

Working for you

BENEFIT SERVICES

P.O. Box 13, Scottsdale House, Springfield Avenue, Harrogate HG1 2SD

Name :

Address :

Office Receipt Stamp:

**Notes for filling in your Housing Benefit and Council Tax
Benefit claim form.**

About this form

You should complete this form if you wish to apply for Housing Benefit or Council Tax Benefit and are **not** currently claiming for either of these.

If you are already receiving Housing Benefit or Council Tax Benefit and want to tell us that you have moved to a new address or had another change in your circumstances, you do not need to complete this form. Instead, please contact the Benefit Services office so that we can advise you and send you a shorter form to complete. You can do this by telephoning us - 01423 556455, or e-mailing us - ben_rev@harrogate.gov.uk, or writing to us at the address at the top of this form.

Second Adult Rebate

This form can also be used to claim Second Adult Rebate. This is a type of Council Tax Benefit for people who may not have a partner but who share their home with someone who is 18 or over and :

- is on a low income; and
- does not pay them rent.

If you only want to make a claim for Second Adult Rebate, you only need to fill in Parts 1, 3, and 17 of this form.

Filling in the form

The form has been designed to be easy to fill in. It may look rather long, but we have to ask you a lot of questions to make sure that everyone who makes a new claim for benefit, gets the right amount of benefit they are entitled to.

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 it in.

If you are filling in this form by hand, please use black ink. Do not use pencil. If you make a mistake, just cross it out and put the right answer next to it. Do not use correction fluid or tape.

Answer "**Yes**" or "**No**" questions by putting a tick in the relevant box. If you are picking an answer from a list of answers, put a tick in the relevant box. We need you to tick the boxes rather than use a cross so that we can be in no doubt as to your answer. Please do not put a cross in any boxes or we will have to send the form back to you and this will delay your claim.

Please see further information over this page

Tear off here

Tear off here

Evidence

We need to see evidence of all income, capital and expenses that you enter on your form. We also need to see evidence of your (and your partner's) identity and any rent that you may pay to a private landlord. There is a checklist at the end of the form that tells you what to send us. **It is very important that you send us the evidence we need. We cannot pay you benefit until we have seen it.**

If you cannot get the evidence we need straightaway, do not worry. Send your form to us now but let us know that you will be sending some evidence later. **If you do not send the form to us now, you may lose money.** If you cannot get the evidence within 2 or 3 weeks, let us know and we may be able to help you.

When will your benefit become payable?

The general rule is that we will pay benefit from the Monday after we get your claim form. If you contacted us to ask for a form initially, we may be able to pay benefit from the Monday following the date you first contacted us instead - we can only do this, however, if you return the form to us within **one month** of it being sent to you. **It is therefore very important that you send us your claim form as soon as you can.**

If you need help to complete this form

If you need assistance with your form, you can telephone us, visit us or e-mail our office and we will be happy to help you.

To telephone us - Ring us on **01423 – 556455**.
Our lines are open from 8:30 am to 5:00 pm (Friday 4:30 pm)

To visit us - Come and see us at **Scottsdale House**, Springfield Avenue, Harrogate.
We are open from 8:30 am to 4:30 pm (Monday to Friday)

To e-mail us - ben_rev@harrogate.gov.uk

You can visit any of our Council offices for help with filling in your form or to hand in your form -

- | | |
|-----------------------|-------------------------------|
| - Bilton Office | 2/4 Albany Avenue, Harrogate |
| - Kennion Road Office | 13/15 Kennion Road, Harrogate |
| - Ripon Town Hall | Market Place, Ripon |

The above offices are open Mon to Fri 9:30am - 12:30pm and 1:30pm - 4:30pm. Wed - 9:30am - 12:30pm only.

You can also get in touch with an organisation like the Citizen's Advice Bureau. The Address and phone number of your nearest bureau can be found on-line, via the internet or in the telephone directory.

Website Services

You can obtain more information about Housing Benefit and Council Tax Benefit by visiting our website at www.harrogate.gov.uk. Through our website you can also obtain an estimate of your entitlement to Housing Benefit and Council Tax Benefit by accessing our on-line Benefit's Calculator.

You can complete a claim for benefit on-line and submit this to us directly by visiting www.harrogate.gov.uk/benefits-eform

Preventing Benefit Fraud

We are committed to identifying and preventing fraudulent claims for benefit. If you have any information about Benefit Fraud, please ring the Harrogate Borough Council Hotline - Tel : 01423 556466. You do not have to give your name and calls will be treated in confidence.

