

**Wigan Council - A change of  
circumstance form for Housing Benefit,  
Council Tax Benefit, Second Adult  
Rebate and free school meals**

Reference:

Issue date:

## About this form

If you are claiming Housing Benefit, Council Tax Benefit, Second Adult Rebate and free school meals, use this form to tell us about any change in your circumstances, as this may affect the amount of benefit you are entitled to.

**Tell us straight away.**

**If you do not tell us about changes in your circumstances, you may lose money you are entitled to or we may pay you too much benefit.**

You must tell us if any of the following apply to you or your partner.

- You start to get or have a change in Working Tax Credit, Child Tax Credit or Pension Credit.
- Someone moves into or out of your home.
- Your wage goes up or down.
- Your state benefits change.
- Your Income Support stops.
- Your Jobseeker's Allowance stops.
- Your rent goes up or down.
- You start working or change jobs.
- One of your children leaves or starts school, or moves to a different school.
- You move home.
- You enter into a civil partnership.
- Your private pension goes up.
- Your savings go up or down.
- The income of the other adults in your home changes.
- Anyone starts to get Invalid Care Allowance or Carer's Allowance for looking after you.
- You start to get a state benefit.
- The hours of childcare provided or the cost of childcare changes.

**Please tell us about any change, in writing (a phone call is not enough) and send us proof of the new details. You need to tell us even if you have told the Department for Work and Pensions.**

**Any proof you send us must be original documents. We cannot accept copies.**

**You must make sure that you tell us about changes. Do not rely on someone else to pass the message on.**

**It is an offence not to tell us about any change of circumstances that affects your benefit. We may take court action against you if we pay you too much benefit and you will probably have to pay it back.**

## Section 1 About you and your partner

|                                   | You   | Your partner  |
|-----------------------------------|---|---|
| <b>Full name:</b>                 | <input type="text"/>  | <input type="text"/>  |
| <b>Address:</b>                   | <input type="text"/>  | <input type="text"/>  |
|                                   | <input type="text"/>  | <input type="text"/>  |
|                                   | <input type="text"/>  | <input type="text"/>  |
| <b>Postcode:</b>                  | <input type="text"/>  | <input type="text"/>  |
| <b>Your phone number:</b>         | <input type="text"/>  | <input type="text"/>  |
| <b>Your email address:</b>        | <input type="text"/>  | <input type="text"/>  |
| <b>Date of birth:</b>             | <input type="text"/> / <input type="text"/> / <input type="text"/>  | <input type="text"/> / <input type="text"/> / <input type="text"/>  |
|                                   | <small>Letters    Numbers                                  Letter</small>   | <small>Letters    Numbers                                  Letter</small>   |
| <b>National Insurance number:</b> | <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

## Section 2 About a change of address

If you are telling us that you have recently moved or are about to move fill in this section.

**Have you, your partner and the other people who live with you changed address?**

**No**  Go to **section 5**.  
**Yes**  Give details.

**What address are you moving from?**

  
  
  
  
**Postcode:**  

**What date did you move out?**

 /  / 

**If you paid rent what date did your tenancy end?**

 /  / 

**What address are you moving to?**

  
  
  
  
**Postcode:**  

**What date did you move in?**

 /  /

## Section 2 About a change of address (continued)

**In your new home will you be:**

- |                                     |                          |                          |
|-------------------------------------|--------------------------|--------------------------|
| a council tenant?                   | <input type="checkbox"/> | Go to <b>section 5</b> . |
| an owner occupier?                  | <input type="checkbox"/> | Go to <b>section 5</b> . |
| living with parents or relatives?   | <input type="checkbox"/> | Go to <b>section 5</b> . |
| renting from a private landlord?    | <input type="checkbox"/> | Give details.            |
| a boarder?                          | <input type="checkbox"/> | Give details.            |
| renting from a housing association? | <input type="checkbox"/> | Give details.            |
| other? Give details                 |                          |                          |

