



Notes for filling in the Housing Benefit and Council Tax Benefit claim form

About this form

This Housing Benefit and Council Tax Benefit claim form has been specially designed to be easy to fill in. It may seem rather long, but we have to ask a lot of questions to make sure that everyone who claims gets the right amount of benefit.

You may not have to fill in all parts of the form, but you must fill in any part that is relevant to you. Every part starts with a question to help you decide if you need to fill in that part.

Proof

We need to see proof of all of the things you tell us about. There is a checklist at the end of the form to help you. If you are not sure if we need to see proof of something, get in touch with us. We will tell you what we need to see. We cannot pay you benefit until we have seen the proof we have asked for.

Filling in the form

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.

Answer 'Yes' or 'No' questions by putting a tick in the relevant box. If you are picking an answer from a list of answers, put a tick in the relevant box. Do not put a cross in any boxes. If you answer a question with a cross we will have to send the form back, and this will delay the claim.

If someone else fills in the form for you, there is a special space for them to sign.

If you need help filling in the form.

If you need any help, our phone number is 01553 616200. If you have problems hearing, our textphone number is 01553 616705. We are open between 8.45am and 5.15pm Monday, Tuesday & Thursday, 9.30am to 5.15pm Wednesday and 8.45am to 4.45pm Friday. If you cannot come into King's Lynn a member of the Benefits Section will be at the Hunstanton and Downham Market Offices at the following times.

Valentine Road, Hunstanton	Wednesday morning
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Priory Centre, Priory Road, Downham Market	Friday morning
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If you want to make an appointment to discuss Housing and Council Tax Benefit, please contact the office at which you want to be seen. The telephone number for our Hunstanton Office is 01485 532516 and our Downham Market Office is 01366 383287.

A Visiting Officer service is available if you find it difficult to travel into King's Lynn, Downham Market or Hunstanton and need help or advice. If you need this service, please phone the Benefits Section on 01553 616200.

Or you can get in touch with an organisation like the Citizens Advice Bureau. The address and phone number of your nearest bureau is

Thoresby College
Queen Street
King's Lynn
PE30 1HX

Tel: 01553 774719

What to do next

When you have filled in the form, sign it and send it to us with the proof we need to see in the envelope we have sent you. Or you can bring in the form and the proof to us at:

King's Court, Chapel Street, King's Lynn, Norfolk PE30 1EX

If you cannot get the proof we need straight away, do not worry. Send the form to us, but let us know that you will be sending some proof later. If you do not send the form to us straight away, you might lose money. If you cannot get the proof within 2 or 3 weeks, let us know. We may be able to help you.

Changes you must tell us about

You must tell us about these changes in writing – a phone call is not enough.

If you don't tell us about these changes you may lose money you are entitled to or you may get too much benefit, which will have to be repaid

You must make sure that you tell us about these changes. Don't 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 you fail to do so.

Tell us straight away if:

- any of your children leave school or leave home;
- anyone moves into or out of your home (including lodgers and sub-tenants);
- you or your partners income or the income of anyone living with you, including other social security benefits, pay rises, changes;
- you or your partners capital or savings change by more than £200;
- 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 gets, changes or leaves a job;
- your rent changes; the rent you receive from a tenant or boarder changes;
- you move;
- you receive any decision from the Home Office;
- you are coming off Income Support or Jobseekers Allowance

Other Information

When your benefit will start

We can usually pay benefit from the Monday after we receive your form. If you are a new tenant, we can pay it from the start of your tenancy, but only if we get your form on or before the Sunday after your tenancy starts.

We cannot normally pay benefit for any time before you move in.

How we will pay your benefit

If you are a new private tenant, we will pay your Housing Benefit every four weeks for the period that has just passed. We will pay your Council Tax Benefit direct to your Council Tax account.

How your benefit is worked out

Housing and Council Tax Benefit are worked out based on your financial and personal circumstances. Please do not assume that you will receive the maximum amount of benefit.

Second Adult Rebate

This different type of Council Tax Benefit is available to anyone who does not have a partner, but does not qualify for the Council Tax single person discount because they share their home with another person, who:

- is aged 18 or older;
- is on a low income; and
- does not pay them rent.

You need to only fill in Part 1, Part 3 and Part 14 of this form.

Under 25 year olds

If you are under 25 and single, your Housing Benefit may be reduced. This will not apply if you:

- have a partner;
- receive Child Benefit for a child in your care;
- have another adult living with you who does not pay you rent for example, a relative or friend;
- get certain disability benefits;
- or you are under 22 and you have left local authority care.

Before you sign a tenancy agreement, you should contact us to discuss this.

Discretionary Housing Payments

If your Housing Benefit or Council Tax Benefit is not enough, and you have special circumstances, you can ask for additional help with your housing costs.

Backdating

Housing Benefit and Council Tax Benefit will normally start from the Monday after we receive your claim form. It may be possible to backdate your claim if you can show good cause why you did not claim earlier. If you think you have a good reason, please explain in Part 17.

Savings and Investments

If you, your partner, or both of you have savings and investments of more than £16,000, we cannot pay you benefit unless you receive the Guaranteed element of Pension Credit. This rule does not apply if you are claiming Second Adult Rebate.