Claim form for Housing Benefit and Council Tax Benefit

If you are just claiming Second Adult Rebate, only fill in Parts 1, 3, and 17 of this form.

Please note : If you have capital of £16,000 or more, you will not be entitled to benefit (unless you are getting Pension Credit - Guarantee).

Office Use :

Benefit Ref :
1st Contact Date :
Issue Date :

Office Receipt Stamp :

Part 1 About you and your partner

Do you have a partner who normally lives with you?

No

Yes

By partner we mean someone you are married to or live with as if you are married or someone who is your civil partner or lives with you as if they are your civil partner.

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 type="text"/>	<input type="text"/>
First names	<input type="text"/>	<input type="text"/>
Any other names you have used	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs, Ms and so on)	<input type="text"/>	<input type="text"/>
Address	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	Postcode : <input type="text"/>	Postcode : <input type="text"/>
Your daytime telephone number	<input type="text"/>	<input type="text"/>
You do not have to tell us this, but it may help us deal with your claim quicker.		
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 <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>
	<input type="checkbox"/> If you do not have a National Insurance Number, or cannot find it, tick this box.	<input type="checkbox"/> If you do not have a National Insurance Number, or cannot find it, tick this box.

We need to see evidence of National Insurance Numbers for you and your partner. You can usually find these on a National Insurance card, payslips, a letter from the Inland Revenue or the Department for Work and Pensions.

Part 1 About you and your partner - continued

Please tick **all** boxes that apply to you or your partner

Renting from the Council
(enter your rent account number)

Renting from a private landlord

Renting from a Housing Association

Living in a hostel

Living in supported accommodation

Joint tenant or owner

Own my own home

Are you or your partner a full time student?

You

No Yes

Your Partner

No Yes

When did you move into this address?

 / /
 / /

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

If you are paying rent, when did your tenancy start?

 / /
 / /

What was your last address?

 Postcode :

 Postcode :

Were you the homeowner, a private tenant, council tenant, or a boarder at this address?

When did you move out of here?

 / /
 / /

Did you or your partner move to England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Isles or the Isle of Man in the last 2 years?

No Yes

No Yes

If yes, we will write to you about this

If yes, we will write to you about this

What is your nationality?

If your nationality is not British, on what date did you last enter the UK? The UK is England, Northern Ireland, Scotland and Wales.

Part 1 About you and your partner - continued

	You		Your Partner	
Are you or your partner in hospital, a nursing home or a rest home at the moment? If Yes, please give the date you went in and the date you will come out (if you know this).	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
	Date in / /		Date in / /	
	Date out / /		Date out / /	
Do you or your partner get Attendance Allowance ?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Do you or your partner get the <u>care</u> component of Disability Living Allowance ?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Does anyone get Carers Allowance for looking after you or your partner ?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Have you or your partner ever claimed Carers Allowance ? Still tick Yes if you were not paid any because you were better off getting another Social Security benefit.	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Do you or your partner have a vehicle from a Motability scheme ?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Please tick if you or your partner are :				
An apprentice	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
On youth training	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
In legal custody	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Severely mentally impaired	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Registered blind	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Long-term sick or disabled	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

Part 2 About children who live with you

You may be able to get more benefit if there are children in your household and they are :-

- Under 16
- Aged 16 or 17 and registered for work or youth training ; or
- Aged 16, 17, 18 or 19 and in education doing a course not higher than GCE A-level or GNVQ (advanced)

Are there any children in your household ?

No Go to **Part 3**

Yes Give details below

	1 st Child	2 nd Child	3 rd Child
Surname or family name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First 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="/ /"/>
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"/>
	Postcode	Postcode	Postcode
Who gets the Child Benefit for them ?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the child 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"/>
Does the child get Disability Living Allowance ?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Is your child due to leave school in the next 12 months ?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

If you have more than 3 children, use a separate sheet of paper to tell us the above information about your other children.

If you are enclosing a separate sheet, please tick this box

Part 3 About other people who live with you

Do any adults usually 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 Give details below

	1 st Person	2 nd Person	3 rd Person
Surname or family name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First 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="/ /"/>
National Insurance Number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Their relationship to you or your partner. Some examples are aunt, brother, daughter, father, grandson, stepdaughter, joint tenant, joint owner, sub-tenant, lodger or friend.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do they get Income Support, Income Based Job Seekers Allowance or Income Related Employment Support Allowance ?

No Yes

No Yes

No Yes

Do they get Pension Credit ?