**What sort of building do you live in?** Tick one box only.

- |                       |                          |                     |                          |                            |                          |
|-----------------------|--------------------------|---------------------|--------------------------|----------------------------|--------------------------|
| A detached house      | <input type="checkbox"/> | A flat in a house   | <input type="checkbox"/> | A caravan or mobile home   | <input type="checkbox"/> |
| A semi-detached house | <input type="checkbox"/> | A flat in a block   | <input type="checkbox"/> | A hotel                    | <input type="checkbox"/> |
| A terraced house      | <input type="checkbox"/> | A flat over a shop  | <input type="checkbox"/> | A residential nursing home | <input type="checkbox"/> |
| A maisonette          | <input type="checkbox"/> | A bedsit or room    | <input type="checkbox"/> | A residential care home    | <input type="checkbox"/> |
| A bungalow            | <input type="checkbox"/> | A hostel            | <input type="checkbox"/> | Board and lodgings         | <input type="checkbox"/> |
| A houseboat           | <input type="checkbox"/> | Other. Give details |                          |                            |                          |

- |  |           |                          |            |                          |
|--|-----------|--------------------------|------------|--------------------------|
| <b>Does your home have central heating?</b>                              | <b>No</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> |
| <b>Does your home have a garden?</b>                                     | <b>No</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> |
| <b>Does your home have a garage?</b>                                     | <b>No</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> |
| <b>Does your home have a parking space?</b>                              | <b>No</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> |
| <b>Has your home been built or adapted for people with disabilities?</b> | <b>No</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> |

**Do you and your household live in only part of the building you have ticked?** No  Yes  Where in the building do you live?

- At the front
- In the middle
- At the back

**How many floors are there in the whole building?**

**Which floors do you live on?**

For example, ground floor, basement, all.

## Section 2 About a change of address (continued)

**How many rooms are there in the building?**

In the whole building

Just for you and your household

That you share with other people

Living rooms




Bedsitting rooms




Bedrooms




Bathrooms or shower rooms




Toilets




Kitchens




Other rooms




**Do you use your home for business?**

No

Yes

**Do you have a main home somewhere else?**

No

Yes  What is the address?

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

|           |
|-----------|
|           |
|           |
|           |
| Postcode: |

How much do you pay for this home?

£

**What is your landlord's name and address?**

By landlord we mean the person or organisation who owns the property you live in. We won't accept a 'care of' address. Please give full details. A PO box or bank account number is not enough.

|           |
|-----------|
|           |
|           |
|           |
|           |
|           |
|           |
| Postcode: |

**If your landlord has an agent, tell us their name and address.**

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

|           |
|-----------|
|           |
|           |
|           |
|           |
|           |
|           |
| Postcode: |

## Section 2 About a change of address (continued)

**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 agent's partner?**

No

Yes  What is the relationship?

|                      |                             |                      |
|----------------------|-----------------------------|----------------------|
| <input type="text"/> | is my landlord's or agent's | <input type="text"/> |
|----------------------|-----------------------------|----------------------|

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

**Do you or your partner own, or have you or they ever owned, any part of the property you now live in?**

No

Yes

**Do you rent the accommodation from a company you or your partner are a director or employee of?**

No

Yes

**Do you live in the property as a condition of your or your partner's job?**

No

Yes

**Is your landlord your or your partner's ex-partner?**

No

Yes

**Is your landlord the parent of a child you or your partner are responsible for?**

No

Yes

**Is your landlord a trust which you or your partner are a trustee or beneficiary of?**

No

Yes

**Is your landlord a trust of which your child or your partner's child is a trustee or beneficiary of?**

No

Yes

**When did you start renting your home?**

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

**When did you move to this address?**

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

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?**

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

For example, short hold, assured, tied.

## Section 2 About a change of address (continued)

What date did your tenancy start?

 /  / 

Is your tenancy for a fixed period?

No

Yes  When does it end?

 /  / 

Is the property rented as:

furnished?

hardly furnished?

partly furnished?

unfurnished?

How much is the rent for your home?

£  every

For example, every week, fortnight, 4 weeks or month.

Do you pay your rent to someone other than your landlord or agent?

No

Yes  Who to?

We will write to you about this.

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

No

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

How much rent do they pay?

