



Date requested

Date sent on

(Please return within one month of this date)



P0 Box 60
Newport
South Wales
NP20 4XN

A claim form for Housing Benefit and Council Tax Benefit

Before you fill in this form, please see the help notes at the back.

If you are just claiming Second Adult Rebate, please tick here and only fill in parts 1, 4, 16 and 17 of this form. (See the checklist at Part 21 for details.)

Are you (please tick one box)

a private tenant? an owner-occupier?

a housing association or social landlord tenant?

Part 1 About you and your partner

Do you have a partner who normally lives with you?
We use partner to mean:

- a person you are married to or a person you live with as if you are married to them; or
- a civil partner or a person you live with as if you are civil partners.

No

Yes **If you have a partner, you must answer all the questions about them, as well as yourself.**

	You	Your partner
Surname or family name	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Other names	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Any other names you have used	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Title (Mr, Mrs, Ms, other)	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>
Address, including room number if you have one <small>Do not tell us your partner's address if it is the same as yours.</small>	<input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>
Your daytime phone number	Code <input style="width: 15%;" type="text"/> Number <input style="width: 75%;" type="text"/>	Code <input style="width: 15%;" type="text"/> Number <input style="width: 75%;" type="text"/>
Your email address	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Date of birth	<input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/>
National Insurance (NI) number <small>You can find this on payslips or letters from the Department for Work and Pensions or the tax office. We cannot normally decide your claim if we do not have your NI number. We need to see proof of this.</small>	Letters <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> Numbers <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> Letter <input style="width: 20%;" type="text"/> <input type="checkbox"/> If you do not have a National Insurance number, or cannot find it, tick this box.	Letters <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> Numbers <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> <input style="width: 20%;" type="text"/> Letter <input style="width: 20%;" type="text"/> <input type="checkbox"/> If your partner does not have a National Insurance number, or cannot find it, tick this box.

You

Your partner

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

No
 Yes Please tell us about it below.

No
 Yes Please tell us about it below.

When did you last claim?

 / /
 / /

Which council did you claim from?

What name did you use for the claim?

What address did you claim for?

 Postcode

 Postcode

If you have moved from this address, have you told the council you claimed from?

No
 Yes

No
 Yes

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

 Postcode

 Postcode

Tell us whether you were the homeowner, a private tenant, a council tenant or a lodger at this address.

We need to see proof of your and your partner's identity and NI number. See the checklist at Part 21.

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 two years?

No
 Yes We may write to you about this.

No
 Yes We may write to you about this.

What is your nationality?

If your nationality is not British, on what date did you last enter and apply to stay in the UK?

 / /
 / /

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

Are you or your partner in hospital at the moment?

No
 Yes Please tell us about it below.

No
 Yes Please tell us about it below.

When did you go in?

 / /
 / /

When will you come out, if you know?

 / /
 / /

Do you or your partner get Disability Living Allowance?

No
 Yes How much?

No
 Yes How much?

Care £

Care £

Mobility £

Mobility £

You

Your partner

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

No
Yes

No
Yes

Please provide proof of this.

Do you or your partner get Attendance Allowance?

No
Yes We need to see proof of this.

No
Yes We need to see proof of this.

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

No
Yes We need to see proof of this.

No
Yes We need to see proof of this.

Have you or your partner been told that you are entitled to Carer's Allowance, even if you do not receive it, because you are getting another benefit instead?

No
Yes We need to see proof of this.

No
Yes We need to see proof of this.

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

No
Yes How much do you pay and how often?

No
Yes How much do they pay and how often?

£ every

£ every

Are you or your partner a student?

No
Yes Tell us if this is full- or part-time.

No
Yes Tell us if this is full- or part-time.

By **student** we mean anyone who is on a course of study at an educational establishment, including student nurses.

Full-time Part-time

Full-time Part-time

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

Part 2 About your ethnic origin

You do not have to answer the following question about your ethnic origin, but if you do it will help us to make sure that everyone who is entitled to benefit is claiming.

What ethnic origin are you? Please choose one of the following and fill in the 'other' box if appropriate.