No Yes

No Yes

No Yes

Do they get Attendance Allowance or Disability Living Allowance?

No Yes

No Yes

No Yes

Are they registered blind ?

No Yes

No Yes

No Yes

Are they a full-time student, a student nurse, a care-worker an apprentice, or on youth training ? If Yes, tell us which.

No Yes

No Yes

No Yes

Are they severely mentally impaired ?

No Yes

No Yes

No Yes

Are they in legal custody at the moment ?

No Yes

No Yes

No Yes

If Yes, give the date they are expected to come out.

Part 3 About other people who live with you - continued

	1 st Person	2 nd Person	3 rd Person
<p>Are they in hospital at the moment ? If Yes, give the date they went in and the date they are expected to come out (if you know this).</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>Date in / /</p> <p>Date out / /</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>Date in / /</p> <p>Date out / /</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>Date in / /</p> <p>Date out / /</p>
<p>Do they normally work for 16 hours or more a week ? If Yes, tell us their <u>weekly</u> earnings before any deductions.</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£</p>
<p>Do they have any other income at all ? If Yes, tell us what type of income this is and the amount they get <u>weekly</u> before any deductions.</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>First type of income</p> <p>£</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>First type of income</p> <p>£</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>First type of income</p> <p>£</p>
<p>This can include any :-</p> <ul style="list-style-type: none"> - Pensions - Benefits - Tax Credits - Pension Credits - Interest from savings and investments - Income from any other source 	<p>Second type of income</p> <p>£</p>	<p>Second type of income</p> <p>£</p>	<p>Second type of income</p> <p>£</p>
	<p>Third type of income</p> <p>£</p>	<p>Third type of income</p> <p>£</p>	<p>Third type of income</p> <p>£</p>
	<p>£</p>	<p>£</p>	<p>£</p>
<p>Do they pay rent or money for board and lodgings to you or your partner ? If Yes, how much ?</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£ a week</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£ a week</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£ a week</p>
<p>Does it include money for meals or heating ? If Yes, how much for meals ?</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£ a week</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£ a week</p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>£ a week</p>

Part 3 About other people who live with you - continued

If Yes, how much for heating ?

£ a week

£ a week

£ a week

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

No Yes Tell us their names

Is the partner of

We need to see evidence of all income that other people living with you have. We need this because their income may affect your benefit entitlement . Please refer to the Checklist at Part 16 of this form for details of the type of evidence we need to see.

Part 4 About Income Support, Income - Based Job Seeker's Allowance, Income - Related Employment Support Allowance and Guaranteed Pension Credit

Are you or your partner getting or waiting to hear about a claim for Income Support, Income - Based Job Seeker's Allowance, Income Related Employment Support Allowance or Guaranteed Pension Credit ?

No Go to Part 5

Yes Give details below

Are you or your partner actually getting one of these benefits?

- Income Support
- Income - Based Job Seeker's Allowance
- Guaranteed Pension Credit
- Income - Related Employment Support Allowance

You

Your Partner

No

Yes

No

Yes

If Yes, tell us which one and the date you started to get it.

Date / /

Date / /

Are you still waiting to hear about a claim for one of these benefits?

- Income Support
- Income - Based Job Seeker's Allowance
- Guaranteed Pension Credit
- Income - Related Employment Support Allowance

No

Yes

No

Yes

If Yes, tell us which one and the date you made your claim.

Date / /

Date / /

If you are actually receiving one of the above benefits go to Part 11 of this form now. If you have applied for one of the above benefits and are still waiting to hear the outcome, go to Part 5.

Part 5 Earnings – About working for an employer

Do you or your partner work for an employer?

No Go to Part 6

Yes Give details below

You

Your Partner

What kind of work do you do ?

What is your employer's name and address?

When did you start this job?

Date / /

Date / /

Are you employed for a limited period ?

No Yes

No Yes

If Yes, when will you finish?

Date / /

Date / /

What is your payroll, employee or staff number ?

How many hours a week do you usually work ?

How often do you get paid ?
(weekly, fortnightly, monthly, 4 weekly)

Every :

Every :

How much is your normal gross pay before deductions?

£

£

Enter the amount of any regular overtime, bonuses, commission or tips.

£

£

How are you paid ?

For example by cash, cheque, straight into a bank account.

When will your next pay rise be?

Date / /

Date / /

Are you getting any Sick Pay or Maternity Pay from your employer?

No Yes

No Yes

If Yes, when did it start?

