

Housing Benefit/Local Housing Allowance and Council Tax Support

Application form

Swindon Benefits Service
Admail 4144
Swindon
SN3 5ZR

Issued by

1st Contact

Date Issued

Office use

VERY IMPORTANT NOTICE

You should return the completed application form as soon as possible as we normally only pay from the Monday following the receipt of the form. You will then have 1 month from the date the pro-forma was completed to secure an earlier claim date. Please read the checklist at part 17 to see what evidence is required. To speed up the time taken to assess your application, please provide your evidence within 7 days. If you provide all the necessary information to support your claim when you return your application form, we will process your claim in 10 working days. Please note that failure to provide all the evidence required within 1 month of submitting the claim will result in the application being terminated. If you do post in valuable documents such as a Driving Licence, Birth certificate, Passport or ID cards please be aware that we are not responsible if they are mislaid by Royal Mail. Any documents, which are posted to us will be returned by standard Royal Mail post.

About this form

The Housing Benefit/Local Housing Allowance and Council Tax Support claim form has been 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 correct 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.

Filling in the form

Please fill in the form in **black** ink as this makes the scanned image easier to read. If you make a mistake, just cross it out and put the right answer next to it and initial the amendment.

Please answer all the questions. Make sure that you tick all the relevant boxes. If you do not answer all the questions, it will take us longer to work out your benefit. Do not use correction fluids or tape.

Contact Details

Swindon Direct
Wat Tyler House
Beckhampton Street Swindon
SN1 2JH

Call Centre 0345 302 2316

Email customerservices@swindon.gov.uk

Other useful information about Housing Benefit/Local Housing Allowance and Council Tax Support

Changes you must tell Housing Benefit & Council Tax about

Tell us straight away if:

- any of your children leave school or leave home;
- anyone moves into or out of your home (including boarders and subtenants);
- your income or the income of anyone living with you, including benefits, changes;
- your 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;
- you move;
- you or your partner are going to be away from home for more than a month;
- you receive any decision from the Home Office; or
- anything you have told us about changes.

You must tell us about these changes in writing – a phone call is not enough. **You must tell us about these changes as soon as possible.** If you don't tell us about these changes within 1 month you may lose money you are entitled to or you may be overpaid benefit.

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 may affect your benefit. We may take court action against you and if we pay you too much benefit, you may have to pay it back.

Local Housing Allowance

Tenants renting from a private landlord and making a new claim for Housing Benefit or who move home on or after 7th April 2008. Your benefit will be calculated using Local Housing Allowance rates. The rates are set for different size properties by The Rent Service and the rate you are entitled to is based on the people who live with you and their ages. Local Housing Allowance is the maximum amount that you can receive, and this will reduce depending on your income, savings and circumstances. Please note the rate may change each month.

For more information and to see the LHA rates please go to: <http://www.swindon.gov.uk>

Discretionary Housing Payments

You can apply for a discretionary housing payment if you are:

- already getting Housing and/or Council Tax Support or Local Housing Allowance;
- and there is a shortfall between your benefit and your rent;
- and you are having difficulty paying the shortfall.

You will need to ask for an application form, and each case will be looked at and considered individually. Please note that because you have applied for this payment it does not mean that you automatically qualify for it. Please also note that DHP payments are awarded to cover short term expenditure.

Complaints procedure

If you are unhappy with the way you have been dealt with by the benefits section, you can register a complaint either face to face, on the phone, online or in writing. For more information please go to: <http://www.swindon.gov.uk>

Appeals/Revisions

If you want to know more about your award of benefit or if you think it is wrong, you should get in touch with us within one month of the date of the award letter or we may not be able to consider any request.

You can either:

- ask for an explanation;
- ask us to look again at the decision; or
- appeal against the decision – this can only be in writing.

A claim form for Housing Benefit/Local Housing Allowance and Council Tax Support

Which of the following do you need help to pay?

	Rent		Council Tax
Private Rent	<input type="checkbox"/>	Council Tax	<input type="checkbox"/>
Housing Association Rent	<input type="checkbox"/>		
Swindon Borough Council	<input type="checkbox"/>		

Part 1 About you and your partner

YOU MUST ANSWER ALL QUESTIONS IN PART 1

If you have a partner, you must answer all the questions about them and yourself.
By partner, we mean, who you are married/civil partners to, or live with as if you were married/civil partners.

Do you have a partner who normally lives with you? No Yes

	You	Your partner
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>
Surname	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
Date you moved in	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
	If you have not moved in yet you must write and confirm the date when you have moved in after you have actually moved	
Have you previously owned this property?	<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"/>
National Insurance number	Letters Numbers Letter	Letters Numbers Letter
	<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"/>
You can find this on payslips or letters from Department for Work and Pensions or HM Revenue and Customs. We cannot decide your claim if we do not have your National Insurance number.		

