



Claim for Housing Benefit and Council Tax Reduction Scheme

Name

Address

	Postcode

OFFICIAL USE ONLY

Claim Ref

Date Issued

Reason

Date of Receipt

Private and Confidential

If you need more help or advice, please phone the Benefits Section on 020 7332 3937
If you cannot get to our office we can come to you to help fill in your form

About your claim for HOUSING BENEFIT AND COUNCIL TAX REDUCTION SCHEME

Please answer **ALL** questions carefully. If you do not fully complete the form it will be returned to you and your claim will be delayed.

- Do not send valuable items such as benefit order books, bank books or passports in the post. If you bring them to us they will be copied and given straight back to you.
- When you see this box **PROOF** we need written proof. Only original documents can be accepted to support your claim. We will copy these documents and return them to you within 5 days.
- When you have filled out the form complete the checklist at section 15. If you cannot send all the **PROOF** we need at the moment, tell us, send the form back now and the **PROOF** later. **DO NOT DELAY SENDING YOUR FORM AS YOU MAY LOSE BENEFIT.**
- Send your form and **PROOF** to: Benefits Section, Department of Community and Children's Services, Barbican Estate Office, 3 Lauderdale Place, London, EC2Y 8EN.

- If you need help in filling out this form, or want more information about Housing Benefit and Council Tax Reduction Scheme, please telephone the Benefits Section on 020 7332 3937, 9.15am to 4.45pm, Monday to Friday, or email benefits@cityoflondon.gov.uk. If you would prefer, you can come and see us personally at our customer reception, Benefits Section, Barbican Estate Office, 3 Lauderdale Place, London EC2Y 8EN 9.15am to 5pm, Monday to Friday. If you cannot get to our office we can come to you to help fill in your form.

PLEASE NOTE

- If you pay rent to the Corporation of London but live outside the City of London in the London Boroughs of Hackney, Islington, Lambeth, Lewisham, Southwark and Tower Hamlets your claim for Council Tax Reduction Scheme must be made to the council in whose area you live.

How we collect and use information

We will use the information we collect from this form and your **PROOF** to check and process your Housing Benefit and Council Tax Reduction Scheme application and to administer those Benefits/Reductions. We may also use it to decide whether to make Discretionary Housing Payments. We may pass this information to the Department for Work and Pensions, other councils, the Inland Revenue, the Valuation Office Agency, the Supporting People Team or other organisations as the law allows.

The City of London is under a duty to protect the public funds it administers, and to this end may use the information you have provided for the prevention and detection of fraud. We may also check any information provided by you, or about you with other information we hold. We may also share the information we hold with other bodies responsible for auditing or administering public funds for these purposes. We may also get information from other organisations, including government

departments, banks, credit reference agencies and local authorities, or give information to them. This is to check the accuracy of information, to prevent and detect crime, or to protect public funds in other ways as the law allows.

We may also use your information to contact you regarding other public services which we reasonably believe will be of assistance or interest to you. If you do not want to be contacted about these services please let us know by using the contact details above.

We are the Data Controller for the purposes of the Data Protection Act 1998. If you want to know more about what information we have about you, or the way we use your information, you can ask at the **address above**.

Do you have a partner who normally lives with you? By *partner* we mean someone of the same or opposite sex you are married to or live with **as if you were married**. Even if your partner only comes home at weekends, or part of the week, you must include them.

No
 Yes

If you have a partner, you must answer all the questions about them, as well as yourself.

You

Your partner

First names

Surname

Any other names you have used

Title (Mr, Mrs, Ms, other)

Address

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

Postcode

Postcode

Date of birth

 / /
 / /

National Insurance (NI) 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 your NI number. We need to see **PROOF** of 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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Letters	Numbers								Letter		

If you do not have a National Insurance number, or cannot find it, tick this box.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Letters	Numbers								Letter		

If your partner does not have a National Insurance number, or cannot find it, tick this box.

When did you move to this address

 / /
 / /

Your daytime telephone number

PROOF When you make a claim for Housing Benefit and Council Tax Reduction Scheme you need to prove your identity and your partners identity. You must provide two original documents for each of you to support this, one of which must include a National Insurance Number. These documents could be 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.