Local Scheme

The National Benefits scheme ignores £10 a week of any War Widow's/Widower's Pension or War Disablement Pension. We have a local scheme that ignores the full War Widow's Pension or War Disablement Pension. You must include the pension on the claim form.

National Insurance Numbers

You must tell us the National Insurance numbers of you and your partner. **If you do not, we cannot deal with your claim.**



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 and Council Tax Benefit.

We may pass the information to other agencies or organisations such as the Department of Work and Pensions, the Job Centre Plus and H M Revenue & Customs, allowed by the law.

By law, we may check the information you have provided, or information provided about you by someone else, against other information we already have. We may also ask other agencies, private sector organisations such as banks and organisations that lend you money, local authorities or government departments to give us information they have about you 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.

You have the right to ask for a copy of the information we hold on you which is subject to the Data Protection Act 1998 (for which we may make a small charge) and to correct any inaccuracies.

The Borough Council of King's Lynn and West Norfolk is the data controller for the purposes of the Data Protection Act 1998.

If you want to know more about what information we have about you, or the way we use that information, you can ask our Data Protection Officer.

Please complete the section below if you have a change of circumstance.



Change of Circumstance

Name Claim Reference.....

Address

.....

.....

.....

Details of your change

.....

.....

.....

.....



A Claim Form for Housing Benefit and Council Tax Benefit

Date of Issue What type of benefit do you want to claim.
 Receipt Date Council Tax 2nd Adult Rebate Housing Benefit
 Claim Reference

Part 1 About you and your partner

Do you have a partner who normally lives with you? No Yes If you have a partner, you must answer all the questions about them, as well as yourself. A 'Partner' includes a Civil Partner

	You	Your partner
Last name	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>
Tell us any other last names you have used	<input type="text"/>	<input type="text"/>
Title Mr, Mrs, Ms and so on.	<input type="text"/>	<input type="text"/>
Address you wish to claim for Do not tell us your partner's address if it is the same as yours.	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Postcode <input type="text"/>	Postcode <input type="text"/>
When did you move to this address?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you own this property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
National Insurance number You can find this on payslips or letters from social security or the tax office. We cannot decide your claim if we do not have your National Insurance number.	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>
	If you do not have a National Insurance number or cannot find it, tick this box <input type="checkbox"/>	If your partner does not have a National Insurance number or cannot find it, tick this box <input type="checkbox"/>
Your daytime phone number You do not have to tell us this, but it may help us to deal with your claim more quickly.	<input type="text"/>	<input type="text"/>
Your e-mail address	<input type="text"/>	<input type="text"/>

Part 1 About you and your partner – continued

You

Your partner

Have you or your partner claimed Housing Benefit or Council Tax Benefit before?

No Yes

No Yes

When did you claim?

 / /

When did they claim?

 / /

Which council did you claim from?

Which council did they claim from?

What name did you claim in?

What name did they claim in?

What address did you claim for?

 Postcode

What address did they claim for?

 Postcode

Have you told the council that paid your benefit that you have moved?

No Yes

No Yes

If you have moved home in the last 12 months, tell us your last address if it is different from above.

 Postcode

 Postcode

Were you the home owner, a private tenant or a boarder at this address?

Have you or your partner come to live in England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Islands or the Isle of Man in the last 2 years?

No
 Yes We will write to you about this.

No
 Yes We will write to you about this.

What is your nationality?

If your nationality is not British, on what date did you last arrive in the UK?

 / /
 / /

The UK is England, Northern Ireland, Scotland and Wales.

Please provide your Home Office documents and passport.

Part 1 About you and your partner – continued

You

Your partner

Are you or your partner in hospital at the moment?

No Yes

No Yes

When did you go in?

 / /

When did they go in?

 / /

When will you come out (if you know this)?

 / /

When will they come out (if you know this)?

 / /

Do you or your partner pay towards the upkeep of a student?

No Yes

No Yes

How much do you pay?

£

How much do they pay ?

£

How often?

Every

How often ?

Every

Are you or your partner a student or student nurse?

No Yes

No Yes

Do you study full time or part time?

Full time Part time

\

Full time Part time

How much student loan/grant do you receive?

£ a year

How much student loan/grant do you receive?

£ a year

Please tick if you or your partner are:

- an apprentice
- on youth training
- in legal custody
- severely mentally impaired
- registered blind
- long term sick or disabled

Further Information

If you are unable to deal with your financial affairs and you would prefer us to contact a relative or friend for further information please give details here.

Name

Address

Daytime phone No.

Part 2 About children

You may be able to get extra benefit for children you get Child Benefit for if they normally live with you and they are:

- under 16;
- aged 16 - 20 in Full Time Non-advanced Education, on Entry to Employment Course or Programme Led Pathways Course.

Do you want to claim for any children?

No **Go to Part 3.**

Yes Tell us about the children you want to claim for. If you want to claim for more than 6 children, use a separate sheet of paper.

If you are sending a separate sheet of paper, tick this box.

	First child	Second child	Third child
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Is your child male or female?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
Does this child live with you permanently?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Usual address if different from yours	<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"/>
Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>	<input type="text"/>

We need to see proof of this.