Part 1 About you and your partner *continued*

You

Your partner

Tell us any other names you have used	<input type="text"/>	<input type="text"/>
Your phone number	<input type="text"/>	<input type="text"/>
What was your previous address	<input type="text"/>	<input type="text"/>
<i>Please continue on separate sheet if necessary.</i>	Postcode	Postcode
Date moved out of this property	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Did you own this property?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you or your partner come to live in the United Kingdom, the Republic of Ireland, the Channel Islands or the Isle of Man in the last 5 years? <small>The UK is England, Northern Ireland, Scotland and Wales</small>	No <input type="checkbox"/> Yes <input type="checkbox"/> We will write to you about this.	No <input type="checkbox"/> Yes <input type="checkbox"/> We will write to you about this.
If 'Yes', what date did you last arrive in the UK?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is your nationality?	<input type="text"/>	<input type="text"/>
Since arriving in the UK have you completed 12 months continuous work?	No <input type="checkbox"/> Yes <input type="checkbox"/> We will write to you about this.	No <input type="checkbox"/> Yes <input type="checkbox"/> We will write to you about this.

We must see proof of identity and National Insurance number for you and your partner, if you have one. We also need to see proof of your immigration status if you are from abroad. See the checklist and notes on page 25 for the details of the type of proof we need to see. **We must see originals, not photocopies.**

You

Your partner

Have you or your partner claimed Housing Benefit or Council Tax Support before?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
When did you claim?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What address did you claim for?	<input type="text"/>	What address did they claim for?
Postcode	Postcode	Postcode
Date moved out of this property	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Are you or your partner in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
When did you go in?	<input type="text"/> / <input type="text"/> / <input type="text"/>	When did you go in?
When do you expect to come out?	<input type="text"/> / <input type="text"/> / <input type="text"/>	When do you expect to come out?

Part 1 About you and your partner *continued*

You

Your partner

Are you living away from the address you are claiming for? No Yes

No Yes

By home we mean your current home address

Please tell us why you/your partner are not living at this address

When did you/your partner expect to go back home? / /

When do you/your partner expect to go back home? / /

Tell us where you are living at the moment.

You

Your partner

Does anyone get Carers Allowance for looking after you or your partner? No Yes

No Yes

Does your carer need to stay overnight? No Yes If yes please ask for an overnight carers form.

No Yes

Does your carer reside with you or your partner? No Yes

No Yes

Please tick if you or your partner are

a student/student nurse No Yes

No Yes

Please state course start and end dates Start End

Start End

Place of study

Do you receive a loan/grant or other student award? If yes please provide evidence. We will also require a Student certificate, which must show the dates you are attending college or University. These certificates can be obtained from the college or university.

an apprentice No Yes

No Yes

in legal custody No Yes

No Yes

sentence date

sentence date

If on remand what date were you taken into custody? date

If on remand what date were you taken into custody? date

Expected Release date

Expected Release date

Prison Name

Prison Name

Prisoner Number

Prisoner Number

severely mentally impaired No Yes

No Yes

registered visually impaired No Yes

No Yes

long term sick or disabled and incapable of work No Yes

No Yes

employed No Yes

No Yes

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 or 17 and registered for work; or
- aged 16, 17, 18 or 19 *and* in education doing a course which is not higher than GCE A-level, SCE Higher level or GNVQ (advanced).

Do you or your partner have any children who live with you?

No → Go to Part 3.

Yes Tell us about the children who live with you.

If you have answered yes to questions 2 or 3 please provide evidence.

	Child's surname	First names	Date of birth	Sex	1		2		3		4		5		£
					Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
1			/ /												
2			/ /												
3			/ /												
4			/ /												
5			/ /												
6			/ /												

If you have more than 6 children, please use a separate sheet.

Do you pay any childcare costs for registered childcare provider?

No Yes

If 'Yes', tell us the name of the child, registration number and name of the childcare provider, and how much you pay each week.

	Child's name	Amount each week	Name and address of childcare provider	Registration number
1		£		
2		£		
3		£		
4		£		

We will need to see proof of amounts paid, dates paid and the childcare provider's registration number.

Part 3 About other people who live with you

Part 3 of the form asks about other people who live with you:

We need to know about these people as they will affect the way we work out your benefit

- A **boarder** is someone who lives in your home, and pays you rent, which includes charges for meals.
- A **subtenant** is someone who pays you rent. The rent does not include a charge for meals.
- A **non-dependant** is someone who normally lives with you, such as an adult son, daughter, other relative or friend.

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 sheet of paper.

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

Now tell us about all the people who normally live with you and your partner.