<p>White</p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Any other white background <input type="text"/></p>	<p>Asian or</p> <p><input type="checkbox"/> Indian</p> <p>Asian British</p> <p><input type="checkbox"/> Pakistani</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Any other Asian background <input type="text"/></p>
<p>Mixed</p> <p><input type="checkbox"/> White and black Caribbean</p> <p><input type="checkbox"/> White and black African</p> <p><input type="checkbox"/> White and Asian</p> <p><input type="checkbox"/> Any other mixed background <input type="text"/></p>	<p>Black or</p> <p><input type="checkbox"/> Caribbean</p> <p>black British</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Any other black background <input type="text"/></p> <p>Other ethnic group</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Any other black background <input type="text"/></p>

We need to know about any children in your household who are:

- under 16;
- aged 16 or 17 and registered for work or youth training; or
- aged 16 and over, but still under 20, and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ (advanced) who you receive Child Benefit for.

Are there any children in your household as described above?

No Go to **Part 4**.

Yes If there are more than three children, use a separate sheet of paper to tell us all the information we ask for on this page and send it with the form.

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"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is the child's sex?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
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?

No
 Yes We need to see proof of this.

No
 Yes We need to see proof of this.

No
 Yes We need to see proof of this.

Does the child get Disability Living Allowance?

No
 Yes How much?

No
 Yes How much?

No
 Yes How much?

Care £

£

£

Mobility £

£

£

Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?

No
 Yes Please tell us about it below.

No
 Yes Please tell us about it below.

No
 Yes Please tell us about it below.

Tell us the name and registration number of the minder.

How much do you pay a week?

£ a week

£ a week

£ a week

We need to see proof of this.

We need to see proof of this.

We need to see proof of this.

Now tell us about all the people who usually live with you and your partner. Do not tell us about people who just share a hall, bathroom or toilet with you. If you want to tell us about more than three people, use a separate sheet of paper.

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

Do any adults usually live with you and your partner? **No** Go to Part 5.

By adults we mean people aged 16 or over who nobody gets Child Benefit for. **Yes** Fill in this section.

	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 or your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>

Some examples are aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner, subtenant, lodger, boarder or friend.

	First person	Second person	Third person
Do they get Income Support, income-based Jobseeker's Allowance, Pension Credit or income-related Employment and Support 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"/>

	First person	Second person	Third person
Do they get Disability Living Allowance or Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £ <input type="text"/> a week

	First person	Second person	Third person
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"/>
Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?	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"/>

	First person	Second person	Third person
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. How much? <input type="text"/> £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. How much? <input type="text"/> £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. How much? <input type="text"/> £ <input type="text"/> a week

	First person	Second person	Third person
Does this include money for food?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

	First person	Second person	Third person
Does this include money for heating?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

	First person	Second person	Third person
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"/>

	First person	Second person	Third person
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"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>

	First person	Second person	Third person
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.

	First person	Second person	Third person
When did they go in?	<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"/>
When are they due to come out (if you know)?	<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"/>

	First person	Second person	Third person
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. <input type="text"/> £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. <input type="text"/> £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. <input type="text"/> £ <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.

	First person	Second person	Third person
Do they have any other income at all? Make sure you tell us about all other income they have. This includes any benefits or allowances you have not told us about on this form and interest from savings and investments.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
1 Where does this income come from? How much is it before deductions?	<input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
2 Where does this income come from? How much is it before deductions?	<input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
3 Where does this income come from? How much is it before deductions?	<input type="text"/> £ <input type="text"/> We need to see proof of their income.	<input type="text"/> £ <input type="text"/> We need to see proof of their income.	<input type="text"/> £ <input type="text"/> We need to see proof of their income.
Are any of the people who normally live with you married to each other, civil partners, or living together as if they are married or civil partners? We call these people partners.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their names below.		
	<input type="text"/> is the partner of <input type="text"/>		
	<input type="text"/> is the partner of <input type="text"/>		

Part 5 About Income Support, Jobseeker's Allowance, Pension Credit and Employment and Support Allowance

Are you or your partner getting or waiting to hear about a claim for Income Support, Jobseeker's Allowance, Pension Credit or Employment and Support Allowance.

No Go to Part 6.
Yes Answer all the questions in this part and then go to Part 6.