Date / /

Date / /

We need to see evidence of earnings for you and your partner. Please send us :-

- your last 5 weekly / last 3 fortnightly / last 2 monthly / or last two 4 weekly payslips.
- If you do not have these, ask your employer to complete the attached Certificate of Earnings and send it back to us as soon as possible.

If you have more than one job use a separate sheet of paper to tell us the above information about your other jobs. If you are enclosing a separate sheet, tick this box.

Working for you

CERTIFICATE OF EARNINGS

If you are unable to supply your last five weeks or two months payslips please complete your name and address below and ask your employer to give details of your earnings in the space provided

Your name and address :

.....

Payroll No : Benefit Reference :

EMPLOYER: Please provide a response to the questions below and enter details of the last five weeks or two months earnings for the person named above. **Do not include income relating to Working Tax Credit**

Date Employee Commenced work Method of Pay e.g. cash, cheque, BACs

Pay frequency e.g. weekly, monthly 4 weekly Employees National Insurance No.

	Week/Month Ended	Weekly Hours Worked	Gross Pay	Tax	National Insurance	Pension Contribution	Tax Code
1			£	£	£	£	
2			£	£	£	£	
3			£	£	£	£	
4			£	£	£	£	
5			£	£	£	£	
6			£	£	£	£	

If the gross pay shown above does not represent the employee's usual earnings or the employee has only recently started work for you and has not yet been paid, please give your estimate of his/her average expected weekly/monthly gross pay including overtime, bonus, commission etc.

Normal Hours	Gross Pay	Tax	National Insurance	Pension Contributions
	£	£	£	£

If he/she has periodical pay increases what is the usual date of the increase ?

<p>Employers Name and Address :</p> <p>..... </p> <p>Employers Telephone No :</p> <p>Employers Signature :</p>	<p><u>Employers Official Stamp :</u></p> <p style="text-align: center;">.....</p> <p>Contact Name :</p>
--	--

Tear off here

Tear off here

Part 6 About being self-employed

Are you or your partner self-employed ?

No Go to **Part 7**

Yes Give details below

You

Your Partner

What kind of work do you do ?

What is the business address ?

 Postcode :

 Postcode :

Do you use your home for business ?

No

Yes

No

Yes

If Yes, tell us how many rooms are used for business purposes

Are there any other partners in the business ?

No

Yes

No

Yes

If Yes, tell us their name and address.

 Postcode :

 Postcode :

When did the business start ?

 / /
 / /

When does your financial year start and end ?

 Starts : / /

 Starts : / /

 Ends : / /

 Ends : / /

How many hours a week do you usually work ?

Do you get a Business Start-up Allowance ?

No

Yes

No

Yes

If Yes, tell us how much you get and how often.

 £

 £

 Every :

 Every :

We need to see evidence of self –employed earnings for you and your partner. Please send us your trading accounts for the last financial year.

If you have only recently set up the business and do not have accounts, we will need to see other evidence. We will write to you about this.

Part 7 About benefits, pensions, credits and allowances

Are you or your partner in receipt of, or have applied for any benefits, pensions, credits or allowances that you have not already told us about?

No Go to **Part 8**

Yes Tell us about these below

	You		Your Partner	
	Amount £ p	How often is it paid? Every :- - week - 2 weeks - 4 weeks - month	Amount £ p	How often is it paid? Every :- - week - 2 weeks - 4 weeks - month
Attendance Allowance	£		£	
Bereavement Allowance	£		£	
Carers Allowance	£		£	
Child Benefit	£		£	
Child Tax Credit	£		£	
Disability Living Allowance (Care)	£		£	
Disability Living Allowance (Mobility)	£		£	
Disabled Persons Tax Credit	£		£	
Employment Support Allowance (Contribution Based)	£		£	
Fostering Allowance	£		£	
Guardians Allowance	£		£	
Incapacity Benefit - (Short term)	£		£	
Incapacity Benefit - (Long Term)	£		£	
Industrial Injuries Disablement Benefit	£		£	
Industrial Death Benefit	£		£	
Job Seekers Allowance (Contribution Based)	£		£	
Maternity Allowance	£		£	
Pension Savings Credit	£		£	
State Retirement Pension	£		£	
Severe Disablement Allowance	£		£	
War Disablement Pension	£		£	

Part 7 About benefits, pensions, credits and allowances - continued

	You		Your Partner	
	Amount	How often is it paid?	Amount	How often is it paid?
	£ p	Every :- - week - 2 weeks - 4 weeks - month	£ p	Every :- - week - 2 weeks - 4 weeks - month
War Widows Pension	£		£	
Pre-1973 War Widows Pension	£		£	
Widows / Widowers Benefit	£		£	
Working Tax Credit	£		£	

Do you receive any other benefits, pensions, credits or allowances?
If Yes, tell us the type of benefit you receive, how much you get and how often you get it.