	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" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Date they moved in if it was within the last 3 years	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Their relationship to you	First person	Second person	Third person
	<input type="text"/>	<input type="text"/>	<input type="text"/>

For example, aunt, uncle, brother, daughter, father, grandson, mother, grandmother, stepchild, joint tenant, joint owner, friend, boarder, lodger or subtenant.

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

No

Yes Tell us their names.

is the partner of

and

is the partner of

Do they get Income Support, income-based Jobseeker's Allowance, Pension Credit or Income related Employment Support Allowance?

First person

No

Yes

Second person

No

Yes

Third person

No

Yes

Part 3 About other people who live with you *continued*

	First person	Second person	Third person
Do they get Disability Living Allowance or Attendance Allowance or are they registered visually impaired	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

	First person	Second person	Third person
Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If a student/student nurse, please give course start and end dates and where they are studying.	Start <input type="text"/>	Start <input type="text"/>	Start <input type="text"/>
	End <input type="text"/>	End <input type="text"/>	End <input type="text"/>
	Place of study <input type="text"/>	<input type="text"/>	<input type="text"/>

We will require a student certificate

	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"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

A letter from your border/lodger will be required to confirm this.

	First person	Second person	Third person
Are they severely mentally impaired?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <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"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
When are they expected to come out?	<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
Are they in hospital at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
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 expected to come out?	<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"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Tell us their Gross Earnings.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

We need to see proof of all their earnings. This should be their most recent payslips or a filled-in earnings certificate. The form can be found at the rear of this application

	First person	Second person	Third person
Do they have any other income which you have not told us about on this form?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If 'Yes', tell us what their income is below.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<i>We may need to write to you about this.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>
We need to see proof of all their income.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 4 About Income Support and income-based Jobseeker's Allowance, Employment & Support Allowance (Income Related) and Pension Credit Guarantee

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

No → Go to **Part 5**.

Yes Answer both the questions in this part, then go to **Part 5**.

You

Your partner

Are you or your partner getting Income Support or income-based Jobseeker's Allowance, Employment Support Allowance or Pension Credit Guarantee?

No

Yes When did you start getting it?
 / /

No

Yes When did they start getting it?
 / /

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

No

Yes When did you claim?
 / /

No

Yes When did they claim?
 / /

If 'yes' but have no other income, please complete a Nil Income form

Part 5 About being self-employed

Are you or your partner self-employed?

No → Go to **Part 6**.

Yes **Answer questions on this page**

If you are self-employed, you will need to send your business accounts or you will need to fill in a separate form showing your income and expenses. Normally, we will use your income and expenses to work out your benefit. If you have been trading for less than a year then we will need an estimate of your income. You can obtain a self employed earning form online, by contacting us.

You

Your partner

What kind of work do you do?

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

We will need evidence of this

No

Yes

How much?

£

How often?

Every

We will need evidence of this

Do you pay into a private pension scheme?

No

Yes

How much?

£

How often?

Every

We will need evidence of this

No

Yes

How much?

£

How often?

Every

We will need evidence of this

Please refer to the Very Important Notice on page 1

Part 6 About working for an employer

Do you or your partner work for an employer?

No → Go to **Part 7**.

Yes Answer all the questions on this page. See notes on page 11

You

Your partner

Do you or your partner have more than one job?

No
Yes How many?

No
Yes How many?

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.

What kind of work do you do?

What is your employer's name and address?

Postcode

Postcode

When did you start this job?

 / /
 / /

Are you employed for a limited period?

No
Yes When will you finish?

No
Yes When will they finish?

How often do you get paid?

Every

Every

How much do you get paid?

£ .

£ .

How do you get paid?

(For example, in cash, paid by cheque, paid direct into a bank account or in another way.

Do you work regular overtime or receive regular bonuses, tips or commission?

No If yes, How much? £ .
Yes How often?

No If yes, How much? £ .
Yes How often?

When was your last pay rise?

 / /
 / /

Do you know the date of your next pay rise?

 / /
 / /

How many hours a week do you work?

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

No
Yes

No
Yes

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

No
Yes

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

Part 7 About any other work

Do you or your partner do any work at all?

No → Go to **Part 8**.

This could be voluntary work or work you have not told us about in Part 6.

Yes Answer all the questions on this page.

You

If so, how many hours do you do per week?

 hours

Do you get paid?

No Yes

How much do you get paid ?

 £

How often do you get paid?

Your partner

 hours

No Yes

 £

What kind of work do you do?

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

 Postcode

 Postcode

When did you start?

 / /
 / /

If you get expenses or tips, tick 'Yes' and give us details.

Yes How much?

 £

How often?

Every

Yes How much?

 £

How often?