Is the child registered blind or getting Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay any child-minding costs for this child?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
For example, to a child-minder, nursery or after school club.	Tell us the name and registration number of the minder.	Tell us the name and registration number of the minder.	Tell us the name and registration number of the minder.
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	How much do you pay a week?	How much do you pay a week?	How much do you pay a week?
	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
	We need to see proof	We need to see proof	We need to see proof

Part 2 About children - continued

	Fourth child	Fifth child	Sixth child
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Is your child male or female?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
Does this child live with you permanently?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Usual address if different from yours	<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"/>
Child Benefit number required	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them? We need to see proof of this.	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the child registered blind or getting Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay any child-minding costs for this child? For example, to a childminder, nursery or after school club.	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
	Tell us the name and registration number of the minder. <input type="text"/>	Tell us the name and registration number of the minder. <input type="text"/>	Tell us the name and registration number of the minder. <input type="text"/>
	How much do you pay a week? <input type="text" value="£"/>	How much do you pay a week? <input type="text" value="£"/>	How much do you pay a week? <input type="text" value="£"/>
	We need to see proof	We need to see proof	We need to see proof

Part 3 About other people who live with you

Do any adults normally live with you and your partner?

By adults we mean people over 16 who nobody gets Child Benefit for.

No **Go to Part 4.**

Yes Tell us about all the adults, except your partner, who usually live with you. If you want to tell us about more than 3 people, use a separate piece of paper.

If you are sending a separate sheet of paper, tick this box

Are any of the people who normally live with you partners of each other?

No Yes

Tell us their names:

is the partner of

And

is the partner of

We need to know details about other people who live with you. You must get their consent before you complete their income details on this part of the form and they will need to sign at the end of this section. ALL of the people will need to sign to show their consent.

If income details are not provided, the highest non-dependant deduction will be taken

	First person	Second person	Third person
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<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"/>
Their relationship to you For example, aunt, brother, daughter, father, grandson, grandmother, stepdaughter, or friend.	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they a joint tenant with you?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they a joint owner with you?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
National Insurance Number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they get Income Support or income-based Jobseeker's Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do they get Disability Living Allowance or Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
	How much?	How much?	How much?
	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
Are they registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Part 3 About other people who live with you – continued

	First person	Second person	Third person
Are they a full-time student, a student nurse, a care worker, an apprentice or on a Youth Training Scheme	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week
Are they severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/>
	When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>
Do they work?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How many hours per week do they work?	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Tell us their earnings before deductions for things like tax and National Insurance. £ <input type="text"/>	Tell us their earnings before deductions for things like tax and National Insurance. £ <input type="text"/>	Tell us their earnings before deductions for things like tax and National Insurance. £ <input type="text"/>
	We need to see proof of their earnings.	We need to see proof of their earnings.	We need to see proof of their earnings.

Part 3 About other people who live with you – continued

	First person	Second person	Third person
Do they have any other income at all?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
This includes any benefits or allowances you have not told us about on this form and interest from savings and investments.	Name of first other income <input type="text"/>	Name of first other income <input type="text"/>	Name of first other income <input type="text"/>
	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week
	Name of second other income <input type="text"/>	Name of second other income <input type="text"/>	Name of second other income <input type="text"/>
	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week
	Name of third other income <input type="text"/>	Name of third other income <input type="text"/>	Name of third other income <input type="text"/>
	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week	How much is it before deductions? <input type="text"/> £ <input type="text"/> a week
	We need to see evidence of other incomes.	We need to see evidence of other incomes.	We need to see evidence of other incomes.

Data Protection

The Council will use this information to process a Housing or Council Tax benefit claim to which it relates. It will use the information for that purpose only.

In processing this information the Council may check its content and in doing so may disclose it to other sections within the Council or other relevant agencies.

You have the right to ask for a copy of the information we hold on you which is subject to the Data Protection Act 1998 (for which we may make a small charge) and to correct any inaccuracies.

I have read and understood the above and give my consent to use the information as appropriate.

1st Person Signature

2nd Person Signature

3rd Person Signature

Part 4 About being self-employed

Are you or your partner self-employed?

No Go to Part 5.

Yes Answer the questions on this page.
You must send us your trading accounts for the last financial year.

If you do not have accounts or have only recently started trading please contact us to request a self employed form.

You

Your partner

What type of business is it?

When did the business start?

 / /
 / /

What is the business address?

 Postcode

 Postcode

Are there any other partners in the business?

No Yes

Tell us their name and address.

 Postcode

No Yes

Tell us their name and address.

 Postcode

How many hours a week do you work?

Do you get a Business Start-Up Allowance?

No Yes

How much?

 £

How often?

 Every

No Yes

How much?

 £

How often?

 Every

Do you pay into a private pension scheme?

No Yes

How much?

 £

How often?

 Every

No Yes

How much?

 £

How often?

 Every

We must see proof of any earnings before we can decide how much benefit you can get. Do not delay in returning this form. If you have prepared accounts, please provide these and refer to checklist on Part 18.

Part 5 About working for an employer

Do you or your partner work for an employer?

