



CHELTENHAM
BOROUGH COUNCIL

Benefit Service

Cheltenham Borough Council, P.O. Box 10,
Municipal Offices, Promenade, Cheltenham, GL50 1PW
Helpline : 01242 264341 **E-mail**: benefits@cheltenham.gov.uk

Name:
Address:
Postcode:

Office use only
Claim number
Property ref
Person ref
Date of issue

Housing Benefit and Council Tax Support new claim form

You should fill in this form if this is your first claim for benefit in Cheltenham or you have not been claiming for over a month. If this is not the case please contact 01242 264341 for a different form.

About this form

We have designed the form to make it as easy as possible to fill in. It may look rather long but we need to ask enough questions to make sure that everyone who claims gets the right amount of benefit.

You may not have to fill in all of the parts of the form (for example, a number of questions will not apply to most pensioners) but you must fill in any part that is relevant to you. Most parts start with a question to help you decide if you need to fill in that part.

Filling in the form

Please use black ink to fill in the form. Do not use pencil. If you make a mistake, just cross it out and put the right answer next to it. Do not use correction fluid or tape.

Please answer all the questions in BLOCK CAPITALS and tick the 'Yes' and 'No' boxes when asked. If any questions do not apply to you, please write 'Nil' or 'None'.

We will need to see original proof of the things you tell us on the form, but valuable items such as passports and driving licences should not be posted back to us, but brought into the council offices between 10:00am and 4:00pm (Monday to Friday) where they can be checked and photocopied. If all of the documents are not available please send in the form immediately and supply the documents when you can.

If you have difficulty reading this form and would like a larger version or a home visit please contact 01242 264341	Office use and date stamp
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Part 1

Which of the following are you?

- A private tenant a housing association tenant a boarder
- Homeless Cheltenham Borough Homes tenant hostel dweller
- Owner Other (please specify)

Part 2

About you and your partner

By partner, we mean a person who you are married to or have a civil partnership with, or a person you live with as if you were their husband, wife or civil partner (a civil partnership is a formal arrangement that gives same sex partners the same legal status as a married couple).

	You	Your partner
National Insurance Number		
Title (Mr, Mrs, Miss and so on)		
First names		
Surname		
Any other names you have been known by		
Date of birth		
Phone number		
Mobile number		
E-mail address		
What address are you claiming for on this form ?		
What date did you move in or will you be moving into this address?		
If you have moved within the last 12 months please confirm your previous address		
What date did you move out of your previous address?		
What date did your tenancy end at your previous address?		

About you and your partner continued

	You	Your partner
What was your status at your previous address, i.e. private tenant, council tenant, owner or living with family / friends?		
If you or your partner claimed benefit at this address, which council did you claim from?		
Are you registered blind?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have an invalid vehicle or a car under the Motability Scheme?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is anyone getting Carer's Allowance for looking after you or your partner?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do either you or your partner get Carer's Allowance for looking after someone else?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, who is it for?		
Are you or your partner currently in hospital?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what date did you go in ?		
Are you or your partner unable to work due to illness?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give the date you last worked and the date you expect to return to work		
Are you or your partner currently in prison or a detention centre?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please say from what date and the date that you are due to be released		
Are you or your partner living away from home at the moment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, when did you last live at home and when do you expect to go back home?		

If you change your telephone number please contact us as soon as possible

About you and your partner continued

	You	Your partner
Tell us why you are not living at home at the moment		
Have you or your partner come to live in the United Kingdom in the last 5 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what is your nationality?		
What date did you come to live in the United Kingdom?		
Has the Home Office given you permission to enter or stay in the United Kingdom?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give details		

Part 3

People in your home

In this part, we ask for details about anyone who lives with you and your partner.

