input type="text"/>	<input type="text"/>
Account number	<input type="text"/>	<input type="text"/>
How much is in the account?	£ <input type="text"/>	£ <input type="text"/>
Name of building society	<input type="text"/>	<input type="text"/>
Account number	<input type="text"/>	<input type="text"/>
How much is in the account?	£ <input type="text"/>	£ <input type="text"/>

Part 16 About bank accounts, savings, investments and property - continued

You

Your partner

Do you have any National Savings accounts?

No

No

Tell us about all your **National Savings accounts**, even if you do not use them regularly.

Yes Tell us more about this below

Yes Tell us more about this below

Type of account

Account number

How much is in the account?

£

£

Type of account

Account number

How much is in the account?

£

£

Do you have any premium bonds?

No

No

Yes Total value

Yes Total value

£

£

Do you or your partner have any National Savings Certificates?

No

No

Yes Tell us more about this below

Yes Tell us more about this below

Issue number

Value

£

£

How many?

Issue number

Value

£

£

How many?

Issue number

Value

£

£

How many?

Part 16 About bank accounts, savings, investments and property - continued

	You	Your partner
Do you or your partner have any stocks, shares, bonds or unit trusts?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us more about this below	Yes <input type="checkbox"/> Tell us more about this below
What are they called?	<input type="text"/>	<input type="text"/>
How many do you own?	<input type="text"/>	<input type="text"/>
Do you or your partner have any other capital, savings or investments?	No <input type="checkbox"/>	No <input type="checkbox"/>
For example, cash, TESSAs, ISAs, TOISAs, compensation, or any other money you have not told us about on this form.	Yes <input type="checkbox"/> Tell us about this	Yes <input type="checkbox"/> Tell us about this
	<input type="text"/>	<input type="text"/>
Do you or your partner own or partly own any property, land, or timeshare, other than the home you live in, either in the UK or abroad?	No <input type="checkbox"/>	No <input type="checkbox"/>
Tick 'Yes' even if you have a mortgage or loan for the property, land or timeshare.	Yes <input type="checkbox"/> What is the address?	Yes <input type="checkbox"/> What is the address?
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
How much is it worth?	£ <input type="text"/>	£ <input type="text"/>
Is the property jointly owned?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If you have a mortgage or loan for this, how much is left to repay?	£ <input type="text"/>	£ <input type="text"/>
	<i>We may need to ask more about your property</i>	
Have you received a Far Eastern Prisoner of War payment?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Have you ever received a lump sum payment after deferring your entitlement to the State Pension?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> What was the value of the payment <i>before</i> deductions for tax?	Yes <input type="checkbox"/> What was the value of the payment <i>before</i> deductions for tax?
	£ <input type="text"/>	£ <input type="text"/>

Important! We need to see proof of your capital, savings and investments. Proof includes bank, building society or National Savings books, full bank statements, certificates for Premium Bonds, National Savings, ISAs, stocks, shares, and unit trusts.

Part 17 About backdating

We usually pay Housing Benefit and Council Tax Benefit from the Monday following the day we receive your claim. Sometimes we can pay benefit from an earlier date if you have a good reason for not claiming sooner. If you want us to consider paying your benefit from an earlier date, tell us when you want benefit from and why you did not claim sooner.

Date you want to claim benefit from

 / /

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

No

Yes

Please tell us below why you did not claim before now.

Part 18 If you or your partner are aged 60 or over

If both you and your partner are aged less than 60, go on to Part 19.

If you or your partner are aged over 60, we can award you Housing Benefit or Council Tax Benefit for up to 3 months before the date you claim. To help us decide whether we can do this, please answer the question below.

Have your circumstances changed in the last 3 months?

No Please go on to Part 19 on page 36

This includes changes in the circumstances of anyone living with you

Yes Please give details in the box below of anything that has changed. We might need to contact you to check these details.

Part 19 Checklist

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

We must see **original** documents, not copies, but please do not send valuable items through the post.

If you do not provide all the evidence we need, we might not be able to pay you any benefit. We need evidence for your partner, if you have one, and for any other adults living in your home.

If you need more advice about providing documents, please call us on **020-8430-2000**.

Evidence of identity

Such as a birth certificate, marriage certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit, EEC identity card or recent gas or electricity bill.

Evidence of National Insurance number

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

Evidence of capital, savings, and investments

Such as all your bank, building society or National Savings books, full bank statements, or certificates for premium bonds, National Savings Certificates, ISAs, stocks, shares and unit trusts. The evidence you give us must show details for at least the last 2 months.

Evidence of earnings

This means your last 5 payslips if you are paid every week, or your last 2 payslips if you are paid every month. We will need confirmation of earnings from your employer if you do not have these payslips. If you or your partner are self-employed, we need to see your accounts for the last financial year or, if you have been trading for less than 6 months, a summary of your trading records so far.

Evidence of your bank or building society details that includes your name

We need this before we can pay Housing Benefit to you if you are the tenant of a private landlord. Evidence would include letters from the bank or building society.

Evidence of other income

Such as pension slips from a former employer, a letter from the court showing how much maintenance you are getting, or a letter about your student grant or loan.