Every

Additional Notes

We will need 5 weeks, 2 monthly, 3 fortnightly most recent and consecutive payslips. This applies to all earnings.
 Note: **Hand written payslips are not acceptable.**

Part 8 About state benefits, pensions or allowances you or your partner receive

Please give details of the amount of income you and your partner receive and how often you receive it. Please send us original proof of any income you have told us about on these pages. Please see additional notes on page 13.

Do you or your partner receive any of these benefits?

	Yes No		You			Your Partner		
			Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started
• State retirement pension	<input type="checkbox"/>	<input type="checkbox"/>	£		/ /	£		/ /
• Pension Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Service Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Industrial Disablement Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• War Disability Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• War Widow's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Special War Widow's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Widow's Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Private/Occupational Pension	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
	Yes	No	Date it last went up	Amount	How you were paid	Date it last went up	Amount	How they were paid
• Pension from past employers	<input type="checkbox"/>	<input type="checkbox"/>		£			£	
				£			£	
				£			£	
	Yes	No	Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started
• Jobseeker's Allowance <small>(contribution based)</small>	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Universal Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Employment & Support Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Industrial Injuries Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Maternity Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Return to Work Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Working Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Child Tax Credit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Child Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Maintenance received by you, your partner or any children	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
	Yes	No	Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started
• Foster Child Allowance/Guardians Allowance or Adoption Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Attendance Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Mobility Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Severe Disability Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Personal Independence Payment	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Disability Living Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Carers Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Statutory Sick Pay	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Statutory Paternity Pay	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Statutory Maternity Pay	<input type="checkbox"/>	<input type="checkbox"/>	£			£		
• Industrial Death Benefit	<input type="checkbox"/>	<input type="checkbox"/>	£			£		

Part 8 About state benefits, pensions or allowances you or your partner receive

continued

			You			Your Partner			
	Yes	No	Amount	How often do you receive it?	Date it started	Amount	How often do they receive it?	Date it started	
• Training allowances	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Trust fund	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Annuities	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Home Income Plan	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Income from charities	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Student grant or loan	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Bereavement Allowance	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Part-time fire, territorial or reserve forces	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Rent from property	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Pension Protection Fund Payments	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Have you deferred any State Retirement Pension or Private Pension?	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Any other income not listed above <small>Please give details.</small>	<input type="checkbox"/>	<input type="checkbox"/>	£			£			
• Are you entitled to receive a benefit but it cannot be paid due to the fact that you are in receipt of other benefits?			No	<input type="checkbox"/>				No	<input type="checkbox"/>
			Yes	<input type="checkbox"/>	<i>Please complete details below</i>			Yes	<input type="checkbox"/>
Name of benefit									

If you have answered 'Yes' to any of these questions, please provide proof of this.
If you have no other income please complete a Nil Income form which can be located on page 14.

Housing & Council Tax Support Claim Nil Income Statement

We have been told that you do not currently have a regular income from any source. In order to assess and your benefit, or benefit for the person you live with, please complete and return this form.

Period of Nil Income: From To

Claim Reference

National Insurance Number

Name of person making the statement
If you are not the claimant please also confirm your relationship to the claimant: i.e. partner, son, daughter.

Claimant Name (If different)

Address

1. Please give details below of how you have been meeting your day to day expenses, you must specify the value against each item and if the figure given is weekly/monthly. Please also state the source of the money used to meet the cost of these items

Food
Medication
Petrol / Bus Fares
Heating & Electricity
Clothing
Toiletries e.g. Soap
Other e.g. Leisure activities

2. Have you or your partner applied for Income Support / Job Seekers Allowance / Employment & Support Allowance or another state benefit? Yes No
If answering 'Yes' please also state in the box which state benefit you have applied for.

3. If you have been living on your savings, how much do you have left?
Please provide your bank/building society statements and updated bank books for the period stated on this form £

4. Have you received hardship payments from the DWP?
If 'Yes' please provide the payment letters Yes No

5. Have you received help from friends or relatives?
If 'Yes' please provide details and a letter from them to confirm this and the estimated cost of their contribution Yes No

If there is any additional information you feel is relevant please give the details below

If you are the claimant or claimant's partner and have any capital we will need to see bank / building society statements and updated bank books for the period stated on this form. We will also need to see proof of any other savings you hold, such as shares, premium bonds, ISAs, stocks or unit trusts.

DECLARATION

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 assess my entitlement to Housing or Council Tax Support. You may check the information with other sources as allowed by the law. I know that I must let you know in writing about any change in circumstance.

SIGNED

Date

Part 9 About other money coming in

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

No → Go to **Part 10**.

Yes Answer all the questions on this page.

A lodger is someone you provide food for. A subtenant does not get food included in their rent.