£  every

When is the next rent increase due?

 /  / 

Have you applied for a pre-tenancy determination?

No

Yes

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

No

Yes  Send us the notice of registration (RO5).

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

No

Yes  How many in a year?

## Section 2 About a change of address (continued)

Are you behind with your rent?

No

Yes  By how many weeks?

Who gets the Council Tax bill for your home?

You or your partner

Your landlord

Someone else

Tell us who gets the Council Tax bill.

Does your rent include money for the following?

**Meals**

No

Yes  How much each week?

£

For which meals?

Breakfast

Lunch

Evening meal

**Water charges**

No

Yes  How much each week?

£

**Heating**

No

Yes  How much each week?

£

**Lighting**

No

Yes  How much each week?

£

**Hot water**

No

Yes  How much each week?

£

**Fuel for cooking**

No

Yes  How much each week?

£

**Laundry**

No

Yes  How much each week?

£

## Section 2 About a change of address (continued)

Cleaning

No

Yes

How much each week?

£

Gardening

No

Yes

How much each week?

£

Personal care and support

No

Yes

How much each week?

£

Garage or parking space

No

Yes

How much each week?

£

Do you have to rent the garage as part of your tenancy agreement?

No

Yes

Do you pay any service charges with your rent?

No

Yes

How much each week?

£

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

What for?

**We must see proof of your rent and tenancy before we can decide how much benefit you can get.**

## Section 3 How do you want to be paid

How do you want us to pay your Housing Benefit?

I want to be paid by cheque.

Go to **section 5**.

I want my benefit cheque to go straight to my landlord.

Go to **section 4**.

I want my benefit cheque to go straight to my landlord's agent.

Go to **section 4**.

I want my benefit to go straight into my landlord's bank or building society account.

Go to **section 4**.

I want my benefit to go straight into my bank or building society account.

Give details.



### Section 3 How do you want to be paid (continued)

Name of your bank or building society:

Address:

  
  
  

Name the account is held in:

Account number:

Sort code:

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

### Section 4 Paying benefit to your landlord or agent

If you want us to pay your benefit straight to your landlord or agent, you must both sign this declaration. Please pay my Housing Benefit to my landlord or agent. I understand that:

- I must always tell you about any change in my circumstances;
- if I do not tell you about any change in my 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 change in my circumstances.

Your signature:

Date:

Now ask your landlord or agent to sign the following part of this section.

**Landlord's or agent's declaration:**

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

- I must always tell you straight away about any change in the tenant's circumstances;
- 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;
- if you pay me too much Housing Benefit for any tenant, I must repay it;
- you can take the amount of any overpaid benefit I get from the Housing Benefit of other tenants and this will not affect their rent; and
- I should contact you before taking court action against my tenant to recover unpaid rent.

Landlord's or agent's name:

Landlord's or agent's signature:

Date:

## Section 4 Paying benefit to your landlord or agent (continued)

Name of your landlord's or agent's bank or building society:

Address:

|           |
|-----------|
|           |
|           |
|           |
| Postcode: |

Name the account is held in:

Account number:

Sort code:

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

### Sharing information with your landlord or agent.

Sharing information with your landlord or agent could help us to deal with your claim more quickly and reduces the risk of falling behind with your rent because of your claim being delayed. We would only share information with your landlord or agent if you have agreed that your Housing Benefit can be paid directly to your landlord or agent.

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 or agent whether:

- you have claimed Housing Benefit;
- we have made a decision on your claim; or
- we need further information to make a decision on your claim and, if so, what information this is.

If you allow us to share information with your landlord we may be able to solve problems and so prevent your landlord taking action against you to recover unpaid rent.

There may be other information about your claim that we need to check with your landlord or agent (such as the date your tenancy started) before we can make a decision on your claim. If this is the case, we have to talk to your landlord or agent, 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 or agent.

**We will not give your landlord or agent any information about:**

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

## Section 4 Paying benefit to your landlord or agent (continued)

If you do not give us permission to discuss your claim with your landlord or agent, it will not affect your claim. And if you give us permission, you can change your mind at any time. Just contact us and let us know. If you want to give us permission to discuss your claim with your landlord or agent, 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.**

Your signature:

Your address:

  
  


Date:

 /  / 

Have you, your partner or other people who live with you had any other changes?