Is anyone who lives in your home one of the following:

A full-time student or student nurse	Yes <input type="checkbox"/> No <input type="checkbox"/>
Permanently in hospital or a nursing home	Yes <input type="checkbox"/> No <input type="checkbox"/>
In prison, on remand or in a bail hostel	Yes <input type="checkbox"/> No <input type="checkbox"/>
An apprentice	Yes <input type="checkbox"/> No <input type="checkbox"/>
A care worker	Yes <input type="checkbox"/> No <input type="checkbox"/>
On youth training	Yes <input type="checkbox"/> No <input type="checkbox"/>
Long-term sick or disabled	Yes <input type="checkbox"/> No <input type="checkbox"/>
Registered blind	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has a severe learning disability, mental illness or form of dementia	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give their names and an explanation	

Part 4**Children who live with you**

Do you or your partner have children living with you who you get child benefit for?		No <input type="checkbox"/> If No please go to part 5 of the form	
		Yes <input type="checkbox"/> If Yes please fill in the section below	
Full name of child	Date of birth	Relationship to you	Relationship to your partner
Are any of your children registered blind?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please confirm which child(ren)			
Do any of your children get Disability Living Allowance or personal independence payments?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please confirm which child(ren)			
Do you pay childcare for any of your children?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please give the names of the child(ren)			
Please give the childcare providers name, address and Ofsted registration number			
How much do you pay each week for each child?			
If your childcare costs change during the school holidays what are you charged then?			
Do you have any children about to leave school?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please give their name(s) and the date they are due to leave school			
We will need to see proof of your child care payments			

Part 5

Other people who live with you

Other people who live in your home who are not dependent on you, such as grown up children who have left school, parents, friends, relatives, lodgers and boarders are called non-dependants.

Do you or your partner have anyone living in your property who you do not get child benefit for?	No <input type="checkbox"/> If no please go to part 6 Yes <input type="checkbox"/> If yes please answer the questions in this section
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If you have more than three adults living with you, please use the space on part 18

	First person	Second person	Third person
First names			
Surname			
Relationship to you			
Date of birth			
Do they get Income Support, Universal Credit or Jobseeker's Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they get Incapacity Benefit or Employment & Support Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they get Disability Living Allowance, Personal Independence Payments or Attendance Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they get Pension Credit?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

You do not need to provide documentary evidence of your non-dependant's state benefits above if they give us permission to check with the Department for Work and Pensions. In order to do this they will have to sign below and provide their national insurance number.

If they do not give permission then we will need to see proof of every state benefit they are getting above or we may have to charge you the maximum deduction for a person living in your property.

National Insurance Number			
Non-dependant's signature			

Other people who live with you continued

	First person	Second person	Third person
Are they a full time student?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they pay you rent?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they work over 16 hours a week?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give their gross weekly wage before any deductions and provide proof	£	£	£
Please give your non-dependant's gross weekly income from the following sources			
State pension	£	£	£
Private pension	£	£	£
Child benefit	£	£	£
Tax credits	£	£	£
Other state benefits	£	£	£
Other income	£	£	£
Interest from savings	£	£	£
We will need to see proof of any income listed on this page. If you do not provide proof we may have to charge you the maximum deduction for a person living in your property.			

Part 6 Income Support, Jobseeker's Allowance, Universal Credit, Pension Credit and Employment Support Allowance

<p>Do you or your partner claim Income Support, Jobseekers Allowance, Universal Credit, Pension Credit or Employment & Support Allowance?</p>	<p>No <input type="checkbox"/> If no please go to part 7</p> <p>Yes <input type="checkbox"/> If yes please answer the questions on the next page</p>
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If you are getting Income Support, Jobseeker's Allowance, Universal Credit, Pension Credit or Employment & Support Allowance then we do not need to see proof of this income as we will be able to check with the Department for Work and Pensions

Income Support, Jobseeker's Allowance, Universal Credit, Pension Credit and Employment Support Allowance continued

	You	Your partner
Are you or your partner getting Income Support, Jobseeker's Allowance, Universal Credit, Pension Credit or Employment & Support Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, when did it start?		
Are you waiting to hear about a claim for one of these benefits?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, when did you make a claim?		
If your partner has recently moved in, or you have changed address, have you told the Jobcentre or Dept for Work and Pensions?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, when did they tell them?		

Part 7

Student Income

Are you or your partner a student?	No <input type="checkbox"/> If no please go to part 8 Yes <input type="checkbox"/> If yes please answer the questions below	
	You	Your partner
Is your course full time?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you get a student grant?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you get a student loan?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
What is the start date of your course?		
What is the end date of your course?		
What is the name of your course?		
Where are you studying?		
How many hours a week is your course?		

Part 8

Earnings from employment

Are you or your partner currently in paid work?	No <input type="checkbox"/> If no please go to part 9
	Yes <input type="checkbox"/> If yes please answer the questions on earnings

Please send either your last five weeks' wage slips or your last two months' payslips. If you would like us to contact your employer(s) to get the information then, please tick this box

If you or your partner has just started work then please provide your contract of employment.