Income from Subtenants and Lodgers

Surname	First names	What you charge every week	Are they related to you?		If 'Yes', what is their relationship to you?	Is heating included?		Are meals included?	
			Yes	No		Yes	No	Yes	No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have more than 3 subtenants or lodgers, please give details on a separate sheet.

Are they joint owners or joint tenants with you?

No

Yes If 'Yes', please give the following details.

No

Yes

How many subtenants do you have?

How many lodgers do you have?

Please tell us of any other money coming into your household

Other money 1

What is the money for?

Who gets it?

How much do they get? £

How often?

Other money 2

What is the money for?

Who gets it?

How much do they get? £

How often?

Does anyone owe money to you, your partner or any children you are claiming for?

No

Yes

What for?

How much?

We must see proof of any money coming in before we can decide how much benefit you can get. Read the checklist on page 25 to see what you can use as proof.

Part 10 About Bank Accounts, savings, capital and investments

Answer all the questions in this part of the form. Read the checklist on page 25 to see what you can use as proof.

Please note: Benefit cannot be paid if you or your partner solely or jointly have capital in excess of £16,000 unless you are in receipt of Pension Credit Guarantee.

Do you or your partner have any bank accounts?

Note: Please write the names in full
e.g. Mr Fred Patrick Bloggs.

No

Yes

Tell us about bank accounts. If there are more than 3 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 the box.

1 Name of bank

Whose name is the account in?

Account number

How much is in the account?

2 Name of bank

Whose name is the account in?

Account number

How much is in the account?

3 Name of bank

Whose name is the account in?

Account number

How much is in the account?

Do you or your partner have any building society accounts?

Note: Please write the names in full
e.g. Mr Fred Patrick Bloggs.

No

Yes

Tell us about building society accounts. If you have more than 3 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 the box.

1 Name of building society

Whose name is the account in?

Account number

How much is in the account?

2 Name of building society

Whose name is the account in?

Account number

How much is in the account?

3 Name of building society

Whose name is the account in?

Account number

How much is in the account?

Part 10 About Bank Accounts, savings, capital and investments *continued*

Do you or your partner have any post office Accounts? This includes saving accounts.

No

Yes

Tell us about post office accounts. If you have more than 3 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.

Note: Please write the names in full e.g. Mr Fred Patrick Bloggs'.

1	<p>Type of account</p> <input style="width: 100%; height: 20px;" type="text"/> <small>Whose name is the account in?</small> <input style="width: 100%; height: 20px;" type="text"/>	<p>Account number</p> <input style="width: 100%; height: 20px;" type="text"/> <small>How much is in the account?</small> <input style="width: 100%; height: 20px;" type="text"/> £
2	<p>Type of account</p> <input style="width: 100%; height: 20px;" type="text"/> <small>Whose name is the account in?</small> <input style="width: 100%; height: 20px;" type="text"/>	<p>Account number</p> <input style="width: 100%; height: 20px;" type="text"/> <small>How much is in the account?</small> <input style="width: 100%; height: 20px;" type="text"/> £
3	<p>Type of account</p> <input style="width: 100%; height: 20px;" type="text"/> <small>Whose name is the account in?</small> <input style="width: 100%; height: 20px;" type="text"/>	<p>Account number</p> <input style="width: 100%; height: 20px;" type="text"/> <small>How much is in the account?</small> <input style="width: 100%; height: 20px;" type="text"/> £

Do you or your partner have any premium bonds?

No

Yes

Value £

Do you or your partner have any National Savings Certificates?

No

Yes

Please use a separate sheet of paper if you need to.

<small>Issue number</small>	<small>Value</small>	<small>How many?</small>
<input style="width: 100%; height: 20px;" type="text"/>	£ <input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	£ <input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Total		<input style="width: 100%; height: 20px;" type="text"/>

Do you or your partner have any:

- Stocks** No Yes
- Shares** No Yes
- Bonds** No Yes
- Unit trusts** No Yes
- Any other capital, savings or investments?** No Yes

<small>Company name</small>	<small>How many?</small>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Tell us about this

Please use a separate sheet if you need to

Do you or your partner own or partly own any other land or property other than the home you live in, in this country or abroad?

No

Yes

What is the current market value? £

What is the address?

Postcode

How much is the outstanding mortgage? £

Who is the resident of this property?

What is their relationship to you?

Part 11 About rent

Do you pay rent for your home?

No → Go to **Part 14**.

ONLY tick 'No' if you are ONLY applying for Council Tax Support

Yes Answer all the questions on this page.

We will need to see proof of rent paid unless you are a Council Tenant.

Do you rent your home from:

Swindon Borough Council → Please go to **Part 12b, then part 13**

You are NOT a tenant of the council if your tenancy has been transferred to a housing association or society.

Private Landlord/Housing Association Answer the questions below.

What is your landlord's name and address and telephone number?