No

Go to **section 16**.

Yes

Go to **section 5**.

## Section 5 About children moving in or out of your household

Have any children moved into or out of your household?

No

Go to **section 6**.

Yes

Give details.

If you need to tell us about more than two children, use a separate sheet of paper to tell us all the information we ask for in this section.

**Please tick this box if you are sending a separate sheet.**

**Child 1**

**Child 2**

Full name:



Date of birth:

 /  / 
 /  / 

The child's sex:

Boy

Girl

Boy

Girl

Child's relationship to you:



Child's relationship to your partner:



Child Benefit number:



Who gets the Child Benefit for them?



What date did the child move?

 /  / 
 /  /

## Section 5 About children moving in or out of your household (continued)

|  | Child 1   | Child 2   |
|--|---|---|
| <p><b>What address did the child move from (if they have moved in) or to (if they have moved out)?</b></p>                                     | <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding: 2px;">Postcode:</div> | <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding: 2px;">Postcode:</div> |
| <p><b>Did the child move in or out?</b></p>  | <p>Out <input type="checkbox"/> Go to <b>section 6</b>.</p> <p>In <input type="checkbox"/> Give details.</p>  | <p>Out <input type="checkbox"/> Go to <b>section 6</b>.</p> <p>In <input type="checkbox"/> Give details.</p>  |
| <p><b>Does the child get Disability Living Allowance?</b></p>  | <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> How much?</p>  | <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> How much?</p>  |
|  | £   | £   |
|  | We need to see proof of this.   | We need to see proof of this.   |
| <p><b>Is the child registered blind?</b></p>   | <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> We need to see proof of this.</p>  | <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> We need to see proof of this.</p>  |
| <p><b>What is the name and address of the child's school?</b></p>  | <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding: 2px;">Postcode:</div> | <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding: 2px;">Postcode:</div> |
| <p><b>Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?</b></p> | <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> Name and address of the minder:</p>  | <p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> Name and address of the minder:</p>  |
|  | <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding: 2px;">Postcode:</div> | <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding: 2px;">Postcode:</div> |

## Section 5 About children moving in or out of your household (continued)

**Child 1**

**Child 2**

The minder's registration number:

The minder's registration number:

How much do you pay a week?

£

How much do you pay a week?

£

We need to see proof of this.

We need to see proof of this.

**Is child care provided every week?**

**No**  We will write to you about this.

**Yes**

**No**  We will write to you about this.

**Yes**

## Section 6 About adults moving in or out of your household

**Has anyone moved into or out of your home?**

**No**  Go to **section 7**.

**Yes**  Give details.

If you need to tell us about more than two people, use a separate sheet of paper to tell us all the information we ask for in this section.

**Please tick this box if you are sending a separate sheet.**

**Person 1**

**Person 2**

**Full name:**



**Date of birth:**

 /  / 
 /  / 

Letters      Numbers      Letter

Letters      Numbers      Letter

**National Insurance number:**

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
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|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

**Their relationship to you or your partner:**



Some examples are aunt, uncle, brother, daughter, father, stepdaughter, joint tenant, lodger or friend.

**What date did they move?**

 /  / 
 /  / 

**What address did they move from (if they have moved in) or to (if they have moved out)?**

  
  

  
  


Postcode:

Postcode:

**Did they move in or out?**

**Out**  Go to **section 7**.

**In**  Give details.

**Out**  Go to **section 7**.

**In**  Give details.

## Section 6 About adults moving in or out of your household (continued)

|  | Person 1  | Person 2  |
|--|---|---|
| Do they get Income Support, income-based Jobseeker's Allowance or Pension Credit?                          | No <input type="checkbox"/><br>Yes <input type="checkbox"/>   | No <input type="checkbox"/><br>Yes <input type="checkbox"/>   |
| Are they severely mentally impaired?   | No <input type="checkbox"/><br>Yes <input type="checkbox"/>   | No <input type="checkbox"/><br>Yes <input type="checkbox"/>   |
| Do they get Disability Allowance or Attendance Allowance?  | No <input type="checkbox"/><br>Yes <input type="checkbox"/> How much?<br>£ <input style="width: 100px;" type="text"/> a week  | No <input type="checkbox"/><br>Yes <input type="checkbox"/> How much?<br>£ <input style="width: 100px;" type="text"/> a week  |
| Are they in hospital or prison at the moment?  | No <input type="checkbox"/><br>Yes <input type="checkbox"/> When did they go in?<br><input style="width: 100px;" type="text"/> / <input style="width: 100px;" type="text"/> | No <input type="checkbox"/><br>Yes <input type="checkbox"/> When did they go in?<br><input style="width: 100px;" type="text"/> / <input style="width: 100px;" type="text"/> |
|  | When will they come out (if you know this)?<br><input style="width: 100px;" type="text"/> / <input style="width: 100px;" type="text"/>                                      | When will they come out (if you know this)?<br><input style="width: 100px;" type="text"/> / <input style="width: 100px;" type="text"/>                                      |
| Are they a full time student, a student nurse, a care worker, an apprentice or on a youth training scheme? | No <input type="checkbox"/><br>Yes <input type="checkbox"/> Tell us which.<br><input style="width: 100px;" type="text"/>  | No <input type="checkbox"/><br>Yes <input type="checkbox"/> Tell us which.<br><input style="width: 100px;" type="text"/>  |
| Do they pay rent or money for board and lodging to you or your partner?                                    | No <input type="checkbox"/><br>Yes <input type="checkbox"/> How much?<br>£ <input style="width: 100px;" type="text"/> a week  | No <input type="checkbox"/><br>Yes <input type="checkbox"/> How much?<br>£ <input style="width: 100px;" type="text"/> a week  |
| Do they normally work for 16 hours or more a week?   | No <input type="checkbox"/><br>Yes <input type="checkbox"/> Tell us their earnings before any deductions.<br>£ <input style="width: 100px;" type="text"/> a week            | No <input type="checkbox"/><br>Yes <input type="checkbox"/> Tell us their earnings before any deductions.<br>£ <input style="width: 100px;" type="text"/> a week            |
|  | We need to see proof of this.   | We need to see proof of this.   |

## Section 6 About adults moving in or out of your household (continued)

**Do they have any other income at all?**

You must include any benefits or allowances and any interest from savings and investments.

**No**  Go to **section 7**.

**Yes**  Give details below.

| Person 1   | Person 2   |
|--|--|
| Name of first other income:<br><input style="width: 95%; height: 25px;" type="text"/>                | Name of first other income:<br><input style="width: 95%; height: 25px;" type="text"/>                |
| How much is it before deductions?<br>£ <input style="width: 60%; border: none;" type="text"/> a week | How much is it before deductions?<br>£ <input style="width: 60%; border: none;" type="text"/> a week |
| We need to see proof of this.  | We need to see proof of this.  |
| Name of second other income:<br><input style="width: 95%; height: 25px;" type="text"/>               | Name of second other income:<br><input style="width: 95%; height: 25px;" type="text"/>               |
| How much is it before deductions?<br>£ <input style="width: 60%; border: none;" type="text"/> a week | How much is it before deductions?<br>£ <input style="width: 60%; border: none;" type="text"/> a week |
| We need to see proof of this.  | We need to see proof of this.  |
| Name of third other income:<br><input style="width: 95%; height: 25px;" type="text"/>                | Name of third other income:<br><input style="width: 95%; height: 25px;" type="text"/>                |
| How much is it before deductions?<br>£ <input style="width: 60%; border: none;" type="text"/> a week | How much is it before deductions?<br>£ <input style="width: 60%; border: none;" type="text"/> a week |
| We need to see proof of this.  | We need to see proof of this.  |

**Are any of the people who normally live with you married to each other or living together as if they were?**

**No**  Go to **section 7**.

**Yes**  Give details.

| Person 1  | Person 2  |
|---|---|
| Tell us their names and who they are the partner of.<br><input style="width: 95%; height: 100px;" type="text"/> | Tell us their names and who they are the partner of.<br><input style="width: 95%; height: 100px;" type="text"/> |

## Section 7 About changes to Income Support, income-based Jobseeker's Allowance and Pension Credit

Have you, your partner or other people in your home stopped getting Income Support, income-based Jobseeker's Allowance or Pension Credit?