Are you (please tick one box)

a council tenant?

a private tenant?

a owner/occupier?

a housing association or social landlord tenant?

You

Your partner

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

No

Yes Please tell us about it below

No

Yes Please tell us about it below

When did you last claim?

Which council did you claim from?

What name did you use for the claim?

What address did you claim for?

Postcode

Postcode

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

No

Yes

No

Yes

If you or your partner have moved home in the last 12 months, tell us your last address.

Postcode

Postcode

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

Have you or your partner come to live in England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Islands or the Isle of Man in the last two years?

You

No
 Yes We will write to you about this.

What is your nationality?

If your nationality is not British, on what date did you last enter and apply to stay in the UK?

 / /

The UK is England, Northern Ireland, Scotland and Wales.

Are you or your partner in hospital at the moment?

No
 Yes Please tell us about it below.

When did you go in?

 / /

When will you come out, if you know this?

 / /

Do you or your partner get Disability Living Allowance/Personal Independence Payment?

No
 Yes How much?
 Care £ We need to see
 Mobility £ **PROOF** of this.

Do you or your partner get Attendance Allowance?

No
 Yes We need to see **PROOF** of this.

Does anyone get Carer's Allowance for looking after you or your partner?

No
 Yes We need to see **PROOF** of this.

Have you or your partner been told that you are entitled to Carer's Allowance even if you do not receive it, because you are getting another benefit instead?

No
 Yes We need to see **PROOF** of this.

Do you need an extra bedroom for an overnight carer?

No
 Yes We need to see **PROOF** of this.

Your partner

No
 Yes We will write to you about this.

 / /

No
 Yes Please tell us about it below.

 / /
 / /

No
 Yes How much?
 Care £ We need to see
 Mobility £ **PROOF** of this.

No
 Yes We need to see **PROOF** of this.

No
 Yes We need to see **PROOF** of this.

No
 Yes We need to see **PROOF** of this.

No
 Yes We need to see **PROOF** of this.

You

Your partner

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

No

Yes

No

Yes

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

No

Yes How much do you pay and how often?

£ every

No

Yes How much do they pay and how often?

£ every

Are you or your partner a student?

By student we mean anyone who is attending a course of study at an educational establishment including student nurses.

No

Yes Tell us if this is full or part time.

Full time Parttime

No

Yes Tell us if this is full or part time.

Full time Parttime

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

£ a year

We need to see the details of your course and **PROOF** of any money you get.

£ a year

We need to see the details of your partner's course and **PROOF** of any money they get.

Please tick if you or your partner are:

- an apprentice
- on youth training
- in legal custody
- severely mentally impaired
- registered blind
- long term sick or disabled

-
-
-
-
-
-

We will contact you if we need any more information.

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 A-level, SCE Higher level or GNVQ (advanced).

Are there any children in your household as described above?

No

Go to **Part 3**

Yes

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

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

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

We need to see **PROOF** of this

	First child	Second child	Third child	Fourth child
Is the child registered blind?	No Yes We need to see PROOF of this	No Yes We need to see PROOF of this	No Yes We need to see PROOF of this	No Yes We need to see PROOF of thi ^s
Does the child get Disability Living Allowance/Personal Independence Payment?	No Yes	No Yes	No Yes	No Yes
Care	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Mobility	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
	We need to see PROOF of this	We need to see PROOF of this	We need to see PROOF of this	We need to see PROOF of this
Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.
Tell us the name and registration number of the minder.	<input type="text"/>	<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"/>	£ <input type="text"/>
	We need to see PROOF of this	We need to see PROOF of this	We need to see PROOF of this	We need to see PROOF of this

Now tell us about all the people who usually live with you and your partner.
Do not tell us about people who just share a hall, bathroom or toilet with you.
If you want to tell us about more than three people, use a separate sheet of paper.

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

Do any adults usually live with you and your partner?

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

No Go to **Part 4**.
Yes Answer the questions in this section.

Last name

Other names

Date of birth

Their relationship to you or your partner.

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

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

Do they get Disability Living Allowance or Attendance Allowance/Personal Independence Payment?

Are they registered blind?

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

First person

Second person

Third person

No
Yes

No
Yes

No
Yes

No
Yes How much?

No
Yes How much?

No
Yes How much?