By landlord, we mean the person or organisation who owns the property.

Tel no:

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.

Tel no:

Postcode

Are you, your partner or children related to your landlord or agent, or to your landlord's partner or the agent's partner?

Related includes related through marriage, even if the marriage has ended.

No

Yes

What is the relationship?

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.

/ /

You must write to confirm this date to us after you have moved in. We will be unable to consider your claim until you have done this.

What sort of tenancy do you have?

For example, shorthold, registered and assured

How long is the tenancy for?

/ / to / /

Is your landlord your employer?

No Yes

Tell us their names

If yes, is it a condition of your employment that you live in the property?

No Yes

How much is the rent for your property?

£ every

week / fortnight / 4 weeks / month

Are you jointly liable to pay the rent?

No Yes

If yes then what is your part of the rent?

£

£

Please tell us the names of the people you share the rent with

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?

/ /

Part 11 About rent *continued*

Has your rent been registered as a fair rent by the Rent Officer?

No

Don't Know

Yes

If 'Yes', please send us the registration document.

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

No

Yes

How many?

Are you behind with your rent?

No

Yes

If 'Yes', tell us how much and by how many weeks.

Number of weeks in arrears

Amount of rent arrears £

Why have you not been paying your rent?

Who pays the Council Tax on your home?

Please tick one of the following.

You and your partner

Your landlord

Someone else

Tell us who pays the Council Tax.

Are water rates included in the rent you pay? No

Yes

Have you sublet your home? If so, please tell us who lives there now.

No

Yes

If 'Yes', tell us who lives there now.

Part 11 About rent *continued*

Does your rent include money for the following

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

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

Personal care and support

No

Yes

How much?

£

**Are there any other services
included in your rent?**

No

What are these services?

Yes

How much?

£

*For example, TV, satellite, or
window cleaning.*

**Do you pay any service
charges separate from
your rent?**

No

Yes

How much?

£

What for?

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

Part 12 About where you live

What sort of building do you live in?

- | | | |
|--|---|--|
| <input type="checkbox"/> 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 | Please give details. <input type="text"/> | |

Part 12b

How many rooms are in the building?

Please tell us:

- how many rooms there are in the whole property;
- how many of these rooms are for you and your family to use; and
- how many you share with other people

	<i>Number of rooms In the whole accommodation?</i>	<i>Number of rooms Just for you and your household?</i>	<i>Number of rooms That you share with other people?</i>
Living rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedsitting rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separate toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other rooms (please give details)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

What is the address?

Postcode

How much do you pay for this home?

£

Part 13 Receiving Benefit

Please note:

If you are awarded Council Tax Support this will be paid directly to your Council Tax Account.

If you rent from a private landlord and are making a new claim or you move home after 7th April 2008, you will have your benefit paid directly to you under Local Housing Allowance. Payments of Local Housing Allowance will be paid by BACS. Please therefore complete the section on page 23 with your bank account details.

Please indicate below who you would like your Housing Benefit paid to:

- Do you want your benefit paid direct to you?
- Do you want your benefit paid to your landlord/Housing Association?

Requesting payments to a specific person does not automatically mean this will happen. If you would like payments to go to your landlord/agent or Housing Association please complete the form below.

In order for us to pay direct into a bank account we need to verify your details with a bank statement or similar.

Safeguard Questionnaire

Personal Circumstances

If you / your partner are having or likely to have problems managing your money and paying your rent, please tick all the boxes that apply to you. We will need to see the proof we ask for.

Reason for paying LHA to the landlord

I/my partner has problems managing my/our money because of learning difficulties

Proof we need to see

Written proof from care workers, your doctor, Social Services

I/my partner has a medical condition or mental health problem which makes it difficult to manage my/our money

Written proof from care workers, your doctor, Social Services

I/my partner has serious difficulties reading and writing

Written proof from support groups

I/my partner has difficulty speaking and understanding English

Written proof from support groups

I/my partner am dealing with an addiction to gambling

Written proof from support groups, your doctor, Social Services, hospital

I/my partner am escaping from domestic violence

Written proof from support groups, Social Services

I/my partner have recently been released from prison

Written proof from the prison or Probation Service

I/my partner have severe debt problems

Court Orders, CCJ's, proof from debt advisors, solicitors, creditors

I/my partner am an undischarged bankrupt

Copy of the Court Order

I/my partner am unable to open a bank account

Letter from bank or money advisors

I/my partner have a history of rent arrears or homelessness

Proof from support groups, homeless charities

Other Reason - please tell us about it below *(please continue on a separate sheet of paper if you need more space)*

Please note that we require proofs to support any of the choices ticked above. If these proof are not provided, your claim may be suspended.