No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
<input type="text"/>		<input type="text"/>	
£		£	
Every :		Every :	

Have you applied for any benefits, pensions, credits or allowances recently and are still waiting to hear the outcome?
If Yes, tell us what you have applied for and the date you applied.

No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
<input type="text"/>		<input type="text"/>	
Date : / /		Date : / /	

Have you received a lump sum payment because you previously deferred receipt of your State Pension ?
If Yes, tell us the gross amount and the date you received it.

No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
£		£	
Date: / /		Date: / /	

We need to see evidence of all the above. Please send us any of the following :

- a current award notice or letter from the Department for Work & Pensions or Inland Revenue.
- a current bank statement showing payments made to your account by Direct Payment
- a benefit payment book - please do not send books through the post.

Part 8 About other money coming in

Do you or your partner have any other money coming in that you have not already told us about on this form?

No Go to **Part 9**

Yes Tell us about this below

	You		Your Partner	
	Amount £ p	How often is it paid? Every :- - week - 2 weeks - 4 weeks - month	Amount £ p	How often is it paid? Every :- - week - 2 weeks - 4 weeks - month
Any cash payments	£		£	
Child Support	£		£	
Maintenance for you or your partner	£		£	
Maintenance for your or your partners children	£		£	
Money from a Trust Fund	£		£	
Private or Employment Pension	£		£	
Student grant or loan	£		£	
Training Allowance	£		£	

Any other Income

Tell us what it is, how much you get and how often you get it.

£ Every :	£ Every :

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

For example, redundancy payment, a payment instead of notice or holiday, or money owed to you or your partner. If Yes, tell us what it is for, the amount and when you will get it.

No	Yes	No	Yes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
£ on :		£ on :	

We need to see evidence of all money coming in to you and your partner.

Please send any of the following:

- a recent award notice or letter from the income provider
- payment slips
- a current bank statement showing the payments made to you.

Part 9 About capital, savings and investments

We need to know about all capital, savings and investments you have. This includes cash, current and savings accounts with a bank or building society – **including empty or overdrawn ones** – Post Office accounts, premium bonds, National Savings Certificates, stocks and shares.

Do you or your partner have a bank or building society account, capital, savings or investments in the UK or abroad? (Include empty accounts) No Go to Part 10 Yes Tell us about these below

	You	Your Partner
Do you have a bank account?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If Yes, tell us how many you have	<input type="text"/>	<input type="text"/>
- the name of the bank	<input type="text"/>	<input type="text"/>
- the account number	Acc No. : <input type="text"/>	Acc No. : <input type="text"/>
- how much is in the account	£ <input type="text"/>	£ <input type="text"/>
- the name of the bank	<input type="text"/>	<input type="text"/>
- the account number	Acc No. : <input type="text"/>	Acc No. : <input type="text"/>
- how much is in the account	£ <input type="text"/>	£ <input type="text"/>

Do you have a building society account ?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If Yes, tell us how many you have	<input type="text"/>	<input type="text"/>
- the name of the building society	<input type="text"/>	<input type="text"/>
- the account number	Acc No. : <input type="text"/>	Acc No. : <input type="text"/>
- how much is in the account	£ <input type="text"/>	£ <input type="text"/>

Do you have any Post Office accounts? This includes savings and Girobank accounts.	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If Yes, tell us :		
- the type of account	<input type="text"/>	<input type="text"/>
- the account number	Acc No. : <input type="text"/>	Acc No. : <input type="text"/>
- how much is in the account	£ <input type="text"/>	£ <input type="text"/>

Have you received a Far Eastern Prisoner of War payment ?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
--	--	--

	You		Your Partner	
Do you have any National Savings Certificates ?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If Yes, tell us :	Issue No. : <input style="width: 100%;" type="text"/>		Issue No. : <input style="width: 100%;" type="text"/>	
- their issue number	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- their value	£ <input style="width: 100%;" type="text"/>		£ <input style="width: 100%;" type="text"/>	
- how many you have	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	

	You		Your Partner	
Do you have any stocks, shares, bonds or unit trusts?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If Yes, tell us :	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- the company name	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- the value	£ <input style="width: 100%;" type="text"/>		£ <input style="width: 100%;" type="text"/>	
- how many you have	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	