£ a week

£ a week

£ a week

No

Yes

No

Yes

We need to see **PROOF** of these

No

Yes

No

Yes

We need to see **PROOF** of these

No

Yes

No

Yes

We need to see **PROOF** of these

	First person	Second person	Third person
Do they pay rent or money for board and lodging to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
How much?	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
Does this include money for food?	No <input type="checkbox"/> Yes <input type="checkbox"/>	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 severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <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"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
When did they go in?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When are they due to come out (if you know)?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions.
	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
	We need to see PROOF of their earnings.	We need to see PROOF of their earnings.	We need to see PROOF of their earnings.

Do they have any other income at all?

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

First person

No
 Yes Tell us about it below.

Second person

No
 Yes Tell us about it below.

Third person

No
 Yes Tell us about it below.

1 Where does this income come from?

How much is it before deductions?

£

£

£

2 Where does this income come from?

How much is it before deductions?

£

£

£

3 Where does this income come from?

How much is it before deductions?

£

£

£

We need to see **PROOF** of their income.

We need to see **PROOF** of their income.

We need to see **PROOF** of their income.

Are any of the people who normally live with you married to each other or living together as if they were married? We call these people partners.

No
 Yes Tell us their names below.

is the partner of

is the partner of

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

You

No
 Yes When did you start getting it?
 _____ / _____ / _____

Your partner

No
 Yes When did they start getting it?
 _____ / _____ / _____

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

No
 Yes When did you claim?
 _____ / _____ / _____

No
 Yes When did they claim?
 _____ / _____ / _____

Which benefit are you getting or waiting to hear about?

- Income Support
- Income-based Jobseeker's Allowance
- Pension Credit
- Employment and Support Allowance

We need to see **PROOF** of your benefits.

Which benefit is your partner getting or waiting to hear about?

- Income Support
- Income-based Jobseeker's Allowance
- Pension Credit
- Employment and Support Allowance

We need to see **PROOF** of their benefits.

Have you applied for or are currently receiving Universal Credit?

No
 Yes

No
 Yes

Are you or your partner self-employed?

No Go to **Part 6**.

Yes Answer the questions on this page.

You

Your partner

What kind of work do you do?

When did the business start?

 / /
 / /

What is the business address?

Postcode

Postcode

Do you have any business partners?

No

Yes Tell us their name and address.

Postcode

No

Yes Tell us their name and address.

Postcode

How many hours a week do you usually work?

Do you get a Business Start-up Allowance or New Enterprise Allowance?

No

Yes How much and how often?

£ every

No

Yes How much and how often?

£ every

Do you pay into a private pension scheme?

No

Yes How much and how often?

No

Yes How much and how often?

We need to see **PROOF** of your self-employment income.

We need to see **PROOF** of your partner's self-employment income.

Please 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.

Do you or your partner work for an employer?

No Go to **Part 7**.

Yes Answer the questions in this section.

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

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

You

Your partner

What kind of work do you do?

What is your employer's name and address?

Postcode

Postcode

When did you start this job?

 / /
 / /

What is your payroll, employee or staff number?

Are you employed for a limited period?

No

Yes When will you finish?

 / /

No

Yes When will they 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?

 / /
 / /

You

Your partner

How many hours a week do you usually work?

Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment?

No
Yes .

No
Yes .

Are you getting any other sick pay or maternity pay from your employer at the moment?

No
Yes .

No
Yes .

Do you pay into a private or company pension scheme?

No
Yes How much and how often?

No
Yes How much and how often?

£ every

£ every

We need to see **PROOF** of your earnings.

We need to see **PROOF** of their earnings.

Please send in your last five pay slips if you are paid weekly, your last three payslips if you are paid fortnightly or your last two payslips if you are paid monthly. If you do not have payslips please ask your employer to complete the tear-off 'Certificate of Earnings' at the end of this form.

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

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

No Go to **Part 8**.

Yes Answer the questions on this page.

What other work do you do?

You

Your partner

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

Postcode

Postcode

When did you start this work?

 / /
 / /

How many hours a week do you usually work?

Do you get paid?

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

No

Yes Tell us about it below.

No

Yes Tell us about it below.

How much do you get before any deductions?

£

£

How often are you paid?

every

every

We need to see **PROOF** of this.