	You	Your partner
Are you or your partner actually getting any of the above benefits?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you start getting it? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they start getting it? <input type="text"/> / <input type="text"/> / <input type="text"/>
Are you or your partner still waiting to hear about a claim for any of the above benefits?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you claim? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they claim? <input type="text"/> / <input type="text"/> / <input type="text"/>
Which benefit are you or your partner getting or waiting to hear about?	<input type="checkbox"/> Income Support <input type="checkbox"/> Jobseeker's Allowance <input type="checkbox"/> Pension Credit <input type="checkbox"/> Employment and Support Allowance	<input type="checkbox"/> Income Support <input type="checkbox"/> Jobseeker's Allowance <input type="checkbox"/> Pension Credit <input type="checkbox"/> Employment and Support Allowance

We must see proof of your benefits, allowances or pension before we can decide how much benefit you can get. Read the checklist at Part 21 to see what you can use as proof.

Are you or your partner self-employed?

No Go to Part 7.

Yes Answer the questions on this page.
 You must send us your trading accounts for the last financial year.
 If you have only recently set up the business and do not have a full year's accounts, we will need to see some other proof of your income. We will write to you about this.

You	Your partner
-----	--------------

What kind of work do you do?

When did the business start?

 / /
 / /

What is the business address?

Postcode

Postcode

Do you have any business partners?

No

Yes Tell us their name and address.

No

Yes Tell us their name and address.

Postcode

Postcode

How many hours a week do you usually work?

Do you get a Business Start-up Allowance?

No

Yes How much and how often?

£		every
---	--	-------

No

Yes How much and how often?

£		every
---	--	-------

Do you pay into a private pension scheme?

No

Yes How much and how often?

£		every
---	--	-------

No

Yes How much and how often?

£		every
---	--	-------

We must see proof of your earnings before we can decide how much benefit you can get. Read the checklist at Part 21 to see what you can use as proof.

Do you or your partner work for an employer?

No Go to Part 8.

Yes Answer the questions on this page. If you or your partner work for more than one employer, tell us about all the employers on a separate sheet 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?	<input type="text"/>	<input type="text"/>
What is your employer's name and address?	<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 job?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is your payroll, employee or staff number?	<input type="text"/>	<input type="text"/>
Are you employed for a limited period?	No <input type="checkbox"/> Yes <input type="checkbox"/> When will you finish? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When will you finish? <input type="text"/> / <input type="text"/> / <input type="text"/>
How much do you get paid and how often?	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
How are you paid, for example, in cash, by cheque or straight into a bank or building society account?	<input type="text"/>	<input type="text"/>
When was your last pay rise?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When will your next pay rise be?	<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 usually work?	<input type="text"/>	<input type="text"/>
Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you getting any other sick pay or maternity pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? £ <input type="text"/> every <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? £ <input type="text"/> every <input type="text"/>

We must see proof of any earnings before we can decide how much benefit you can get. Read the checklist at Part 21 to see what you can use as proof. If you get tips or bonuses, tell us about these in Part 8.

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 9.

Yes Answer the questions in this section.

	You	Your partner
What other work do you do?	<input type="text"/>	<input type="text"/>
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"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
When did you start this work?	<input type="text" value=" / /"/>	<input type="text" value=" / /"/>
How many hours a week do you usually work?	<input type="text"/>	<input type="text"/>
Do you get paid? If you only get expenses or tips, still tick Yes and give details.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
How much do you get paid and how often?	£ <input type="text"/> every	£ <input type="text"/> every

We must see proof of any earnings before we can decide how much benefit you can get. Read the checklist at Part 21 to see what you can use as proof.

Are you or your partner getting any benefits or waiting to hear about benefits you have claimed? No Go to Part 10.
Yes

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

- Child Benefit
- Child Tax Credit
- Fostering Allowance
- Jobseeker’s Allowance
- Employment Support Allowance
- Maternity Allowance
- Working Tax Credit
- Incapacity Benefit
- Industrial Injuries Disablement Benefit
- Industrial Death Benefit
- Carer’s Allowance
- Severe Disablement Allowance
- Statutory Sick Pay
- Statutory Maternity Pay
- Statutory Paternity Pay
- Adoption Pay
- Bereavement Allowance
- Guardian’s Allowance
- State Pension
- War Disablement Benefit
- War Pension or War Widow’s Pension
- Widowed Parent’s Allowance
- Armed Forces Compensation Scheme (AFCS)
- Any other state benefit
- Pension Credit

