## Housing Benefit and Council Tax Support Capital Declaration form







Please fill in this form with details of all capital that you and your partner hold. Please use black ink and block capitals.

First name:				Last name:					
Daytime phone number:					E-mail address:				
Address:									
								Reference number:	
Postcode:									
Please fill in the table below listing all bank, building society and Post Office accounts held by you and your partner, and the amounts in each account, even if you do not use them.									
Type of account or savings			Account number			Amount		Held by	
2. Do you or your partner have any National Savings Certificates or Premium Bonds?									
Yes No If 'Yes', please give details below									
Name	Issue ty	type Am		nount invested		Date of issue		Held by	
3. Do you or your partner have stocks or shares?									
Yes No If 'Yes', please give details below									
Name of company				Numb	Number of shares He			by	
							I		

4. Do you or your pa in cash?	artner have any savings	5. Does anyone ow	e you or your partner money?				
Yes No		Yes No					
If 'Yes', please gi	ve details below:	If 'Yes', please give details below:					
Amount of H	eld by	Amount owed	Who owed to				
6. Is anyone looking	g after any money, capital, other pro		ou or your partner?				
7. Do you or your partner own any property (other than the home you live in), land or holiday homes in the UK or abroad. This includes property and land on which there is a mortgage or loan, held in trust, or jointly held with another person?  Yes No If 'Yes', please give details below							
You must provide the last two months full statements for each account you (or your partner) hold, or an up-to-date passbook showing the current balance.							
Please also provi seen them.	de evidence of stocks, shares, b	onds and certifica	ates, if we have not already				
Declaration							
I declare that the in I may be prosecute	nformation I have given is correct. I ed.	understand that if	I give information that is false,				
Your signature:							
Date:							

Once you have filled in this form and signed the declaration please return it to your Local Authority:

Canterbury City Council
Benefits Service
Military Road
Canterbury, Kent
CT1 1YW
www.canterbury.gov.uk

Dover District Council
Benefits Service
White Cliffs Business Park
Dover, Kent
CT16 3PJ
www.dover.gov.uk

Thanet District Council
Benefits Service
PO Box 9, Cecil Street
Margate, Kent
CT9 1XZ
www.thanet.gov.uk