We need to see **PROOF** of this.

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

No Go to **Part 9**.

Yes Answer the questions on this page.

Read the list below and tick the boxes next to the benefits and pensions you or your partner are getting now or have claimed.

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Child Benefit | <input type="checkbox"/> Incapacity Benefit | <input type="checkbox"/> Statutory Maternity Pay | <input type="checkbox"/> Retirement Pension |
| <input type="checkbox"/> Child Tax Credit | <input type="checkbox"/> Industrial Injuries Disablement Benefit | <input type="checkbox"/> Statutory Paternity Pay | <input type="checkbox"/> War Disablement Benefit |
| <input type="checkbox"/> Fostering Allowance | <input type="checkbox"/> Industrial Death Benefit | <input type="checkbox"/> Adoption Pay | <input type="checkbox"/> War Pension or War Widow's Pension |
| <input type="checkbox"/> Contribution-based Jobseeker's Allowance | <input type="checkbox"/> Carer's Allowance | <input type="checkbox"/> Bereavement Allowance | <input type="checkbox"/> Widow's or Widower's Benefit |
| <input type="checkbox"/> Maternity Allowance | <input type="checkbox"/> Severe Disablement Allowance | <input type="checkbox"/> Guardian's Allowance | <input type="checkbox"/> Widowed Parents Allowance |
| <input type="checkbox"/> Working Tax Credit | <input type="checkbox"/> Statutory Sick Pay | <input type="checkbox"/> Pension Credit (including Savings Credit) | <input type="checkbox"/> Employment & Support Allowance |

For each benefit and pension you have ticked tell us more about them in the boxes below. If you are getting or have claimed any benefit that is not listed, tell us about it on a separate sheet of paper and send it with this form. **If you are sending a separate sheet of paper, tick this box.**

	You	Your partner
The name of the benefit or pension	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method? £ <input style="width: 150px;" type="text"/> every <input style="width: 50px;" type="text"/> by <input style="width: 100px;" type="text"/>	<input type="checkbox"/> How much, how often and by what method? £ <input style="width: 150px;" type="text"/> every <input style="width: 50px;" type="text"/> by <input style="width: 100px;" type="text"/>
The name of the benefit or pension	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method? £ <input style="width: 150px;" type="text"/> every <input style="width: 50px;" type="text"/> by <input style="width: 100px;" type="text"/>	<input type="checkbox"/> How much, how often and by what method? £ <input style="width: 150px;" type="text"/> every <input style="width: 50px;" type="text"/> by <input style="width: 100px;" type="text"/>
The name of the benefit or pension	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method? £ <input style="width: 150px;" type="text"/> every <input style="width: 50px;" type="text"/> by <input style="width: 100px;" type="text"/>	<input type="checkbox"/> How much, how often and by what method? £ <input style="width: 150px;" type="text"/> every <input style="width: 50px;" type="text"/> by <input style="width: 100px;" type="text"/>

We need to see **PROOF** of each benefit or pension.

We need to see **PROOF** of each benefit or pension.

Do you or your partner, or any children you are claiming for, 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 10**.
 Yes Answer the questions in this section.

This includes occupational pensions, work pensions and private pensions, 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, a student grant or loan, 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.

What is the money for?

Who gets it?

How much do they get?

How often?

How is this paid?

When did they start getting this income?

When is the income likely to go up?

Other money 1

Other money 2

Other money 3

£

£

£

every

every

every

/ /

/ /

/ /

/ /

/ /

/ /

We need to see **PROOF** of this.

We need to see **PROOF** of this.

We need to see **PROOF** of this.

Other money 1

Does anyone owe money to you, your partner, or any children you are claiming for?

No
Yes Tell us about it below.

What for?

How much?

£

We need to see **PROOF** of this.

Who is it owed to?

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

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

No
Yes Tell us about it below.

What for?

How much?

£

We need to see **PROOF** of this.

Other money 2

No
Yes Tell us about it below.

£

We need to see **PROOF** of this.

No
Yes Tell us about it below.

£

We need to see **PROOF** of this.

Other money 3

No
Yes Tell us about it below.

£

We need to see **PROOF** of this.

No
Yes Tell us about it below.

£

We need to see **PROOF** of this.