If you are getting or have claimed any benefit that is not listed, tell us about it on a separate sheet of paper 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 or pension	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method?	<input type="checkbox"/> How much, how often and by what method?
	£ every by	£ every by
The name of the benefit or pension	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method?	<input type="checkbox"/> How much, how often and by what method?
	£ every by	£ every by
The name of the benefit or pension	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method?	<input type="checkbox"/> How much, how often and by what method?
	£ every by	£ every by

Do you or your partner

- have any money coming in (or expect to have some money coming in) that you have not already told us about?
- have you or your partner delayed receiving any other money?

No Go to **Part 11**.

Yes Answer the questions on this page.
You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust, the MacFarlane Trust or the Skipton Fund.

This includes occupational pensions, work pensions, and private pensions, pension protection fund payments, 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, a 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.

	Other money 1	Other money 2	Other money 3
What is the money for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets it?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do they get?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

This should be the gross amount (before any deductions are made).

How often?	<input type="text"/> Every	<input type="text"/> Every	<input type="text"/> Every
How is this paid?	<input type="text"/>	<input type="text"/>	<input type="text"/>
When did they start getting this income?	<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"/>
When is the income likely to go up?	<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"/>

Does anyone owe money to you or your partner?

No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> Tell us about it below.	Yes <input type="checkbox"/> Tell us about it below.	Yes <input type="checkbox"/> Tell us about it below.

What for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Who is it owed to?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you or your partner expecting to get any money in the next 12 months?

No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> Tell us about it below.	Yes <input type="checkbox"/> Tell us about it below.	Yes <input type="checkbox"/> Tell us about it below.

For example, a redundancy payment or a payment instead of notice or holiday.

What for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much?	£ <input type="text"/>	£ <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. Read the checklist at Part 21 to see what you can use as proof.

We need to know if you or your partner have any bank accounts, savings, investments or property in the UK or abroad.

This includes cash, current accounts and savings accounts with a bank or building society, post office accounts, Premium Bonds, National Savings Certificates, and stocks and shares.

Do you or your partner have any of the following?

Bank accounts

No

Yes Tell us about **bank accounts**. If there are more than two 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

Whose name is the account in?

How much is in the account?

 £

Name of bank

Account number

Whose name is the account in?

How much is in the account?

 £

Building Society accounts

No

Yes Tell us about **building society accounts**. If there are more than two 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

Whose name is the account in?

How much is in the account?

 £

Name of building society

Account number

Whose name is the account in?

How much is in the account?

 £

Post office accounts

No

Yes Tell us about **post office accounts**. If there are more than two 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

Account number

Whose name is the account in?

How much is in the account?

 £

Type of account

Account number

Whose name is the account in?

How much is in the account?

 £

Premium Bonds	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many bonds? <input type="checkbox"/>	Total amount	£ <input type="text"/>
Unit trusts, ISAs, PEPs, TESSAs, TOISAs or other investments	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many? <input type="checkbox"/>	Total amount	£ <input type="text"/>
Income bonds or capital bonds	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many bonds? <input type="checkbox"/>	Total amount	£ <input type="text"/>
Money or property held in trust	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many? <input type="checkbox"/>	Total amount	£ <input type="text"/>
Any other savings or investments?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	How many? <input type="checkbox"/>		
			Type of other savings or investment	<input type="text"/>	

Shares – approximate value	£ <input type="text"/>		
		Name of the company the shares are held in	Number of shares held
		<input type="text"/>	<input type="text"/>
Shares – approximate value	£ <input type="text"/>		
		Name of the company the shares are held in	Number of shares held
		<input type="text"/>	<input type="text"/>

Have you or your partner received any backdated benefit or deferred payments, for example, State Pension, which you have added to your savings?

No Yes If 'Yes' please give details.

What for? How much was this before tax was deducted? £

We must see proof of any savings, investments or property before we can decide how much benefit you can get. Read the checklist at Part 21 to see what you can use as proof.

