

**Council Tax Benefit and Housing Benefit - Change of Address form
Private Tenants (not Housing Association)**

Claim number (if known)	<input type="text"/>
Your name:	<input type="text"/>
Your old address:	<input type="text"/>
Date you moved out:	<input type="text"/>
Your new address:	<input type="text"/>
Date of tenancy:	<input type="text"/>
Date you moved in:	<input type="text"/>
Your telephone number:	<input type="text"/>
Amount of Rent:	<input type="text"/> £ <input type="text"/> Weekly / Monthly <input type="text"/>

Please provide your original tenancy agreement, as photocopies cannot be accepted

Who else lives in your home? Please list them below:

Name	Date of Birth	Relationship to you	Details of income (supported with documentary evidence)

Have you or your partner had any changes in your income or household circumstances since your last application for Housing and Council Tax Benefit. Yes ☐ No ☐

If yes, please give details of the change/s and the date of the change/s.
(Please include any relevant original documentary evidence.)

Details of change:	Date of change	Please tick
		<div>I have included the documentary evidence <input type="checkbox"/></div> <div>I will get the documentary evidence and send it to you <input type="checkbox"/></div>
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- Please tell us about your new home by circling the accommodation that best describes it:

Detached House Semi Detached House Terraced House Maisonette
 Bungalow Flat in house Flat in block Flat over shops
 Bedsit or rooms Hostel Hotel Other (please specify)

- Is your home? Furnished / Partly Furnished / Unfurnished
- How many floors in your building?
- What floor do you live on? Basement / Ground / First / Second / Third / All floors
- If you live in a room / rooms please state where in the building that you live is it:
at the front / in the middle / at the back
- Does your rent include any charges for Water / Council Tax / Heating / Lighting / Other?
- Does your home have central heating? Yes ☐ No ☐
- Please tell us how many rooms there are:

	Total number of rooms in your flat / house	How many rooms are only for you / your family	How many rooms do you share
Living or dining rooms			
Bedrooms			
Bedsitting rooms			
Kitchen			
Bathroom			
Toilet			
Other(please specify)			

Please provide the following, (you must provide originals as photocopies cannot be accepted)

- Your tenancy agreement or a letter from your new Landlord stating the amount of rent you are charged, whether it is weekly, monthly etc and what services are included in the rent:
- Please state the name and full address of your new Landlord:

Is your landlord, landlady or agent related to you, your partner or children? Yes ☐ No ☐

If yes, please state who is related and how

Does the landlord, landlady or agent live in the property Yes ☐ No ☐

If you are charged rent by a private landlord, Housing Benefit will be paid to you unless you are considered by us to have difficulty in managing your financial affairs.

Payments will be paid direct into your bank or building society account.

Benefits in receiving your payments this way are:

- It is safe and secure;
- It is convenient - you decide when and how much you want to withdraw;
- Using an account may help you to save;
- You could have regular bills paid from some accounts (this could save you money but you will need to make sure that there is enough money in your account to pay the bills - if not, you may be charged a fee); and
- You can get your money from many different places.

The account can be:

- In your name;
- In your name and your partner's name;
- In the name of the person formally acting on your behalf; i.e. an appointee. Please complete the details below for the account into which you would like your Housing Benefit paid.

Please complete the details below for the account into which you would like your Housing Benefit paid.

Name of bank or building society

Branch address

Account name

Account number

Sort code

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Please provide a paying in slip to confirm details

If you have not got a current account and have previously been unable to open one, please ask for our leaflet which will give details on opening a bank account

If you think that receiving direct payments will cause you serious problems, then please complete the section below and provide the evidence required.

Reason direct payment is a problem

I have learning disabilities that make it difficult to manage my finances

I have a medical condition or mental health problem which makes it difficult to manage my finances

I have serious difficulties with reading and writing

I do not speak English

I am dealing with addiction to drugs, alcohol or gambling

I have recently been released from prison

I have severe debt problems

I am an undischarged bankrupt

I am unable to open a bank account

Evidence required

☐

Written evidence from social worker, support worker GP etc

☐

Written evidence from social worker, support worker GP etc

☐

Written evidence from support organisation

☐

Written evidence from support organisation

☐

Written evidence from support organisation GP, social worker, hospital, care worker etc

☐

Written evidence from Prison or Probation Service

☐

Court Orders, CCJs, evidence from help Groups, solicitors, creditors, debt advisers

☐

Copy of Court Order

☐

Letters from banks or money advisers

If none of the problems above apply and direct payment will cause problems then please fill in below, or if you need more space please continue overleaf.

If you are requesting to have your benefits paid straight to your landlord, you must sign this declaration

Signature

Date

/ /

Sometimes, sharing information with your landlord helps us to deal with your claim quickly and reduces the risk of you falling behind with your rent because of your claim being delayed. We would only share information with your landlord if you are a council tenant or Hillingdon Homes tenant or where Housing Benefit is being paid straight to your landlord. But in either case, under the Data Protection Act we need your permission to share information. If you give us permission, we would be able to tell your landlord:

- whether or not you had claimed Housing Benefit and, if so, whether or not we have made a decision on your claim; and
- If we need further information to make a decision on your claim and, if so, what information this is.

There may be other information about your claim that we need to check with your landlord such as the date your tenancy started before we can make a decision on your claim. If this is the case, we have to ask your landlord even if you have not given us permission to discuss your claim with them. But unless you have given us permission by signing this form, we will not discuss anything else with your landlord.

We will not give your landlord any information about:

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

If you do not give us permission to discuss your claim with your landlord, it will not affect your claim. If you give us permission but then change your mind, we will follow your wishes. Just contact us and let us know. If you want to give us permission to discuss your claim with your landlord, please sign below.

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

Signature

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Declaration:

I understand the following:

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit, or both. You may check some of the information with other sources, as allowed by law.
- 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 they allow this.

I know I must let the Council know about any change in my circumstances that might affect my claim.

I declare the information I have given on this form is correct and complete.

Claimant signature:		Date:	
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Partner signature:		Date:	
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Please supply all the required information within 1 month of the date of your move to avoid losing any benefit entitlement.