No  Go to section 8.

Yes  Give details.

If you need to tell us about more than one change use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

Tell us about all of your income and capital.

We also need to know about your partner's income and capital.

We need to see proof of this.

## Section 8 About changes to self-employment

Have you, your partner or other people in your home had a change to your self-employed earnings or details?

No  Go to section 9.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

What has changed?

Tell us about all of your income and bank, building society or post office accounts, Premium Bonds, National Savings Certificates, stocks, shares, bonds or property.

We need to see proof of this.



## Section 9 About changes to employment

Have you, your partner or other people in your home had a change in employment earnings or details?

No  Go to **section 10**.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

 /  / 

What has changed?

If you have started work for a new employer tell us their name and address. If you give us permission below we can contact them direct for proof.

We need to see proof of this.

## Permission to contact your employer

|   | You                  | Your partner         |
|---|----------------------|----------------------|
| Name:   | <input type="text"/> | <input type="text"/> |
| National Insurance number:                      | <input type="text"/> | <input type="text"/> |
| What is your payroll, employee or staff number? | <input type="text"/> | <input type="text"/> |

I give you permission to contact my employer about my earnings and employment so you can assess my entitlement to Housing Benefit and Council Tax Benefit.

Signature:

Date:  /  /   /  /

## Section 10 About changes to benefits and pensions

Have you, your partner or other people in your home had a change in benefits or pensions?

No  Go to **section 11**.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

What has changed?

We need to see proof of this.

## Section 11 About changes to other money coming in

Have you, your partner or other people in your home had a change in other money that you get?

No  Go to **section 12**.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

What has changed?

We need to see proof of this.

## Section 12 About changes to bank accounts, savings, investments and property

Have you, your partner or other people in your home had a change in bank, building society or post office accounts, Premium Bonds, National Savings Certificates, stocks, shares, bonds or property?

No  Go to **section 13**.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

What has changed?

We need to see proof of this.

## Section 13 About a change to rent

Have you, your partner or other people in your home had a change in your rent?

No  Go to **section 14**.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

What has changed?

We need to see proof of this.

## Section 14 About changes to childcare

Have you or your partner had a change in the hours of childcare provided, or the cost of childcare paid to a registered childminder, nursery or after-school club?

No  Go to **section 15**.

Yes  Give details.

If you need to tell us about more than one change, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the person the change relates to:

Date of change:

What has changed?

We need to see proof of this.

## Section 15 Anything else you need to tell us

Use the box below 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.

If you are sending separate sheets of paper with this form, put your name and address on each sheet and tell us how many.

## Section 16 Your declaration

Please read this declaration carefully before you sign and date it. It is an offence to give false information.

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

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, Council Tax Benefit and free school meals.
- 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 or 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 I must let you know about any changes in my circumstances that may affect my claim.

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

**Signature of person claiming:**

**Date:**

**Your partner's signature:**

**Date:**

## Section 17 Forms filled in by someone other than the person claiming

**If you are filling this form in for someone else. Please tell us why you are doing this.**

Name of the person who filled the form in:

**Section 17 Forms filled in by someone other than the person claiming (continued)**

Address of the person who filled the form in:

|           |
|-----------|
|           |
|           |
|           |
| Postcode: |

Relationship to the person claiming:

|  |
|--|
|  |
|--|

Phone number of the person who filled the form in:

|  |
|--|
|  |
|--|

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

Signature of the person who filled the form in:

|  |
|--|
|  |
|--|

Date

|          |
|----------|
| /      / |
|----------|

## Section 18 Checklist

**Please tick the relevant boxes to tell us what proof you are sending with this form.**

Remember we must see original documents, we cannot accept photocopies.