No **Go to Part 6.**

Yes Answer the questions on this page. If you work for more than one employer, tell us about all the employers on another piece of paper and send it with this form.

If you are sending a separate sheet of paper, tick this box.

You

Your partner

What kind of work do you do?

What is your employer's name and address?

Postcode

Postcode

What is your payroll, employee or staff number?

When did you start this job?

 / /
 / /

Are you employed for a limited period?

No Yes

No Yes

When will you finish?

When will they finish?

 / /
 / /

How often do you get paid?

Every

Every

How much do you get paid?

£

£

Give details of any regular overtime, bonuses or commission?

How are you paid?

Cheque Cash

Cheque Cash

Direct into bank

Direct into bank

Other

Other

When was your last pay rise?

 / /
 / /

When will your next pay rise be?

 / /
 / /

How many hours a week do you work?

Are you getting Statutory Sick Pay (SSP), Statutory Maternity Pay (SMP) or Statutory Paternity Pay (SPP) from your employer at the moment?

No Yes

No Yes

Part 5 About working for an employer - continued

Are you getting any other sick pay or maternity pay from your employer at the moment?

You
No Yes

Your partner
No Yes

Do you pay into a private or company pension scheme?

No Yes

No Yes

How much?

£

How much?

£

How often?

Every

How often?

Every

We must see proof of any earnings before we can decide how much benefit you can get. Do not delay in returning this form. Please provide 2 monthly, 3 fortnightly or 5 weekly consecutive pay slips.

Part 6 About any other work

(including “Permitted Work” if you are in receipt of Incapacity Benefit)

Do you or your partner do any other work at all?

This could be voluntary work or any other work, even if it is not paid work.

No Go to Part 7

Yes Answer all the questions in this part.

You

Your partner

What kind of work do you do?

What is the name and address of the person you do this work for?

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

When did you start this work?

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

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

How many hours a week do you work?

Do you get paid?

If you only get expenses or tips, still tick ‘Yes’ and give details below.

No Yes

How much?

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

How often?

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

No Yes

How much?

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

How often?

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

Details of Expenses & Tips

<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"/>

How are you paid?

Cheque Cash

Direct into bank Other

Cheque Cash

Direct into bank Other

We must see proof of any earnings before we can decide how much benefit you can get. Do not delay in returning this form. Read the checklist at Part 18 to see what you can use as proof. If you do not have any wage slips, please ask your employer to fill in the Certificate of Earnings at the end of this application form. Please provide 2 monthly, 3 fortnightly or 5 weekly consecutive pay slips.

Part 7 About Income Support, income-based Jobseekers Allowance and Pension Credit

Are you or your partner getting or waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance or Pension Credit?

No Go to Part 8.

Yes Answer all the questions in this part.

You

If you or your partner are not currently working when did you last work?

From

To

Are you or your partner getting Income Support, income-based Jobseeker's Allowance or Pension Credit at the moment?

No Yes

When did you start getting it?

Are you or your partner waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance or Pension Credit?

No Yes

When did you claim?

Have you or your partner got a job to go to in the next 3 months?

Date intending to start

Your partner

From

To

No Yes

When did they start getting it?

No Yes

When did they claim?

Date intending to start

Part 8 About benefits, pensions and tax credits

Are you or your partner getting any benefits or waiting to hear about benefits you have claimed?

No Go to Part 9

Yes Tell us about the benefits below.

You

Do you or your partner get Disability Living Allowance?

No Yes

How much?

Care: £

Mobility: £

Do you or your partner get Attendance Allowance?

No Yes

Your partner

No Yes

How much ?

Care: £

Mobility: £

Please note that the income of Disability Living Allowance and Attendance Allowance are not used in the calculation of housing benefit and council tax benefit but the information is needed to ensure additional premiums are awarded where appropriate.

Part 8 About benefits, pensions and tax credits - continued

You

Your partner

Does anyone get Carer's Allowance for looking after you or your partner?

No Yes

No Yes

Have you or your partner ever claimed Carer's Allowance?

No Yes

No Yes

Still tick 'Yes' if you were not paid any Carer's Allowance. This could have been because you were better off getting another social security benefit.

Do you or your partner have a vehicle from a Mobility scheme?

No Yes

No Yes

Read the list of benefits below and tell us about any you or your partner are getting now or have claimed.

- Incapacity Benefit
- Industrial Death Benefit
- Maternity Allowance
- Severe Disablement Allowance
- Widow's or Widower's Benefits
- Carer's Allowance
- Bereavement Allowance
- Adoption Pay
- Guardian's Allowance/Fostering Allowance
- Industrial Injuries Disablement Benefit
- Contribution-based Jobseeker's Allowance
- Retirement Pension
- War Disablement Benefit, War Pension or War Widow's Pension
- Working Tax Credit
- Child Tax Credit
- Pension Credits

If you are getting or have claimed any benefit that is not listed, tell us about it on a separate page and send it with the form.

If you are sending a separate sheet of paper, tick this box.

You

Your partner

The name of the benefit

Waiting to hear

Getting now

How much are you paid?

£

£

How often are you paid?

