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## Child details

Give details of one of the children you claimed Child Benefit for.

<b>Surname or family name</b> <input type="text"/>	<b>First name(s)</b> <input type="text"/> <b>Date of birth</b> <i>DD MM YYYY</i> <input type="text"/> <input type="text"/>
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## About your tax adviser

Please fill in the details of the business or person you want to authorise to act on your behalf.

<b>Business name or full name</b> <input type="text"/> <b>Address</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode	<b>Daytime phone number (including dialling code)</b> <input type="text"/> <b>Email address</b> <input type="text"/> <b>Client reference</b> <i>if applicable</i> <input type="text"/>
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## What to do now

- Save a copy of this form on your computer for your records. If you have to make any changes then you will need to submit another form
- print a copy
- sign and date the Declaration section, then
- send this form to:

Child Benefit Office  
PO Box 1  
NEWCASTLE UPON TYNE  
NE88 1AA

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## Declaration

- I confirm I am the person who has been claiming and is entitled to receive Child Benefit.
- I authorise the tax adviser named on this form to act on my behalf for the High Income Child Benefit charge and for Child Benefit Office to disclose information to them about these matters.
- I declare that the information I have given on this form is correct and complete.

**Signature**

**Date** *DD MM YYYY*

   

**Name**