Do you or your partner have any National Savings Certificates?	No <input type="checkbox"/>	Yes <input type="checkbox"/> Please send us the original certificates as proof. We will return the certificates to you.
Do any of your or your partner's savings or investments include:	No <input type="checkbox"/>	Yes <input type="checkbox"/> We will write to you about it.
• money from the sale of a house; or		
• money from a charity?		
Apart from your home, do you or your partner own any other property or land in this country or abroad?	No <input type="checkbox"/>	Yes <input type="checkbox"/> We will write to you about it.
If it is on a mortgage or a loan, still tick Yes.		
Do any children you are claiming for:	No <input type="checkbox"/>	Yes <input type="checkbox"/> We will write to you about it.
• own property or land in this country; or		
• have any money or property held in trust?		
Have you or your partner received:	No <input type="checkbox"/>	Yes <input type="checkbox"/> What payment did you receive? Who received the payment?
• a Far Eastern Prisoner of War Compensation payment; or		A Far Eastern Prisoner of War Compensation payment <input type="checkbox"/>
• a compensation payment made to victims of atrocities that happened during the Second World War?		You <input type="checkbox"/> Your partner <input type="checkbox"/>
We need to know this to make sure we do not count it as part of your savings.		A compensation payment made to victims of atrocities that happened during the Second World War <input type="checkbox"/>
		You <input type="checkbox"/> Your partner <input type="checkbox"/>
Have you or your partner received payment from the vCJD (Creutzfeldt-Jakob Disease) Trust?	No <input type="checkbox"/>	Yes <input type="checkbox"/> We will write to you about it.

What date did you move to this address (the address you have given in Part 1)

Do you own your home or have a mortgage? No Go to the next question. Yes Go to Part 16.

By home we mean the property you are claiming benefit for.

Do you pay rent for your home?

Tick **Yes**, if you would pay rent but you already get Housing Benefit.

No Go to Part 16.

Yes Answer the next question.

When did you start renting your home?

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

Did you apply for a social fund loan to move? No Yes

Are you living away from home at the moment? No Yes Tell us about this below.

Why are you not living at home?

When did you last live at home?

When do you expect to go back home?

What is the address of where you are living at the moment?

Have you sublet your home?

No Yes Who lives there now?

Do you use your home for business?

No Yes

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

No Yes Tell us about this below.

What is the address?

Do you pay rent on this other home?

No
 Yes How much

What sort of building do you live in? For example, a house, flat or bedsit.

What floor do you live on?

Ground 1st 2nd Other (please say)

Do you and your household live in only the 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 rooms are there in the building?

	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"/>
Bedsits	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms or shower	<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	<input type="text"/>	<input type="text"/>	<input type="text"/>

Has your rent been registered as a fair rent by a rent officer? No

Yes Please send us the notice of registration form RO5.

Do you have any weeks when you do not have to pay rent? No

Yes How many in a year?

Are you behind with your rent? No

Yes By how many weeks?

Who has to pay the Council Tax for your home? Tick the boxes that apply.

You or your partner

Your landlord

Someone else Tell us who this is.

What is the Council Tax reference number?

Does your rent include money for the following? Tick the boxes that apply.

Meals No

Yes How much? £ every

For which meals? Breakfast Lunch Evening meal
Please tick.

Water authority charges No

Yes How much? £ every

Heating No

Yes How much? £ every

Lighting No

Yes How much? £ every

Hot water No

Yes How much? £ every

Electricity No

Yes How much? £ every

Fuel for cooking No

Yes How much? £ every

Laundry No

Yes How much? £ every

Cleaning rooms or windows No

Yes How much? £ every

Gardening No

Yes How much? £ every

Garage or parking space No

Yes How much? £ every

Personal care and support No

Yes How much? £ every

Do you pay any service charges separate from your rent, for example, for cleaning or lighting in shared areas, an alarm system, a warden, general counselling or support, meals, or lift maintenance? No

Yes How much? £ every

What for?

Do you have to rent the garage as part of your tenancy agreement? No
Yes

Tenants of registered social landlords

- If you are a tenant of a **registered social landlord**, you can have payments made to you or to your landlord.

Would you like us to pay your Housing Benefit straight into your account	No <input type="checkbox"/>	Go to next question
	Yes <input type="checkbox"/>	Go to Part 15 Paying your benefit direct into an account
Would you like us to pay your Housing Benefit straight into your landlord’s account	No <input type="checkbox"/>	Payment will be made to you by crossed cheque
	Yes <input type="checkbox"/>	Go to Part 16

Tenants of Private Landlords

- If you are a private tenant, we would normally pay you or your partner direct into your bank or building society account.