Do you own your home or have a mortgage?

No Answer the next question.

Yes Go to **Part 12**.

Are you a Corporation Tenant?

No Answer the questions in this section.

Yes Go to **Part 11**.

What sort of building do you live in?

Tick one box only

Detached house

Flat in a house

Caravan, mobile home or houseboat

Semi-detached house

Flat in a block

Board and lodgings

Terraced house

Flat over a shop

Hotel

Maisonette

Bedsit or rooms or a studio flat

Residential nursing home

Detached bungalow

Hostel

Residential care home

Semi-detached bungalow

Other – give details

If you rent a room do you have a room number?

No

Yes If yes, give us the room number

As you come in the front door is your room on the (tick one box):

Left-hand side of the property?

Right-hand side of the property?

Middle of the property?

As you come in the front door is your room at the (tick one box):

Front of the property?

Back of the property?

Side of the property?

Does your home have:

Central heating? No

Yes

A garden? No

Yes

A parking space? No

Yes

How many floors are there in the property?

s

What floor or floors is your home or room on?

Basement
Third

Ground
Other

First
All floors

Second

How many rooms are there in the building?

In the whole building

Just for you and your household

That you share with other people

Lounge and dining rooms

Bedsitting rooms

Bedrooms

Bathrooms or shower rooms

Toilets

Kitchens

Other rooms – give details
e.g. study, conservatory, utility room

Do you use your home for business?

No

Yes

Do you have a main home somewhere else?

If your main home is somewhere else in the UK or abroad, tick **Yes**, even if you do not pay rent for it.

No

Yes Tell us about it below.

What is the address?

Postcode

Do you pay rent on this home?

No

Yes How much. £

Do you pay rent for your home?

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

No Go to **Part 12**.

Yes Answer the next question.

Do you pay rent to the Corporation?

No Answer the questions in this section.

Yes Go to **Part 12**.

What is your landlord's full name and business address?

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

Postcode

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

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

Postcode

Are you, your partner, or any of your or your partner's children related to your landlord or agent, or to your landlord's partner or the agent's partner?

Related includes related through marriage, even if the marriage has ended. Some examples are ex-wife, ex-husband, aunt, brother, daughter, father, grandson, grandmother, son-in-law or stepdaughter.

No

Yes What is the relationship.

is my landlord's or agent's

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, then tell us when you have actually moved in.

____ / ____ / ____

What sort of tenancy do you have?

For example, shorthold, assured tied rent or something like this.

How long is the tenancy for?

/ / to / /

What is the property let as?

Tick the box that applies.

Furnished

Partly furnished

Hardly any furniture

Unfurnished

How much rent do you pay and how often?

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

£ every

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

No

Yes Tell us the details below.

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

How much of the rent do they pay and how often? For example, every week, every fortnight, every four weeks, monthly.

£ every

Has your rent changed in the last 12 months?

No

Yes We need to see **PROOF** of the date it changed and how much it changed.

When is the next rent increase due?

/ /

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

No

Yes Please send us the notice of registration form **RO5**.

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

No

Yes How many in a year?

Are you behind with your rent?

No

Yes By how many weeks?

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

Tick the box that applies.

- You or your partner
- Your landlord
- Someone else Tell us who it is.

What is the Council Tax reference number?

Does your rent include money for the following?

Meals

No

Yes How much? £ every

For which meals? Please tick.
Breakfast
Lunch
Evening meal

Water Rates

No

Yes How much? £ every

Heating

No

Yes How much? £ every

Lighting

No

Yes How much? £ every

Hot water

No

Yes How much? £ every

Fuel for cooking

No

Yes How much? £ every

Laundry

No

Yes How much? £ every

Cleaning rooms or windows

No

Yes How much? £ every

Gardening

No

Yes How much? £ every

Garage or parking space

No

Yes How much? £ every

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

Personal care and support

No

Yes How much? £ every

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

No

Yes How much? £ every

What for?

Are you living away from home at the moment?

No

Yes Tell us about it below.

Why are you not living at home?

When did you last live at home?

 / /

When do you expect to go back home?

 / /

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

Postcode

Have you sublet your home?

No

Yes Who lives there now?

We need to see **PROOF** of your rent and tenancy.