	You	Your partner
What is your main employer's name, address and telephone number?		
	Tel:	Tel:
What date did you start work?		
How many hours do you normally work each week?		
How often are you paid?		
How do you get paid?		
What is your average wage after tax and national insurance deductions?		
When is your next pay rise?		
Do you pay into a private or company pension?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your job permanent?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you employed as a part-time fireman or as a member of the Territorial Army or reserve forces?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you getting Statutory Sick Pay?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, how much?		
When did it start?		
Are you getting Statutory Maternity Pay or Statutory Paternity Pay?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, how much / when did it start?		
Do you or your partner have more than one job?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If yes, please use the space in part 18 to tell us about your other job(s)

Part 9

Earnings from self-employment

<p>Are you or your partner self employed?</p>	<p>No <input type="checkbox"/> If no please go to part 10</p> <p>Yes <input type="checkbox"/> If yes please answer the questions below</p>	
	You	Your partner
<p>What date did you become self-employed or a director of a company?</p>		
<p>What type of business do you run?</p>		
<p>Are you a director of the company?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>How many hours do you usually work each week?</p>		
<p>Do you use your home for business?</p>		
<p>Do you have any business partners?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>If yes, tell us their name(s)</p>		
<p>Do you pay into a private pension scheme?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Do you pay a self-employed National Insurance stamp?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Do you get a business start-up allowance?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>If yes, how much do you get weekly?</p>		
<p>Do you have more than one self employed business?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>If yes – What date did you become self-employed or a director of a company in your second business</p>		
<p>What does your second business do?</p>		
<p>Are you a director in your second business?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>We will need to see your latest accounts if you have been trading for over a year. If you have recently become self-employed we will need a written statement from you estimating your business income and expenditure for the first three months that you have been trading.</p>		

Part 10

Pension income

Do you or your partner have any pensions?	No <input type="checkbox"/> If no please go to part 11 Yes <input type="checkbox"/> If yes please answer the questions below
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	You How much? How often?	Your partner How much? How often?
State Pension		
Widow's Pension or Allowance		
Industrial Disablement Pension		
War Widow's Pension		
War Disablement Pension		
Company Pension		
Second Company Pension		
Private Pension		
Second Private Pension		
We will need to see proof of any income you have listed above		

Part 11

Other Income

Do you or your partner have any other money coming in?	No <input type="checkbox"/> If no please go to part 12 Yes <input type="checkbox"/> If yes please answer the questions below
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	You How much? How often?	Your partner How much? How often?
Child Tax Credit		
Working Tax Credit		
Maternity Allowance		
Incapacity Benefit		
Carer's Allowance		
Attendance Allowance		
Disability Living Allowance		
Severe Disablement Allowance		
If you receive one of the above state benefits you do not need to provide proof		

Other Income continued

	You		Your partner	
	How much?	How often?	How much?	How often?
Child Benefit				
Widowed Parent's or Mother's Allowance				
Maintenance payments from an ex-partner				
Who is it for?				
Child Support payments				
Fostering Allowance				
Guardian's Allowance				
Adoption Allowance				
Training Allowance				
Bereavement Allowance				
Industrial Injuries Benefit				
Industrial Death Benefit				
Voluntary Payments				
Charity Payments				
Money from Trust Funds				
Rent from letting a room				
Rent from another property				
Home income plans				
Annuities				
Any other income you receive or have applied for				
Please tell us what this is				

We will need to see proof of any income you have listed above

Part 12 Bank and building society accounts, cash and investments

Please tell us about any money and savings you or your partner has in this country or abroad. Remember to include any empty or overdrawn accounts. If you have not had your interest or transactions added to your accounts, please get them updated before supplying them. If you need additional space to tell us of extra accounts please use part 18 on this form

	You	Your partner
How many accounts do you and your partner have?		
Cash savings (at home)	£	£
Bank account - One	£	£
Bank name and account number		
Bank account – Two	£	£
Bank name and account number		
Building society account – One	£	£
Building society account – Two	£	£
Post office account – One	£	£
Post office account – Two	£	£
Overseas capital	£	£
Premium Bonds	£	£
Income Bonds	£	£
ISA's	£	£
Stocks and shares – please list the companies and units held.		
National Savings Certificates – please give the issue number and the number of units held.		
Any other savings	£	£
We will need to see your last full month's bank statements, building society and post office books, share certificates and so on to prove your savings and investments.		