Would you like your Housing Benefit to be paid direct into your bank or building society account?

No We will pay you by cheque
 Yes **Go to Part 15 Paying your benefit direct into an account**

We will not normally make payments to your landlord. However if you feel that this may cause you difficulty or you would like advice on how to open a bank account tick here

Please make sure you put your daytime phone number on Part 1 of this form and give us more information in Part 19, and we will contact you.

- If we give you **Council Tax Benefit**, we will pay this into your Council Tax account

Part 15 Paying your benefit direct into an account

We recommend that you get your money paid directly into an account because:

- it is safe, secure and convenient;
- having a bank account gives you access to other banking services;
- with the right account, you may be able to pay your rent and other bills by standing order; and
- it helps build a bank history.

The account can be;

- in your name;
- in your partner’s name;
- in your and your partner’s name; or
- in the name of the person acting on your behalf.

If you have ticked ‘Yes’ for us to pay you or your landlord direct into a bank or building society account, please give us the following information.

What name or names is the account in?

Please write the name or names as they appear on the chequebook, passbook or statement.

Full name of the bank or the building society

Sort code – of the bank, building society or other account provider. Please tell us all six numbers, for example, 12-34-56.

<input type="text"/>	<input type="text"/>	–	<input type="text"/>	<input type="text"/>	–	<input type="text"/>	<input type="text"/>
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Account number

This is seven to 10 numbers long.

<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"/>
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More information if it is a building society account

Building society roll or reference number

Some building society accounts use a roll or reference number. The number is on the passbook. The roll or reference can contain letters and numbers, and can be up to 18 characters long. If you are not sure if the account has a roll or reference number, ask the building society.

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

Date

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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We can usually award benefit from the Monday after the day we receive your claim. Sometimes we can pay benefit from an earlier date if you have a good reason for not claiming earlier. If you want us to consider paying your benefit from an earlier date, tell us when you want benefit from and why you did not claim earlier.

Date you want to claim benefit from / /

For this earlier period, were your circumstances different to those you have told us about on this form? No Yes Please tell us about it below.

Tell us why you have not claimed before. Please provide as much information as possible or we may ask you for more information.

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, getting them to sign this form should allow us to process your claim more quickly, but they do not have to sign.

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

- I understand that I am making this claim to you, my local council.
- I declare that the information I have given on this form is correct and complete.
- I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other 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 understand that you may use any information I have provided in connection with this and any other claim for state 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 that I must tell the Housing Benefit Manager in writing straight away about any changes in my circumstances which might affect my claim.

Signature of person claiming

Partner's signature

Date / /

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.

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

Name of the person who filled in the form

Signature

Relationship to the person claiming

Phone:

Date

 / /

Part 18 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. (Do not send valuable items such as passports in the post).

Alternatively you can bring in the form and the proof to us at the Housing Benefit Office, (Entrance 3), Civic Centre, or Cambrian Road Enquiry Office, 46 Cambrian Road, Newport.

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 the money. If you cannot get the proof within two or three weeks, let us know. If there is anything else you need to tell us, please do this in Part 19.

A large, empty rectangular box with a thin black border, occupying the majority of the page. This area is intended for the user to provide additional information or answers to the question in the header.

Sharing information with your landlord

Sharing information with your landlord could help us deal with your claim more quickly and reduce the risk of you falling behind with your rent because of your claim being delayed.

We may need to confirm information with your landlord before we can make a decision on your claim, for example, the start date of your tenancy. In these circumstances, we can contact your landlord without your permission.

By law, we must tell your landlord about certain decisions we make on your claim, for example, when we decide to pay your benefit to your landlord.

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

If you give us permission, we would be able to tell your landlord whether:

- you have claimed Housing Benefit;
- we have made a decision on your claim, including the amount of benefit we have awarded and how often you will receive it; and
- we need more information to make a decision on your claim, and what that information may be.

We will not give your landlord any information about:

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

You can withdraw your permission at any time.

It will not affect your claim if you do not give us permission to discuss your claim with your landlord.