Please send in your tenancy agreement, rent receipts or a letter from your landlord.

We need to know if you, your partner or any children you are claiming for have any bank accounts, savings, investments or property in the UK or abroad. This includes cash, current accounts and savings accounts with a bank or building society, post office accounts, premium bonds, National Savings Certificates, and stocks and shares.

Do you, or your partner have:

		Name of bank	Account name	Account number	Amount
Any bank accounts?	No <input type="checkbox"/>				£
	Yes <input type="checkbox"/>				£
					£

		Name of building society	Account name	Account number	Amount
Any building society accounts?	No <input type="checkbox"/>				£
	Yes <input type="checkbox"/>				£

		Type of account	Account name	Account number	Amount
Any Post Office accounts?	No <input type="checkbox"/>				£
	Yes <input type="checkbox"/>				£

Premium Bonds?	No <input type="checkbox"/>	Value
	Yes <input type="checkbox"/>	£

		Company name	How many?
Stocks, shares, bonds, or unit trusts?	No <input type="checkbox"/>		
	Yes <input type="checkbox"/>		

Other savings and investments? For example TESSA's, ISA's, money held in trust.	No <input type="checkbox"/>	Please give details
	Yes <input type="checkbox"/>	

We need to see **PROOF** of all savings and investments.

Please send in your bank, building society or post office books, full bank statements or certificates for Premium Bonds, National Savings Certificates, ISA's, stocks, shares and unit trusts. We need to see evidence of any interest or dividends you get on investments and savings. The evidence must show details for at least three months.

Do you, your partner or any children you are claiming for have any National Savings Certificates?

No
 Yes We need to see **PROOF** of this.

Do any of your savings and investments include:

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

No
 Yes We will write to you about it.

Do you, your partner, or any children you are claiming for own or partly own any property, land or timeshare, other than the home you live in, either in the UK or abroad? Tick **Yes** even if you have a mortgage or loan for the property, land or timeshare.

No
 Yes What is the address?

Postcode

How much is it worth

If you have a mortgage or loan for this, how much is left to repay?

Have you or your partner received:

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

We need to know this to make sure we do not count it as part of your savings.

No
 Yes What payment did you receive? Who received the payment?

A Far Eastern Prisoner of War Compensation payment You Your partner

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

Have you, your partner or any children you are claiming for received a payment from the vCJD (Creutzfeldt-Jakob Disease) Trust?

No
 Yes We will write to you about it.

- If you are a Corporation tenant, we will pay any Housing Benefit you are awarded into your rent account.
- If you are a private tenant and are awarded Housing Benefit we can arrange to pay your money:
 - by cheque,
 - direct to your landlord, or
 - straight into a bank, building society, GIRO account or National Savings Bank account
- if you are awarded Council Tax Reduction Scheme we will pay this into your Council Tax account.

Private Tenants

If you are a private tenant you must tick **Yes** to one of these questions.

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

- No Answer the next question.
Yes Tell us your account details on page 27.

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

- No We will pay your money by cheque.
Yes If you tick **Yes**, you must sign the declaration below and ask your landlord to sign the Landlord's Declaration at the back of the form. If you want to give us permission to share information with your landlord please sign the declaration on page 28.

Your declaration

Please pay my Housing Benefit straight to my landlord.

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

Signature

Full name
(in CAPITAL LETTERS)

Date

Sharing information with your landlord

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

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

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

We will only share information with your landlord if you have agreed that your Housing Benefit can be paid direct to your landlord.

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

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

We will not give your landlord any information about:

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

You can withdraw your permission at any time.

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

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

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

Signature

Full name
(in CAPITAL LETTERS)

Date

Address

Postcode

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

Use a separate sheet of paper and attach it to this form if you need to.

A large, empty rectangular box with a thin black border, intended for the user to provide additional information or attach a separate sheet of paper as instructed in the text above.

Please tick to say what **PROOF** you are sending with this form.

We must see **original documents**, not copies.

■ **Evidence of identity**

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

■ **Evidence of your address**

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

■ **Evidence of National Insurance number**

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

■ **Evidence of capital, savings and investments**

Such as all your bank, building society or Post Office books, full bank statements, or certificates for Premium Bonds, National

Savings Certificates, ISAs, stocks, shares and unit trusts. We need to see evidence of any interest or dividends you get on investments and savings. We need to see this evidence for children in your household as well. The evidence you send must show details for at least the last three months.