Evidence of benefits, allowances, or pensions

Such as current award notices or letters from social security confirming how much you get. If you do not have evidence, let us know straight away. Do not send order books through the post.

Evidence of private rent, tenancy, and service charges

Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord.

Evidence of other money paid out

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

Evidence about other people who live with you

Such as payslips, benefit letters, student certificates, building society letters about interest or dividends from savings or investments.

Make sure you read and sign the declaration on page 37.

Part 20 Declaration

Even if someone else has filled in this form for you, you must sign this declaration. If you have a partner, it would be helpful if they sign below to confirm all the details about them are correct. But they do not have to sign.

Please read this declaration before you sign and date it.

- I understand that if I give information that is incorrect or incomplete, you may take action against me. This may include recommending that I be prosecuted.
- I understand that you will use the information I have provided to process my claim for Housing Benefit, Council Tax Benefit or free school meals. You may check some of the information with other sources as allowed by law.
- You may use any information I have given in connection with this and any other claim for social security benefits that I have made or may make. You may give some information to other organisations, such as government departments or local authorities, if the law allows this.
- I know I must let the Council know *in writing* about any change in my circumstances which might affect my claim.
- I authorise Newham Council to make any enquiries that are necessary to confirm the information I have given to support my claim.
- I declare the information I have given on this form is correct and complete.

Signature of person claiming

Date

 / /

Partner's signature

Date

 / /

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

Please tell us why you are filling in this form.

As far as possible, I have confirmed with the person claiming that the answers I have written on this form are correct

Name of the person who filled in this form

Signature of the person

Relationship to the person claiming

Date

 / /

Data Protection Information

How the Council collects and processes your personal information

The Data Controller is the London Borough of Newham and we are responsible for the collection and processing of your personal information. Processing includes the organisation, retrieval, consultation, use and deletion or destruction of information and its disclosure to other agencies. The information you provide will be processed mainly in connection with the administration of Housing Benefit Council Tax Benefit or free school meals.

Your personal information may however, be processed by other Council services in respect of any of the Council's activities including (but not limited to) benefits, to verify data accuracy, housing, environmental health and care services. There may be a need to share with external partners and organisations e.g. health and other local authorities or information may be used in the detection of fraud and crime. A full list of what information we control and process and for what purposes is set out in the Council's data protection notifications filed annually with the Information Commissioner.

All information collected will be processed and held securely under the principles of the Data Protection Act 1998. For further information on data protection, the Council's use of information sharing, please contact the Information Governance Team on 020 8430 3737 or information.governance@newham.gov.uk.

Monitoring

Newham Council is committed to a policy of Equal Opportunities. To promote and monitor this policy, it is necessary to collect certain key information such as ethnic origin, gender and disability. We will use this information only to promote and monitor the Council's Equal Opportunities Policy and for statistical purposes. We may share this information with other Council departments for the same purpose only.

This information will be held and processed in accordance with the Data Protection Act 1998. The Data Controller is the London Borough of Newham.

You do not have to tell us about your ethnic origin, or whether you are disabled, if you would prefer not to. It will not affect your entitlement to Housing Benefit or Council Tax Benefit

What is your ethnic group?

Choose ONE section from A to E, then tick ONE appropriate box to indicate your cultural background. Please also write in more detail on your background below.

A. White

- British
- Traveller of Irish heritage
- Other Irish
- Kosovan
- Other Eastern European
- Gypsy or Roma
- Turkish or Turkish Cypriot
- Other White background
(please write in)

B. Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background
(please write in)

C. Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Sri Lankan Tamil
- Vietnamese
- Any other Asian background
(please write in)

D. Black or Black British

- Caribbean
- Somali
- Nigerian
- Other Black African
- Any other Black background
(please write in)

E. Chinese or other ethnic group

- Chinese
- Any other
(please write in)

F. Other ethnic backgrounds

- Afghan
- Filipino
- Kurdish
- Iranian
- Iraqi
- Other middle-eastern background
- South or central American
- Any other ethnic group
(please write in)

Your preferred spoken language

If English is not your first language, please give your preferred spoken language in the space below.

Your country of origin

Please give your country of origin in the space below

Disability

Please tick the description that you think describes you best.

I am registered disabled

I consider myself disabled

I am not disabled

Sharing information with your landlord

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

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

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

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

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

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

We will not give your landlord any information about:

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

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

I give Newham Benefits Service permission to share information connected with the progress of my Housing Benefit claim with my landlord or their representative

Signature

Date

 / /

You can withdraw your permission at any time.

If you wish to receive the receipt below, please print your name and address in the “Please return receipt to:” box.



Claim form receipt

Officer's name:

Please return receipt to:

Dear

We received your Housing Benefit/ Council Tax Benefit claim form on:

 / /

Please keep this note in case you need to refer to it.

You must tell us straight away of any changes in your circumstances. These are changes like:

- if you change your address, even temporarily
- if your income goes up or down
- if the value of your investments goes up or down
- if you stop getting Income Support or Jobseeker's Allowance
- if you or your partner starts full-time, part-time, or temporary work
- if you or your partner change your job
- if anyone joins or leaves your household
- if you or your partner go into hospital



If you have any questions about your claim

You can get help by dialling **020-8430-2000** (phone calls are recorded for training and quality purposes).