Please do not send valuable items through the post. If you can, bring them in to us. We will take the details we need and give you the documents back straight away. If you cannot get into the office, phone us for more advice.

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

If you cannot send the proof we need at the moment, **send the form back to us now and send the proof later**. We can start to process your claim, but we will not be able to pay you any benefit until we have all the proof.

### Proof 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, water or electricity bill. We may need to see two of these documents for each person.

### Proof of National Insurance number

Such as a National Insurance number card, payslips or letter from the Department for Work and Pensions or the tax office.

### Proof of bank accounts, 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 proof of any interest or dividends you get on investments and savings. We need to see proof of this for children in your household as well. The proof you send must show details for at least the last two months.

### Proof of earnings

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. If you cannot provide payslips, **please contact us for advice**. 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 12 months, a summary of your trading records so far.

### Proof of other income

Such as your latest pension slip from a former employer or a letter from the court showing how much maintenance you are getting. We need proof of any money people pay you for board and lodgings. If you have any non-dependants (people who do not depend on you financially) in the household, they need to provide proof of their income and earnings. If they don't provide this proof, we will make the highest deduction.

### Proof of benefits, allowances or pensions

Such as current award notices or letters from the Department for Work and Pensions confirming how much you get. If you do not have proof you can use section 23, the 'Certificate of benefit'. Please do not send order books through the post.

### Proof of private rent and tenancy

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

**If you are posting the form back to us, make sure that you pay the correct postage. This will make sure that the form and all the proof reaches us on time.**

## Section 19 Certificate of benefit

If you are not sending proof of your benefits with your claim form, please fill in part 1 of this certificate and hand it in to the Department for Work and Pensions (DWP) or Jobcentre Plus. They will fill in part 2 and send this certificate back to us.

### Part 1 About you and your partner

|                                   | Your   | Your partner   |
|-----------------------------------|--|--|
| <b>Full name:</b>                 | <input type="text"/>   | <input type="text"/>   |
| <b>Date of birth:</b>             | <input type="text"/> / <input type="text"/> / <input type="text"/>   | <input type="text"/> / <input type="text"/> / <input type="text"/>   |
|                                   | <small>Letters      Numbers                                  Letter</small>  | <small>Letters      Numbers                                  Letter</small>  |
| <b>National Insurance number:</b> | <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| <b>Address:</b>                   | <input type="text"/><br><input type="text"/><br><input type="text"/><br><input type="text"/>   | <input type="text"/><br><input type="text"/><br><input type="text"/><br><input type="text"/>   |
|                                   | <b>Postcode:</b> <input type="text"/>  | <b>Postcode:</b> <input type="text"/>  |
| <b>What benefits do you get?</b>  | <input type="text"/>   | <input type="text"/>   |

I authorise the DWP to provide the following details about my benefits or allowances.

**Your signature:**

**Partner's signature:**

Now give this form to the Department for Work and Pensions or Jobcentre Plus.

Council Tax Offices  
PO Box 100  
Moore Street East  
Whelley  
Wigan  
WN1 3DS





**Part 2 Details from the Department for Work and Pensions**

|  | <b>Claimant</b>   | <b>Claimant's partner</b>   |
|--|---|---|
| <b>Type of benefit:</b>  |   |   |
| <b>Date it started:</b>  | / /   | / /   |
| <b>Date it will end:</b>   | / /   | / /   |
| <b>Weekly rate:</b>  | £   | £   |
| <b>Type of benefit:</b>  |   |   |
| <b>Date it started:</b>  | / /   | / /   |
| <b>Date it will end:</b>   | / /   | / /   |
| <b>Weekly rate:</b>  | £   | £   |
| <b>Type of benefit:</b>  |   |   |
| <b>Date it started:</b>  | / /   | / /   |
| <b>Date it will end:</b>   | / /   | / /   |
| <b>Weekly rate:</b>  | £   | £   |
| <b>Are any deductions being made from any of these benefits?</b> | <b>No</b> <input type="checkbox"/><br><b>Yes</b> <input type="checkbox"/> From which benefit?<br> | <b>No</b> <input type="checkbox"/><br><b>Yes</b> <input type="checkbox"/> From which benefit?<br> |
|  |   |   |
|  | How much each week?   | How much each week?   |
|  |   |   |
| <b>Officer's name:</b>   |   |   |
| <b>Officer's signature:</b>                                      |   |   |
| <b>Date:</b>   | / /   |   |
| <b>Official stamp:</b>   |   |   |

## Section 20 Receipt for change of circumstance form

Fill in this section, and get it stamped by us or the office you hand your claim in at, to act as a receipt for your change of circumstances.