Part 13

Land and Property

Do you or your partner have a share in other land or property in this country or abroad?	No <input type="checkbox"/> If no please go to part 14
	Yes <input type="checkbox"/> If yes please answer the questions below

	You	Your partner
If yes, please give its market value less the mortgage		
Please give the address of the property		
Does an elderly or disabled relative live in the property?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you are separated, do your ex-partner and your children live in the other property?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you recently sold any other property or land?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
We will need to see original documents to prove that you or your partner own any other land or property.		

Part 14

Rent details

Do you pay rent for your home?	No <input type="checkbox"/> If no please go to part 17
	Yes <input type="checkbox"/> If yes please go to the next question
Do you pay rent to Cheltenham Borough Homes ?	Yes <input type="checkbox"/> If yes please go to part 17
	No <input type="checkbox"/> If No please answer the questions about your rent

	Landlord	Agent
Please give the full name, address and telephone number of your landlord and agent (if applicable)		
	Tel:	Tel:
What was the start date of your tenancy?		

Rent details continued

Did you or your partner previously own this property?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, what date did you sell it and why?	
What is the full rent you must pay?	£
How often do you pay your rent (every week, four weeks, monthly)?	
Are you behind with your rent?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, How much? £	How many weeks?
Does anyone other than your partner share the rent with you?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please give their names	
<p>We will need to see your original tenancy agreement or rent book to confirm the rent you are being charged. If you would like us to contact your landlord or housing association direct for the rent proof please tick here <input type="checkbox"/>.</p>	

If you are renting from a Housing Association please tick this box and go to Part 15.

Additional rent details if you rent from a private landlord

Are you, your partner or any of your children related to the landlord or agent or to your landlord's or agent's partner? Related includes any relationship even if the relationship has ended	Yes <input type="checkbox"/> No <input type="checkbox"/>						
If yes what is the relationship? (for example ex-wife, ex-husband, aunt, brother, daughter, grandson, grandmother, son-in-law or stepdaughter)							
Do you live in this property as part of your job?	Yes <input type="checkbox"/> No <input type="checkbox"/>						
If you are under the age of 22, have you had a care order, or been in the care of social services?	Yes <input type="checkbox"/> No <input type="checkbox"/>						
Does the rent include any amounts for services? Please tick yes or no to each question. If you tick a yes box, give the amount included in the rent for that service if known.							
Service	Yes	No	Amount	Service	Yes	No	Amount
Heating				Support & care			
Hot Water				Alarm system			
Lighting				Warden/Caretaker			
Cooking				Personal care			
Water rates				Other – Please give details			
Laundry				Other – please give details			

Additional rent details if you rent from a private landlord

Are any meals included in your rent? If yes, please tick which meals below.						Yes <input type="checkbox"/> No <input type="checkbox"/>	
Breakfast		Lunch		Evening meal		Food items only	

Please tick the type of accommodation you live in

Detached house		Semi detached house		Terraced house	
Detached bungalow		Semi-detached bungalow		Terraced bungalow	
Flat in a house		Flat in a block		Flat over a shop	
Maisonette		Hostel		Hotel or guest house	
Mobile home		Caravan		Ground rent only	
Room or rooms		Other – please specify			

If you rent a room, where in the building is it, e.g. front, centre, back, other?	
If you rent a room, what is your room number?	
How many floors are there in the whole building?	
Which floor do you live on, e.g. basement, ground, first and so on?	
Is your accommodation furnished?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Fill in the table below to tell us how many rooms are in the building you live in and who uses them.

	Total number in the whole building	Number used only by you and your family	Number you share with other tenants
Living rooms			
Bedrooms			
Bedsits			
Kitchens			
Bathrooms			
Separate toilet			
Other rooms			
Total number of rooms			

Part 15

How your housing benefit will be paid

If you are a Cheltenham Borough Homes tenant then we will pay the benefit to your rent account.

If you are a Housing Association tenant then we can pay the benefit directly to them if you tick this box otherwise we will pay the money into your bank account (please specify below).