	You		Your Partner	
Do you have any other capital, savings or investments ?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If Yes, tell us :	Type : <input style="width: 100%;" type="text"/>		Type : <input style="width: 100%;" type="text"/>	
- the type	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- where it is held	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- the value	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
This can include :	Held : <input style="width: 100%;" type="text"/>		Held : <input style="width: 100%;" type="text"/>	
- Cash	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- TESSA's	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- Premium Bonds	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- ISA's - maxi or mini	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- TOISA's	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- Compensation	<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
- Or any other money you have not told us about on the form.	£ <input style="width: 100%;" type="text"/>		£ <input style="width: 100%;" type="text"/>	

	You		Your Partner	
Do you or your partner own, any property, land or timeshare other than the home you live in, either in the UK or abroad?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If Yes, tell us the address.	Address: <input style="width: 100%;" type="text"/>			
We will write to you about this.	<input style="width: 100%;" type="text"/>			
	<input style="width: 100%;" type="text"/>			

We need to see evidence of all the above. We need to see evidence of all accounts you have, even if your balance is nil or overdrawn. Please send us any of the following:

- bank, building society, Post Office books or statements for the last 2 months
- certificates for bonds, stocks, shares, unit trusts or National Savings
- letter from the investment company.

If you need to tell us about more accounts, savings or investments, please use a separate sheet of paper to tell us the above information. If you are enclosing a separate sheet, tick this box

	You		Your Partner	
<p>Do you pay into a private or company pension scheme? If Yes, tell us how much and how often - for example weekly, monthly or 4 weekly.</p>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
	£		£	
	Every :		Every :	
<p>If you work, are these paid direct from your earnings?</p>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
<p>Do you pay any parental contributions to support a son or daughter at college or university ? If Yes, tell us how much and how often.</p>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
	£		£	
	Every :		Every :	
<p>Do you pay a registered child-minder, nursery or after-school club any childminding costs? If Yes, tell us :</p> <ul style="list-style-type: none"> - how much you pay a week - which child you pay this for - the name of your childminder - the registration number of your childminder 	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
	1st Child		2nd Child	
	£		£	
<p>Are there any weeks when you do not have to pay for child care or you pay reduced costs ? If Yes, please list the weeks.</p>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
<p>Are you entitled to government help with your childcare costs?</p>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

We need to see evidence of all money you and your partner pay out. Send us any of the following :

Private pensions - a recent pension policy / statement, letter from pension company, bank statement showing payments you make.

Education support - letter or award notice from the Education Authority

Child minding Costs - 5 weekly / 2 monthly pay receipts, contract, letter from child-minder

This part of the form is only to be completed if you pay rent to a private landlord or to a Housing Association. If you pay rent to the Council or you own your home, you do not need to fill this part of the form in – go direct to **Part 14** instead.

Do you pay rent for your home? No Go to **Part 14** Yes Continue below

Do you pay rent to the Council? No Continue below Yes Go to **Part 14**

What is your landlord's name and business address?

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

Name :

Address :

Postcode :

Tel No. :

If your landlord has an agent, what is their name and business address?

By agent, we mean the person or organisation you actually pay rent to, if this is different to your landlord.

Name :

Address :

Postcode :

Tel No. :

Are you, your partner, or any of you or your partner's children, related to your landlord / agent or their partner?

Related includes related by marriage, even if the marriage has ended. For example, ex-wife, ex-husband, brother, daughter, father, son-in-law, step-daughter.

No

Yes

What is the relationship ?

Relationship :

Does your landlord / agent live in the property you rent ?

No

Yes

Did you or your partner previously own the property?

No

Yes

Was your landlord / agent previously your partner who lived with you in this property?

No

Yes

Do you rent the property from a Trust where you or your child is a Trustee or beneficiary?

No

Yes

Part 11 About your rent - continued

Do you live in the property as a condition of your employment ?

No

Yes

Are you renting your home from a company of which you, your partner / ex-partner, or close relative living with you, is a director or employee ?

No

Yes

What sort of tenancy do you have? For example, shorthold, assured, tied rent.

How long is the tenancy for ?

to

How much is the rent for your home ? For example, every week, every fortnight, 4 weeks, month.

every

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

No

Yes

If Yes, tell us their name and relationship to you / your partner.

How much of the rent do you pay ?

every

When is the next rent increase due?