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

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

Signature

Full name
(in CAPITAL
LETTERS)

Date

Address

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

Postcode

Do not delay sending this form in.

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

Please do not send valuable items through the post. If you can, bring them into our reception. 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 might not be able to pay you any benefit. We need the same proof for your partner, if you have one.

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 Second Adult Rebate

Please provide proof of identity and National Insurance numbers for yourself and for anyone you want to claim a Second Adult Rebate for.

• Proof of identity

Such as a birth certificate, marriage or civil partnership certificate, passport, medical card, driving licence, UK residence permit, EEC identity card or recent gas or electricity bill. We may need to see several of these documents for each person.

• Proof of your address

Such as a recent gas or electricity bill or a TV licence.

• Proof of National Insurance number

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

• Proof of 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. The proof you send must show details for at least the last three months.

• Proof of earnings

We also need this for any other adults living in your home.

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 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 six months, a summary of your trading records so far.

• Proof of other income

We also need this for any other adults living in your home.

Such as pension slips from a former employer or a letter from the court showing how much maintenance you are getting. We need to see proof of any money people pay you for board and lodgings.

• Proof of benefits, allowances or pensions

We also need this for any other adults living in your home.

Such as current award notices or letters from your Jobcentre Plus office, jobcentre, Department for Work and Pensions office or pension centre confirming how much you get. If you do not have proof, let us know straight away.

• Proof of private rent and tenancy

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

• Proof of other money paid out

Such as letters about student grants, maintenance agreements or receipts from registered childcarers.

Make sure you read and sign the declaration on page 19.

Help notes for filling in the claim form for Housing Benefit and Council Tax Benefit

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 **No** or **Yes** questions by putting a **tick** in the relevant box. If you are picking an answer from a list of answers, **tick** the box which applies to you. Do not put a cross in any boxes. If you answer a question with a cross, we may 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.

About this form

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

You may not have to fill in all parts of the form (for example, a few questions would not apply to most pensioners) 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.

About Housing Benefit and Council Tax Benefit

Housing Benefit can pay all or part of your rent. It may also give you some extra money towards things you have to pay for, like cleaning shared areas. Council Tax Benefit can pay all or part of your Council Tax. It cannot help with water charges.

Second Adult Rebate

Second Adult Rebate is Council Tax Benefit for people who may not have a partner but who share their home with someone who:

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

If you are just claiming *Second Adult Rebate*, only fill in **Part 1, 4, 16** and **Part 17** of this form.

Proof

We will need to see proof of some of the things you write about on the form. There is a checklist in **Part 21** 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 need.

If you need help to fill in the form

If you need any help, please phone us on 01633 232957 or 01633 232960 between 8.30am and 5pm Monday to Thursday, and between 8.30am and 4.30pm on Fridays.

Or, you can get in touch with an organisation like your local citizens advice bureau. You can find their phone number and address in the business section of your local phone book.

Changes you must tell us about

For example:

- any of your children leave school or leave home;
- anyone moves into or out of your home, including lodgers and subtenants;
- your income or the income of anyone living with you, including benefits, changes;
- your savings or investments change;
- you or anyone living with you becomes a student, goes on a Youth Training Scheme, goes into hospital or a nursing home, goes into prison, or changes or leaves a job;
- your rent changes;
- you move;
- you or your partner are going to be away from home for more than a month;
- you or anyone living with you starts work;
- you receive any decision from the Home Office; **or**
- anything you have told us about changes.

This is not a full list. If you are not sure, ask us for advice. **You must tell us about any changes in writing** – a phone call is not enough. If you do not tell us about any changes, you may lose money you are entitled to or you may get too much benefit. You must make sure that you tell us about any changes. Do not rely on someone else to pass the message on. It is an offence not to tell us about any changes that may affect your benefit. We may take court action against you and if we pay you too much benefit, you will probably have to pay it back.

How we collect and use information

We will use the information you give in this form, and in any supporting proof you send, 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 for Work and Pensions and HM Revenue & Customs, as allowed by the law.

They may check information you have provided, or information about you that someone else has provided, with other information they hold. We may also get information about you from certain other organisations, or give information to them to:

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

These other organisations include government departments, other local authorities and private-sector organisations such as banks and organisations that may lend you money.

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

We are 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, please ask us.