Every

Every

How are you paid?

The name of the benefit

Waiting to hear

Getting now

How much are you paid?

£

£

How often are you paid?

Every

Every

How are you paid?

Part 8 About benefits, pensions and tax credits - continued

	You	Your partner
The name of the benefit	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/>	<input type="checkbox"/>
How much are you paid?	£ <input type="text"/>	£ <input type="text"/>
How often are you paid?	<input type="text" value="Every"/>	<input type="text" value="Every"/>
How are you paid?	<input type="text"/>	<input type="text"/>
The name of the benefit	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/>	<input type="checkbox"/>
How much are you paid?	£ <input type="text"/>	£ <input type="text"/>
How often are you paid?	<input type="text" value="Every"/>	<input type="text" value="Every"/>
How are you paid?	<input type="text"/>	<input type="text"/>
The name of the benefit	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/>	<input type="checkbox"/>
How much are you paid?	£ <input type="text"/>	£ <input type="text"/>
How often are you paid?	<input type="text" value="Every"/>	<input type="text" value="Every"/>
How are you paid?	<input type="text"/>	<input type="text"/>

We must see proof of any money coming in before we can decide how much benefit you can get. Do not delay in returning this form. Read the checklist at Part 18 to see what you can use as proof. Full notifications must be provided.

Part 9 About other money coming in

Do you or your partner, or any children you are claiming for, have any money coming in (or expect to have some money coming in) that you have not already told us about on this form?

This includes occupational pensions and private pensions; maintenance or child support for you, your partner or any of the children you have told us about on this form; money from a trust fund; training allowances; student grant or loan; and any cash payments. Also tell us about any money you get from people living in your house as boarders, lodgers or subtenants. You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust.

No Go to Part 10

Yes Answer the questions on this page.

Other money 1

What is the money for?

Who gets it?

How much do you/they get?

How often?

When did you/they start getting this income?

When is the income likely to go up?

How are you/they paid?

Cheque Cash

Direct into bank Other

Other money 2

What is the money for?

Who gets it?

How much do you/they get?

How often?

When did you/they start getting this income?

When is the income likely to go up?

How are you/they paid?

Cheque Cash

Direct into bank Other

Part 9 About other money coming in - continued

Other money 3

What is the money for?

Who gets it?

How much do you/they get?

How often?

When did you/they start getting this income?

When is the income likely to go up?

How are you/they paid?

Cheque Cash
Direct into bank Other

Other money 4

What is the money for?

Who gets it?

How much do you/they get?

How often?

When did you/they start getting this income?

When is the income likely to go up?

How are you/they paid?

Cheque Cash
Direct into bank Other

Does anyone owe money to you or your partner?

No Yes

What for?

How much?

Who is it owed to?

We must see proof of any money coming in before we can decide how much benefit you can get. Do not delay in returning this form.

Read the checklist at Part 18 to see what you can use as proof.

Full notifications must be provided.

Part 10 About bank/building society accounts, capital, savings and investments

Do you or your partner have any bank/building society accounts, capital, savings, investments in the UK or abroad and land or property (other than the home you live in)?

This includes current accounts (including overdrawn accounts) and savings accounts with a bank or building society, post office accounts, premium bonds, National Savings Certificates or stocks and shares.

No Go to Part 11.

Yes Answer all the questions in this part. We must see proof of all the capital, savings and investments. Read the checklist at Part 18 to see what you can use as proof.

Do you or your partner have any bank accounts?

No Yes

Tell us about **bank accounts**. If there are more than 4 bank accounts, tell us about the others on a separate piece of paper and send it with this form.

If you are sending a separate sheet of paper, tick this box.

Name of bank	Account number
<input type="text"/>	<input type="text"/>

Whose name is the account in?	How much is in the account?
<input type="text"/>	£ <input type="text"/>

Name of bank	Account number
<input type="text"/>	<input type="text"/>

Whose name is the account in?	How much is in the account?
<input type="text"/>	£ <input type="text"/>

Name of bank	Account number
<input type="text"/>	<input type="text"/>

Whose name is the account in?	How much is in the account?
<input type="text"/>	£ <input type="text"/>

Name of bank	Account number
<input type="text"/>	<input type="text"/>

Whose name is the account in?	How much is in the account?
<input type="text"/>	£ <input type="text"/>

Do you or your partner have any building society accounts?

No Yes

Tell us about **building society accounts**. If you have more than 4 building society accounts, tell us about the others on a separate piece of paper and send it with this form.

If you are sending a separate sheet of paper, tick this box.

Name of building society	Account number
<input type="text"/>	<input type="text"/>

Whose name is the account in?	How much is in the account?
<input type="text"/>	£ <input type="text"/>

Part 10 About bank/building society accounts, capital, savings and investments – continued

Do you or your partner have any building society accounts?

(continued)

Name of building society

Whose name is the account in?

Name of building society

Whose name is the account in?

Name of building society

Whose name is the account in?

Account number

How much is in the account?

Account number

How much is in the account?

Account number

How much is in the account?

Do you or your partner have any post office accounts?

This includes savings accounts and Girobank accounts.