Also, if you have received a letter stating that payments are being made to your landlord and you receive this form, it could be that we are only paying your Landlord for the first 8 weeks, so please complete and return the form to: Customer Services in Wat Tyler House, Beckhampton Street, Swindon, SN1 2JH.

Please be aware that we cannot make Housing benefit payments into a post office account

Name of bank or building society

Bank or building society sort code

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

Account name (As it appears on your bank statement)

Bank or building society account number / role number

<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"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Your signature

Date

Part 14 Authorisation

If you would like to give permission for the council to discuss your claim with anyone other than you, who acts on your behalf, please complete this section.

I give permission for you to share information held in relation to my Housing Benefit, Local Housing Allowance or Council Tax Support claim to the following people/organisations or agent.

Please state full name of the organisation, landlord/agent or person who you give authorisation to:

Please State Name

Organisation

Contact Details

Relationship to this person

If you would like to receive advice on employment from the council or our partners please tick here.

Signature

Date

Do you have an appointee or someone who has power of attorney

Yes

No

If yes please provide details and evidence in writing

Part 15 Backdating information

We 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. We cannot backdate benefit more than 1 month for working age claims and 3 months for Pension age claims from the date on which we receive your written request for a backdate.

Date you want to claim benefit from

Tell us why you have not claimed before. Please give as much information as possible to assist us in making a decision.

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 17 New Claim Evidence Checklist

Below are examples of the different types of evidence we will need to process your claim – in some cases we may still need to request more information. Please provide your most recent documents. We must see the original documents.

Proof of Identity - two forms of ID are required for you and your partner (if you have one)	You	Your Partner
• Passport	<input type="checkbox"/>	<input type="checkbox"/>
• Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>
• Marriage Certificate	<input type="checkbox"/>	<input type="checkbox"/>
• Driving Licence	<input type="checkbox"/>	<input type="checkbox"/>
• National Insurance Number Card	<input type="checkbox"/>	<input type="checkbox"/>
• Medical Card	<input type="checkbox"/>	<input type="checkbox"/>
• EEC Identity Card	<input type="checkbox"/>	<input type="checkbox"/>
• Recent Utility Bill	<input type="checkbox"/>	<input type="checkbox"/>
Proof of National Insurance Number – for you and your partner (if you have one)		
• National Insurance Number Card	<input type="checkbox"/>	<input type="checkbox"/>
• Pay Slips	<input type="checkbox"/>	<input type="checkbox"/>
• Letters from the DWP	<input type="checkbox"/>	<input type="checkbox"/>
• Letters from HM Revenues and Customs	<input type="checkbox"/>	<input type="checkbox"/>
Income		
• Rent from boarder/Lodger (letter from them to confirm the amount they pay and what this covers)	<input type="checkbox"/>	<input type="checkbox"/>
• Wage slips (latest consecutive) (5 weekly, 3 fortnightly, 2 monthly) <small>If wage slips are not available then you can have your employer complete one of the forms at the back of this application</small>	<input type="checkbox"/>	<input type="checkbox"/>
• Certificate of Earnings Form (this form can be obtained online or by contacting the Council Offices)	<input type="checkbox"/>	<input type="checkbox"/>
• Self Employed Accounts for the last financial year	<input type="checkbox"/>	<input type="checkbox"/>
• Self Employed Earnings Form (this form can be obtained online or by contacting the Council Offices)	<input type="checkbox"/>	<input type="checkbox"/>
• Tax Credit Letter	<input type="checkbox"/>	<input type="checkbox"/>
• Pension Letter	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of any other State Benefits you receive including Child Benefits	<input type="checkbox"/>	<input type="checkbox"/>
• Letter from your employer or contract of employment stating what your estimated earnings are if you have only just started a job or HB3EP, which can be found on the last page of this application	<input type="checkbox"/>	<input type="checkbox"/>
Proof of Recent Rent and Residence – proof of rent is NOT required for Council tenants		
All proof of rent must state name and address of tenant(s)		
• Tenancy Agreement	<input type="checkbox"/>	<input type="checkbox"/>
• Rent Statement from Landlord	<input type="checkbox"/>	<input type="checkbox"/>
• Letter from your Landlord, stating Landlords address, name of tenant and landlord, tenancy address, payment frequency, service charges, whether a joint tenancy, length of tenancy, date of tenancy, rent amount.	<input type="checkbox"/>	<input type="checkbox"/>
• Rent Book	<input type="checkbox"/>	<input type="checkbox"/>
<i>Landlords statement of rent form can be obtained either from customer services reception or by contacting us</i>		
Proof of Savings and Capital		
• Last 2 months full bank and or building society statements	<input type="checkbox"/>	<input type="checkbox"/>
• Savings Accounts or Post Office Books	<input type="checkbox"/>	<input type="checkbox"/>
• Share Certificates	<input type="checkbox"/>	<input type="checkbox"/>
• Premium Bonds	<input type="checkbox"/>	<input type="checkbox"/>
• ISA's	<input type="checkbox"/>	<input type="checkbox"/>
• Interest or Dividends on Investments or Savings	<input type="checkbox"/>	<input type="checkbox"/>
• Proof of any other Capital for example ownership of second properties	<input type="checkbox"/>	<input type="checkbox"/>
Proof of household		
• We need to see proof of income of any other people in your household	<input type="checkbox"/>	<input type="checkbox"/>
Proof of monies paid out		
• Letters, receipts or agreements from registered childminders or nurseries	<input type="checkbox"/>	<input type="checkbox"/>
• Private pension payments	<input type="checkbox"/>	<input type="checkbox"/>
Student Loans and Student Attendance		
• Letters showing any student loan or grant you are receiving or paying back	<input type="checkbox"/>	<input type="checkbox"/>
• If you are currently a student, a letter confirming course dates and student certificate	<input type="checkbox"/>	<input type="checkbox"/>
Persons from Abroad		
• Passport showing any Visa's, leave to remain document or a visitors permit	<input type="checkbox"/>	<input type="checkbox"/>
• Home Office Documentation	<input type="checkbox"/>	<input type="checkbox"/>