If you are renting from a private landlord we will pay the benefit into your bank account, unless you are over eight weeks in arrears with your rent or cannot manage your finances due to illness, for example. If this is the case then please contact 01242 264341 for further advice.

Name of your bank or building society	
Address of bank or building society	
Name of account holder	
Bank sort code	
Account number	
Roll number (building society accounts only)	
Please provide documentary evidence of this account. E.g. your latest bank statement.	

Part 16

Sharing information with your landlord

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.

By giving permission, we will be able to tell your landlord:

- whether or not you had a claim or renewed your claim for housing benefit
- whether we have made a decision on your claim
- if we need more information to make a decision

We will not give your landlord any information about:

- your personal or household circumstances
- your income and savings

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

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

I give you permission to share information about the progress of my benefit claim with my landlord, agent or their representative.

Your signature

Date

Part 17 Backdating or anything else you need to tell us

We can normally pay benefit from the Monday after you first asked us for a form, as long as you return it within one month. 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 from an earlier date, tell us the date you want benefit from, and why you did not claim earlier.

Date you wish to claim from:

Reasons for delay in claiming:

Part 18

Extra Information

Please use this space to tell us about any children, other adults, income, jobs, savings and so on that you have not been able to give details of on the previous pages. You can also use it to tell us anything else you feel may help us with your claim.

Declaration - Please read this carefully before you sign it

I understand the following:

- If I give information that is incorrect or incomplete you may take action against me. This may include legal action. You will use the information that I have provided to process my claim for benefit. You may check some of the information with others as allowed by law.
- You may use any information I have provided in connection with this and any other claim for state benefits that I have made or make. You may give some information to other organisations, such as government departments, local authorities and private companies such as banks and organisations that may lend me money.
- You must protect the public funds you handle and may use the information I have provided on this form to prevent and detect fraud. You may also share this information for the same purpose with any other organisations responsible for monitoring and handling public funds, which includes Experian a credit agency who is the data processor for the Department for Work and Pensions.
- I know I must immediately tell you, the Benefit Service, about any change in circumstances or changes in the circumstances of anyone else in the household, which may affect my claim. If I do not I may be prosecuted.
- I confirm that the information I have given on this form is correct and complete.

Your signature		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	
Name of the person who filled in the form	
Relationship to the person claiming	

Declaration: I have confirmed with the person claiming that the answers I have written on this form are correct and the declaration above has been read by or to them.

Signature of the person who filled in the form		Date	
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How we collect and use information

We will use the information we collect on this form and supporting evidence to process your claim for housing benefit/council tax support. We may pass the information to the Department for Work and Pensions and HM Revenue and Customs if the law allows this.

We may check the information you provide or information someone gives us about you with other information held by us. We may also get information from organisations or give them information to check the details we have are accurate. This is to prevent or detect crime or to protect public funds in other ways if the law allows this. These other organisations include government departments and other local authorities.

We are the Data Controller for the purpose of the Data Protection Act 1998. This means we are responsible for keeping to the Data Protection Act. If you want to know more about what information we have about you or the way we use that information, please see our fair processing notice on our website or contact us.

Changes you must tell us about

You must tell us if:

- anyone moves into or out of your home, including lodgers and sub-tenants;
- any of your children leave school or leave home;
- you have another child or the amount of childcare that you pay changes;
- the income of anyone living with you, including benefits, changes;
- your capital, savings or investments change;
- you, or anyone living with you, becomes a student, goes on a youth training scheme, goes into hospital or a nursing home, goes into prison or changes or leaves a job;
- your rent changes;
- you move or are going to be away from home for more than a month;
- anything you have told us about changes.

This is not a full list. If you are not sure, ask us for advice. You must tell us about any changes in writing as a phone call may not be enough. If you do not tell us about these changes, you may lose money you are entitled to or you may get too much benefit.

It is an offence not to tell us about any change of circumstances that affects your benefit.

What happens now?

When you have filled in the form, sign it and return it to us at the address on the front of the form together with original documents to prove your income and capital, as applicable. Supporting documents will be photocopied and returned to you.

Valuable items such as a passport and building society passbooks should not be posted but brought into the customer service desk at the Municipal Offices, where we can check and photocopy them free of charge. The office is open from Monday to Friday between 10am and 4pm.

We will contact you within seven days of receiving your form, to either ask for extra information or tell you about your award.