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

No

Yes

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

No

Yes

If Yes, tell us the number of rent free weeks each year.

Are you behind with your rent ?

No

Yes

If Yes, by how many weeks ?

Are you responsible for payment of gas, water or electricity?

No

Yes

If Yes, tick which ones

Gas

Water

Electricity

Does your rent include money for any of the following services?

If Yes, tell us how much is included in your rent.

- Water rates	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Council Tax	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Heating	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Hot water	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Lighting	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Fuel for cooking	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Laundry	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Personal care	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Counselling and support	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Emergency alarm	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Cleaning of rooms or windows	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Gardening	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
- Garage or parking space	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	<input type="text" value="£"/>
If Yes, do you have to rent the garage as part of your tenancy agreement?	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	

- **Meals**
If Yes, tick to tell us which meals are included.

No Yes

Breakfast Lunch Evening Meal

- **Does your rent include any other charges?**

No Yes

If Yes, tell us what they are and how much they are each week.

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

Part 12 About where you live

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

<input type="checkbox"/> Detached house	<input type="checkbox"/> Semi-detached house	<input type="checkbox"/> Terraced house
<input type="checkbox"/> Flat in a house	<input type="checkbox"/> Flat in a block	<input type="checkbox"/> Flat over a shop
<input type="checkbox"/> Detached bungalow	<input type="checkbox"/> Semi-detached bungalow	<input type="checkbox"/> Maisonette
<input type="checkbox"/> Bedsit or rooms	<input type="checkbox"/> Board & Lodgings	<input type="checkbox"/> Hostel
<input type="checkbox"/> Caravan/Mobile home	<input type="checkbox"/> Caravan - Site rent only →	<input type="checkbox"/> Single pitch or <input type="checkbox"/> Double pitch
<input type="checkbox"/> Hotel	<input type="checkbox"/> Other - please describe	<input type="text"/>

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

If Yes, where in the building do you live?

No Yes

At the front In the middle At the back

To the left In the centre To the right

Looking from the road outside at the front of the building, is your room ?

How many floors are there in the building?

Which floors do you live on?

Basement Ground Floor (Street Level) First Floor

Second Floor Third Floor

How many rooms are there in the building ? Please enter a number, do not leave boxes blank.

	In the whole house or flat	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 rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Separate Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Separate dining room	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms – please describe	<input type="text"/>	<input type="text"/>	<input type="text"/>

Part 12 About where you live - continued

What is the number of your flat or room ?

Is your accommodation let as :
(please tick)

Furnished

Carpets &
Curtains only

Unfurnished

Does your home have central heating ?

No

Yes

Who is responsible for internal decoration ?

You

Your Landlord

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

No

Yes

Do you have a main home somewhere else in the UK or abroad ?

No

Yes

If Yes, tell us the address.

Post Code :

We need to see evidence of the rent you are liable to pay for your home.

- If a fair rent is registered on your property - send us your registration document
- If you are a Housing Association tenant - send us the latest rent letter / agreement from your landlord.
- In all other cases - send us your tenancy agreement.

If you do not have a tenancy agreement ask your landlord or the agent managing the property, to complete the -“ Tenancy Confirmation”- document on the next page and return it to us as soon as possible. Please write your name and address on the front page of the confirmation.

If there will be a delay in your landlord completing this, send us your form now and send us your Tenancy Confirmation later. (If you delay in sending us your form, you may lose benefit that you could have been entitled to).

Working for you

HARROGATE BOROUGH COUNCIL BENEFIT SERVICES

Tenancy Confirmation

Name of tenant :

Address of property :

Post Code :

To the landlord or managing agent

The above tenant has applied for Housing Benefit in respect of the above address, but is unable to provide a current tenancy agreement as proof of their rent. Entitlement to Housing Benefit cannot be assessed unless proof is provided of :-

- The date the tenancy started
- The amount of rent the tenant is liable to pay
- How often they pay the rent
- Details of any services included in the rent – for example water charges, fuel charges

Please could you complete the “Tenancy Confirmation” form overleaf giving details of the tenancy and return this to the Benefit Section as soon as possible. Our address is Benefit Services, Scottsdale House, Springfield Avenue, Harrogate, HG1 2SD.

If you have any queries concerning this form, please contact us by telephone – 01423 556455.

It would be helpful if you could give us your name, address and day-time telephone number below. We may need to contact you to check some of the details overleaf.