Name:

Address:   
  
  
Postcode:

Official stamp:

This is a receipt to show that you have filled in a change of circumstances form to tell us about a change in your circumstances that may affect your.

- Housing Benefit.
- Council Tax Benefit.
- Second Adult Rebate.
- Free school meals.

We received your form on the date shown above.

Please keep this in a safe place. You may be asked to produce it later.

We will deal with your claim for benefit as soon as possible.

If we ask for more information or proof so that we can process your claim, please supply it straight away.

If you want to know how much rent and Council Tax to pay while you are waiting for your benefit, contact us at the address below.

**The Council Tax Offices**  
**PO Box 100**  
**Moore Street East**  
**Whelley**  
**Wigan**  
**WN1 3DS**

**Phone: 01942 828644**

We will work out your benefit using the details that you have put on your form.  
If these details change, you must tell us straight away.

If you do not tell us about changes you may be paid too little or too much benefit.  
We will then recover any overpaid benefit from you.

## How we collect and use information

We will use the information you give in this form, and in any supporting evidence you send us, to process your claim for Housing Benefit, Council Tax Benefit, Second Adult Rebate and free school meals.

We may pass the information to other agencies or organisations such as the Department for Work and Pensions and the Inland Revenue, as allowed by law.

We may check information you have provided, or information about you that someone else has provided, with other information we hold.

We may get information about you from certain third parties, or give them information to:

- make sure the information is accurate;
- prevent or detect crime; and
- protect public funds.

We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows us to.

We are the 'data controller' for the purposes of 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 ask us.

## Contacting us

If you have any questions or need help filling in this form contact us.

Our address is:

**The Council Tax Offices**  
**PO Box 100**  
**Moore Street East**  
**Whelley**  
**Wigan**  
**WN1 3DS**

**Phone:**

**01942 828644**

**Fax:**

**01942 828613**

**E-mail:**

**benefits@wiganmbc.gov.uk**

**Website:**

**www.wiganmbc.gov.uk**

**Textphone (for people who are hard of hearing):**

**01942 828725**

The enquiry office is open from 8.45am to 4.30pm, Monday to Friday.

## Our office has the following facilities

- Access for people in wheelchairs.
- An induction loop to help if you are hard of hearing, and staff who can use sign language if you are deaf. We can arrange other support services and equipment to help you if you are disabled. We use Typetalk and you can contact us this way.
- We can arrange an interpreter to speak to you in your own language if English is not your first language.
- Phone lines to other council departments.
- If you find it difficult to leave your home, we can send someone to visit you to help you fill in forms or give you help and advice.

## Useful information

### Your local office of Wigan and Leigh Housing

Staff at your local office can help you fill in and check your claim.

### Your local council office

Staff at the following council offices can help you fill in and check your claim.

Leigh Town Hall  
Market Street  
Leigh  
WN7 1DY

Wigan Civic Centre  
Millgate  
Wigan  
WN1 1YD

### Your landlord

If you are a tenant of one of the following landlords, they can help you fill in and check your claim.

- Wigan and Leigh Housing
- Arena Housing
- Adactus Housing Association
- English Churches Housing

### Your library

Staff at the following libraries can help you fill in and check your claim.

- Abram
- Ashton
- Aspull
- Atherton
- Golborne
- Ince
- Orrell
- Standish

### Local agencies

The following agencies can give advice about your claim.

- Wigan Independent Advice Centre 01942 324851
- Citizens Advice 08701 264 459
- Age Concern (for those aged 50 or over) Wigan 01942 241972  
Leigh 01942 607337