No Yes

Tell us about **post office accounts**. If you have more than 4 post office accounts, tell us about the others on a separate piece of paper and send it with this form.

If you are sending a separate sheet of paper, tick this box.

Type of account

Whose name is the account in?

Type of account

Whose name is the account in?

Type of account

Whose name is the account in?

Type of account

Whose name is the account in?

Account number

How much is in the account?

Account number

How much is in the account?

Account number

How much is in the account?

Account number

How much is in the account?

Part 10 About bank/building society accounts, capital, savings and investments – continued

Do you or your partner have any premium bonds?

No Yes

Value

£

Do you or your partner have any National Savings Certificates?

No Yes

Issue number

Value

£

How many?

Issue number

Value

£

How many?

Issue number

Value

£

How many?

Issue number

Value

£

How many?

Do you or your partner have any stocks, shares, bonds or unit trusts?

No Yes

Company name

How many?

Company name

How many?

Company name

How many?

Company name

How many?

Part 10 About bank/building society accounts, capital, savings and investments – continued

Do you or your partner, have any other capital, savings or investments?

Tell us about any TESSAs or ISAs, TOISAs, compensation or any other money you have not told us about on this form.

No Yes

Tell us about this.

Have you or your partner delayed claiming the State Pension and chosen to take a lump sum payment?

No Yes

if yes, the gross amount of lump sum awarded

£

Have you or your partner received a Far Eastern Prisoner of War payment?

No Yes

Have you or your partner received a compensation payment made to victims of atrocities that happened during the Second World War?

No Yes

Do you or your partner own or partly own any property, land or timeshare, other than the home you live in, either in the UK or abroad?

No Yes

Tick 'Yes' even if you have a mortgage or loan for the property, land or timeshare.

What is the address?

Postcode

How much is it worth?

£

If you have a mortgage or loan for this, how much is left to repay?

£

We must see proof of your bank, building society and post office accounts and other savings and investments before we can decide how much benefit you can get. Do not delay in returning this form.

Please read the checklist at Part 18 to see what proof to provide.

Part 11 About rent

Are you charged rent for your home?

No Go to Part 14.

Yes Answer the next questions

When did you start renting your home?

When did you move to this address?

If you have not moved in yet, tell us when you expect to move in.

Does anyone else share the rent with you and your partner? eg joint tenant

No Yes

Tell us their names and their relationship to you and your partner (if applicable)

How much of the rent do they pay and how often?

What sort of tenancy do you have?

For example, shorthold, tied rent or something like this.

How long is the tenancy for?

 to

How much rent do you pay?

 every

(week/fortnight/4 weeks/month)

Has your rent changed in the last 12 months?

No Yes Send us proof of the date it changed, and how much it changed.

When is the next rent increase due?

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

No Yes

Are you under 22 and have left Local Authority Care?

No Yes

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

No Yes

How many?

Are you behind with your rent?

No Yes

How many weeks?

We must see proof of your current rent and tenancy before we can decide how much benefit you can get. Do not delay in returning this form. Read the checklist at Part 18 to see what you can use as proof.

Part 11 About rent – continued

What is your landlord's name and address?

By landlord we mean the person or organisation who owns the property you live in.

Postcode

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

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

Postcode

Does your landlord live in your building?

No Yes

Are you or your partner related in any way to your landlord/landlady or their partner?

No Yes

Is your landlord your (or your partner's) former partner?

No Yes

Is your landlord your employer or your partner's employer?

No Yes

Is your landlord the parent of any children you or your partner are responsible for?

No Yes

Are you or your partner the trustee, or beneficiary of a trust which is your landlord?

No Yes

Do you or your partner pay rent to a trust of which your child (children) is/are beneficiaries?

No Yes

Are you or your partner a director of a company which is your landlord?

No Yes

If you have answered 'Yes' to any question in this section explain the relationship with your landlord here?

--

Did you previously own the property you now rent?

No Yes

Do you have to live in your accommodation because it is a condition of your job?

No Yes

Part 11 About rent – continued

Are you living away from home at the moment?

No Yes

Tell us why you are not living at home.

When did you last live at home?

When do you expect to go back home?

Tell us the address of where you are living at the moment.

Postcode

If your home has been sub-let, tell us who lives there now.

Who pays the Council Tax on your home?

Please tick:

You and your partner

Your landlord

Someone else

Tell us who pays the Council Tax.

Do you pay water charges direct to the water authority?

No Yes

Please tick to show if the property is let as:

Furnished

Partly furnished

Minimally furnished

Unfurnished

Is your accommodation centrally heated?

No Yes

Who decorates the inside of your accommodation?

Your landlord

You

Don't know

Has your home been built or adapted for people with disabilities?

No Yes

Part 11 About rent – continued

Does your rent include money for:

Meals

No

Yes

How much?

£

Which meals are included?

Heating

No

Yes

How much?

£

Lighting

No

Yes

How much?

£

Hot water

No

Yes

How much?

£

Fuel for cooking

No

Yes

How much?

£

Laundry facilities

No

Yes

How much?

£

Personal laundry

No

Yes

How much?

£

Gardening

No

Yes

How much?

£

Garage or parking space

No

Yes

How much?