■ **Evidence of earnings**

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

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

■ **Evidence of other income**

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

Such as pension slips from a former

employer or a letter from the court showing how much maintenance you are getting. We need to see evidence of any money people pay you for board and lodgings.

■ **Evidence of benefits, allowances or pensions. We also need this for any other adults living in your home.**

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. Please do not send order books through the post.

■ **Evidence of private rent and tenancy**

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.

Make sure you read and sign the declaration on page 31.

We can usually award benefit/reductions from the Monday after the day we receive your claim. Sometimes we can pay benefit from an earlier date if you have a good reason for not claiming earlier. If you want us to consider paying your benefit/reduction from an earlier date, tell us when you want benefit/reduction from and why you did not claim

Date you want to claim from

For this earlier period, were your circumstances the same as on this form? No
Yes

Tell us why you have not claimed before.

Part **17** Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, getting them to sign this form should allow us to process your claim more quickly, but they do not have to sign.

Please read this declaration carefully before you sign and date it.

- **I declare** that the information I have given on this form is correct and complete.
- **I understand** that if I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- **I agree** that you will use the information I have provided to process my claim for Housing Benefit or Council Tax Reduction Scheme, or both and in the administration of those Benefits/Reductions. You may check some of the information with other sources as allowed by the law.

- **I understand** that you may use any information I have provided 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, local authorities and private-sector companies such as banks and organisations that may lend me money, if the law allows this.
- **I know** that I must let you know in writing about any change in my circumstances which might affect my claim.

Signature of person claiming

Date

Partner's signature

Date

If this form has been filled in by someone other than the person claiming please tell us why you are filling in this form for the person claiming.

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

Name of the person who filled in the form

Signature

Relationship to the person claiming

Date

Send this form together with the **PROOF** you have collected to: –
City of London Benefits Section
Barbican Estate Office
3 Lauderdale Place
London
EC2Y 8EN

Landlord's Declaration

tear-off 1

Please ask your Landlord to fill in and sign this declaration.

Name and address of tenant

Postcode

Name and address of landlord

Postcode

When did the tenancy start?

/ /

How much rent do you charge (each week)?

£

Does the rent include:

Water Rates? No
Yes

Hot water? No
Yes

Cleaning rooms or windows? No
Yes

Personal care and support No
Yes

Heating? No
Yes

Fuel for cooking? No
Yes

Gardening? No
Yes

Lighting? No
Yes

Laundry? No
Yes

Garage or parking space? No
Yes

Does the rent include meals?

Breakfast? No
Yes

Lunch? No
Yes

Evening meal? Yes

Landlord's declaration

I agree to accept Housing Benefit payments for the tenant named above:

I understand that by law:

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

Signature

Name

Job title

Date

/ /

Send to: City of London Benefits Section, Barbican Estate Office, 3 Lauderdale Place, London EC2Y 8EN

Certificate of Earnings

tear-off 2

Fill in your name here

Now hand this form to the person living with you who has no proof of earnings or use this form to get proof of your own earnings. You don't have to use this form if you are sending pay slips as proof of your income.

Employer's name

Job

Employer's address

Postcode

Payroll number

National Insurance number

Please fill in this form as soon as possible to help with your employee's claim for benefit.

Please give the following details of your employee, for the last 5 weeks (if they are paid weekly) or 2 months (if they are paid monthly)

First pay date

 / /

Gross

Tax

National Insurance

Pension Contribution

Other e.g.
Overtime/Bonuses

Week or month ended

Week or month ended

Week or month ended

Week or month ended

Week or month ended

Date of last pay rise

 / /

Date of next pay rise

 / /

How often is the employee paid?

Weekly

Every 4 weeks

Every calendar month

Other (please state what)

I declare that the information I have given on this form is true and complete to the best of my knowledge.

I understand that if I give information that is incorrect or incomplete I may be prosecuted.

Signature

Date

 / /

Firm's official stamp

Job Title

Send to: City of London Benefits Section, Barbican Estate Office, 3 Lauderdale Place, London EC2Y 8EN