Please read the checklist at part 17 to see what evidence is required. To speed up the time taken to assess your claim, please provide your evidence within 7 days. Once received, we will process your claim in 10 days.

Please note that failure to provide all the evidence required within 1 month of submitting the claim will result in the claim being terminated.

Part 18 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, they must sign this declaration as well.

If you are unable to sign the form please contact us for advice.

Please read this declaration carefully before you sign and date it. Wherever possible this form is to be signed by you or your partner, if this is not possible and you have no appointee or a person who has power of attorney for your affairs please contact the Call centre or ask at customer services reception for assistance.

I/we understand the following.

- If I/we give information that is incorrect or incomplete, you may take action against me/us. This may include court action.
- You will use the information I/we have provided to process my/our claim for Housing Benefit or Council Tax Support, or both.
- You may check some of the information with other sources within the council, rent offices, other councils and Department for Work and Pensions/Jobcentre.
- You may use any information I /we have provided in connection with this and any other claim for social security benefits that I/we have made or may make. You may give some information to other government organisations if the law allows this.



Privacy Notice

We will keep and use your personal information in line with the requirements of the Data Protection Act and only share the data where there is a Legal requirement to do so. Your personal information will be held for 6 financial years plus current year, unless there is any outstanding matters after this date.

Using Personal Information

For the purpose of processing and validating your application we may pass information to other agencies or organisations, such as the Department of Work and Pensions, The Employment Service, Rent Service and HM Revenue & Customs and other sources within the Council. We may also check with the providers of specialist hostels for homeless people and other Council's.

We are under a duty to protect public funds and may pass information you have provided as part of this application to bodies responsible for auditing or administering public funds to prevent or detect benefit fraud (or any other crime) and support national fraud initiatives (this will include your information being used in data matching exercises from time to time). For information, please see www.swindon.gov.uk/nfi or contact the Council's Internal Audit section at: Swindon Borough Council, Civic Offices, Euclid Street, Swindon SN1 2JH.

The Council may also use your data to deal with the licensing of private properties, to collect debts such as council rents and council tax and to prevent and detect fraud. We will also give details of who lives at your address to the Electoral Registration Officer in order to maintain the electoral roll. If there is an Overpayment of Benefit the Council may have the right to recover this and use collection agents, other Councils, attachments to Benefits or Earnings via employers or other benefits agencies.

Under the Data Protection Act you can see your own personal information. If you would like to know more about this, please see the Council's website or contact the Data Protection Officer at Swindon Borough Council, Civic Offices, Euclid Street, Swindon, SN1 2JH.

I/we know, I/we must let the Benefits Service know about any change in my/our circumstances which might affect my/our claim and confirm that I/we understand that the Benefits Service may pursue the collection of overpaid amounts through external bodies.

I/we declare the information I/we have given on this form is correct and complete.

Signature of person claiming

Date

I HAVE READ THE DETAILS IN THIS FORM AND CONFIRM THAT THEY ARE CORRECT AND COMPLETE AND I HAVE READ AND UNDERSTOOD THE DECLARATION ABOVE.

Partner's signature

Date

If this form has been filled in by someone other than the person claiming:

(For example, your landlord, your warden, a member of the benefit staff, your carer or a councillor.)

Please tell us why you are filling in this form for the person claiming.

Full name of the person who filled in the form.

(Please print your name here)

Signature of the person who completed this form

Date

Relationship to person claiming