£

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

No

Yes

Cleaning of accommodation

No

Yes

How much?

£

Cleaning of shared areas

No

Yes

How much?

£

Lighting of shared areas

No

Yes

How much?

£

TV

No

Yes

How much?

£

Alarm System

No

Yes

How much?

£

Warden/Porter

No

Yes

How much?

£

Personal care and support

No

Yes

How much?

£

Do you pay any service charges separate from your rent?

No

Yes

How much?

£

What for?

Part 12 About where you live

What sort of building do you live in?

Detached house	<input type="checkbox"/>	Flat in a house	<input type="checkbox"/>	Hotel	<input type="checkbox"/>
Semi-detached house	<input type="checkbox"/>	Flat in a block	<input type="checkbox"/>	Board and lodgings	<input type="checkbox"/>
Terraced house	<input type="checkbox"/>	Flat over a shop	<input type="checkbox"/>	Caravan, mobile home or houseboat	<input type="checkbox"/>
Maisonette	<input type="checkbox"/>	Bedsit or rooms	<input type="checkbox"/>	Residential nursing home	<input type="checkbox"/>
Bungalow	<input type="checkbox"/>	Hostel	<input type="checkbox"/>	Residential care home	<input type="checkbox"/>
Other	<input type="checkbox"/>	- Give details <input type="text"/>			

Is there more than one floor?

No Yes

How many floors are there?

Which floors do you live on?

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

Do you and your household occupy only part of the building?

No Yes

Where in the building do you live?

At the front In the middle At the back

How many rooms are there in the building?

(Please complete all boxes)

	In the whole building?	Just for you and your household?	That you share with other people?
Living rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedsitting rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms or shower rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms (please state what they are for)	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you use your home for business?

No Yes

Do you have a main home somewhere else?

No Yes

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

What is the address?

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

How much do you pay for this home?

£

Part 13 How you will be paid

We will pay your Housing Benefit straight into your bank or building society account.

(Unfortunately, we cannot pay into Post Office Card Accounts).

Please complete the details below:-

Name of bank or building society

Address

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

Postcode

Whose name is the account in?

Account number

Sort code

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

RoI Number

Please note: tenants affected by the Local Housing Allowance will normally be paid direct to themselves and then be responsible for paying their landlord. However, we will consider making direct payments to landlords for tenants who are unable to manage their own financial affairs, or who are not capable of taking responsibility for the payment of their own rent, or if they are 8 weeks or more in arrears with their rent.

Housing Association and Hostel Tenants only

Paying benefit direct to landlord:

If you want us to pay your benefit straight to your landlord you must sign this declaration.

Please pay my Housing Benefit straight to my landlord. I understand that:

- I must always tell you about any change in circumstances;
- If I do not tell you about any change of 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 of circumstances.

Signature:

Dated:

Part 14 Declaration

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

Please read this declaration carefully before you sign and date it.

- I **declare** that the information I have given on this form is correct and complete.
- I understand that if I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- I agree that 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 the law. I agree that you may share information with other Departments within the Council.
- I understand that 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 money, if the law allows this.
- I **know** that I must let you know in writing about any change in my circumstances which might affect my claim.

Signature of person claiming

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

Signature of the person

Relationship to the person claiming

Date

Part 15 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.

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 we have made a decision on your claim or not; and
- if we need further information to make a decision on your claim.

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. And 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 the Borough Council of King's Lynn & West Norfolk permission to share my information about the progress of my Housing Benefit claim with my landlord or their representative.

Signature

Date

Address

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

Postcode

Part 16 Anything else you need to tell us

Use this box to tell us anything else you think we should know about. Use a separate sheet and attach it to this form if you need to.

If you are sending a separate sheet of paper, tick this box.

Part 18 Checklist

Please tick to tell us what proof you are sending with this form. We must see **original** documents, not copies.

If you do not provide all the proof we need, we might 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, **we will not be able to pay you any benefit until we have all the proof.**

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

	With form	Will send later		With form	Will send later
Your payslips			Pension Credit Notification		
Your partner's payslips			War Pension		
Self employed accounts			Working Tax Credit Notification		
Payslips for part-time fireman			Children's Tax Credit Notification		
Payslips for territorial/reserves			Maintenance Court Order		
Private Pension contributions			Maternity Allowance		
Income Support			Child Care Costs		
Jobseekers Allowance (Income Based)			Rent from Lettings		
Jobseekers Allowance (Contribution Based)			Rent from Boarders		
Enterprise Allowance Notification			Home Income Plan		
Youth Training Scheme			Building Society Passbook		
Student Grant Assessment			Share Certificates		
Carer's Allowance			National Savings Certificate		
Incapacity Benefit			Bank Statements (3 months required)		
Attendance Allowance			Other Savings and Investments		
Severe Disablement Allowance			Any Other Income		
Disability Living Allowance			Non-Dependants Income		
Employers Pension			Tenancy Agreement		
Other Pension			Rent Book/Receipts (current rent)		
State Retirement Pension			Letter from Landlord confirming rent paid		

We must have proof of identity for you and your partner to assess your claim. Please send at least two original documents each for you and your partner from the following list.

PROOF OF IDENTITY

	With form	Will send later		With form	Will send later
Birth Certificate (Full/Short)			Home Office Standard acknowledgement letter		
Driving Licence (Full/Current)			Bank Statements		
National Insurance Card			Medical Card		
Passport (Current & Valid)			Wage Slips (current employer)		
Marriage Certificate			Utility Bill (in your name for the last quarter at the address where you are claiming benefit)		
Certificate of Employment in HM Forces/ Merchant Navy			Life Assurance/Insurance policies		
Divorce /Annulment Papers			Letter from Solicitor/Social Worker/Probation Officer/Inland Revenue		
UK residence permit			Correspondence from DWP/Job Centre Plus/ Pension Service		
Identity card issued by EEC/EEA Member State					

Equal Opportunities Policy

Monitoring Information

The Borough Council of King's Lynn & West Norfolk is committed to an Equal Opportunities Policy to promote equality and fair treatment in the provision of its services.

In order to monitor the effectiveness of this policy, all customers completing a Benefit application are asked to complete this part of the form. You do not have to provide this information but it would help us if you do. It will not affect your Benefit application in any way.

This information will be used solely to measure our performance against our Equal Opportunity standards.

Monitoring Information (please tick appropriate box)

1. My gender is: Male Female

2. I would describe my ethnic origin as:

Please choose one section from **A** to **E** then tick the appropriate box to indicate your cultural background.

A. White

British

Irish

Any other White background

(please give details below)

B. Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other White background

(please give details below)

C. Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background

(please give details)

D. Black or Black British

Black Caribbean

Black African

Any other Black background

(please give details below)

E. Chinese or other ethnic group

Chinese

Any other Ethnic Group

(please give details below)

3. **Disability**

Do you have a long term illness or disability which limits your daily activities in any way?

Yes No

Thank you for helping us by completing this section.

Certificate of Earnings - Private and Confidential

Revenues and Customer Services, Borough Council of King's Lynn & West Norfolk, PO Box 26, King's Lynn, Norfolk PE30 1PX

Name: National Insurance Number:

Address:

Occupation Works/Payroll Number

Please assist your employee by completing the appropriate sections below Weekly paid - last 5 weeks Monthly paid - last 2 months Fortnightly - last 3 two-weekly

Week/Month Ending	Gross Pay	Tax Deduction	National Insurance Deduction	Pension Deduction	Other Deductions	Net Pay	Does pay include any of the following:- Working Tax Credit, Holiday, Arrears, Bonus, Statutory Sick Pay, Expenses

Please state if paid weekly, four weekly, monthly, fortnightly Average number of hours worked each week

Please the method of payment Cheque Cash Direct into Bank Other (If 'Other' please describe)

Date Employment commenced Gross Year to date £

If there has been a bonus paid in the last 12 months please show below. Please box if estimated figures are given

Amount £ Dates of Payments: Frequency of Bonus:

Data Protection

The Borough Council of King's Lynn & West Norfolk will use your information for benefit purposes. We may share the information you have provided with the government departments or agencies and local authorities to check the accuracy of the information, as permitted by law. You have a right to ask for a copy of the information we hold on you, which is subject to the Data Protection Act 1998 (for which we may make a small charge) and to correct any inaccuracies.

I certify that the above named is employed by me and received salary/wages (including overtime, bonus, commission and any other payments) as indicated above.

Signed: Signatory's Position:

Name and Address of Employer: Employer's Official Stamp

Tel. No:



Proof of Rent

This form should be filled in by your landlord/agent if you are a private tenant and have no written tenancy agreement.
DO NOT DELAY IN RETURNING YOUR APPLICATION FORM, THEN RETURN THIS PAGE AS SOON AS YOUR LANDLORD/AGENT HAS COMPLETED & SIGNED IT.

Name of tenant/boarder (Mr, Miss, Mrs Ms)

Address of above named:

If you are the Agent, the Landlord's full name must also be given

Landlords name: Agents name:

Business Business

Address: Address:

Tel no: Tel no:

As landlord/agent please confirm the following details of the tenancy:-

1. Date tenancy started

2. Date of occupation

3. Is this a joint tenancy Yes No How many tenants

4. Are you related to the tenant Yes No What is your relationship?

5. Total amount of rent payable Is this charged weekly / monthly / 4 weekly?

6. Date of last rent increase

7. Does the rent include any of the following:-

Council Tax	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Water Rates	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Heating	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Hot Water	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Cooking Facilities	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Lighting	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Power	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Laundry	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Care & Support Charges	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>
Meals	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="text"/>

If Yes. which of the following? Breakfast Lunch Evening Meal

8. How much furniture do you provide? All Some Very Little None

9. Who is responsible for interior decoration Landlord Tenant

10. Is the property:- Detached Semi-detached Terraced

11. Does the property have a garage? Yes No

12. Is the property centrally heated? Yes No

DECLARATION

I confirm the above information is true and correct.

You can make any enquiries you need to check the details I have given on this form.

Landlords/Agents Signature Date

Borough Council of
**King's Lynn &
West Norfolk**



www.west-norfolk.gov.uk

Revenues and Customer Services

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