Landlord's name :

Landlord's address :

Post Code :

Daytime Tel. No :

Agent's name :

Agent's address :

Post Code :

Daytime Tel No :

Tear off here

Tear off here

TENANCY CONFIRMATION

BTCI

Name of tenant/joint tenants

Address of tenant

 Post Code :

1. Please state the amount of rent charged and the period it covers. (E.g. weekly, fortnightly, 4 weekly, calendar monthly. If other, please specify.)

 £ every :

2a. If rent has altered in the last 12 months, give the date of change.

 / /

2b. Was the date of the rent review stated in the original tenancy agreement?

No Yes

3. Please state the date the tenant moved in.

 / /

4. Please state the exact date your tenant's rent liability commenced.

 / /

5. Are you related to the tenant?

No Yes

If yes, please state the relationship i.e. father, daughter, uncle, etc.

6. Are there any services included in the rent?

No Yes

Please tick to show which services are included

Water	<input type="checkbox"/>	Laundry (washing of clothes / bed linen)	<input type="checkbox"/>
Council Tax	<input type="checkbox"/>	Garden maintenance	<input type="checkbox"/>
Heating of accommodation	<input type="checkbox"/>	Satellite Dish	<input type="checkbox"/>
Hot water	<input type="checkbox"/>	Does the property have a garage?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Lighting	<input type="checkbox"/>	Does the tenant have a choice to rent the garage?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Fuel for cooking	<input type="checkbox"/>	Caretaker/Warden	<input type="checkbox"/>
Cleaning and or lighting of shared areas	<input type="checkbox"/>	Counselling or support services	<input type="checkbox"/>
Porter	<input type="checkbox"/>	Emergency alarm system	<input type="checkbox"/>
Personal or nursing care	<input type="checkbox"/>	Cleaning of tenants room/windows	<input type="checkbox"/>
Other Services - please specify	<input type="text"/>		

Please note, knowingly giving false information may lead to prosecution.

Signature of landlord or managing agent :

Date :

 / /

Please return this completed form to Benefit Services, Scottsdale House, Springfield Avenue, Harrogate. HG1 2SD

Tear off here

Tear off here

Part 13 Paying benefit

We will usually pay Housing Benefit direct to you or your partner. We prefer to make payment direct to your bank or building society account by credit transfer as this is the safest and quickest way to pay you.

We can make payment to your landlord, but **only** if the following circumstances apply to you:-

- there is a reason why you cannot manage your own rent payments or
- you are a Housing Association tenant or
- you live in a hostel, caravan, mobile home, houseboat or in supported accommodation.

Please tick the box below to tell us which payment method you prefer:-

- Direct to your bank/building society account
Please give details of your account below.
- Payment to your landlord - we may contact you about this.

Bank Account Details

Name of Bank/Building Society

Address of Bank/Building Society

 Post Code :

Name(s) of Account Holder(s)

Account Number

Bank Sort Code - Please tell us all 6 numbers eg 12-34-56

 - -

Building Society Roll Number
(if applicable)

If you do not have a bank account that we can pay your benefit into, please contact us.

Sharing Information with your landlord

Sometimes sharing information with your landlord can help us to deal with your claim quickly and may reduce the risk of you falling behind with your rent. It can also keep your landlord up to date with how your claim is progressing and when payment is due. We can already check some information with your landlord, and we will contact your landlord for confirmation of your rent if you have not provided evidence of this, but we need your permission to share any other information. If you agree to this, we will only share information about:

- Whether you have claimed Housing Benefit.
- Whether we have made a decision on your claim.
- Whether we need further information from you, and what this is.

We will not give any information about your personal, household or financial circumstances.

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

Your Signature :

Date : / /

Part 14 Anything else you need to tell us

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

If you are sending separate sheets of paper with this form, tell us how many :

Part 15 Backdating of benefit

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, we need you to tell us :

- The date you want benefit from; **and**
- The reasons why you did not claim earlier. **We cannot help unless you give FULL reasons below.**

Date you want to claim benefit from:

Reasons why you have not claimed earlier :

We cannot pay you benefit unless you send us evidence of National Insurance numbers and any of the following items that apply to you, your partner and any other adult living with you. Please tick to tell us what you are sending.

- **National Insurance numbers**
A National Insurance number card, payslip, letter from the Inland Revenue or Department for Work and Pensions, P45/P60, or benefit payment book.
- **Earnings**
Your last **5 weekly** payslips, your last **3 fortnightly** payslips or your last **2 monthly** payslips. If you do not have these, ask your employer to complete the Certificate of Earnings enclosed at Part 5 of this form or to send us a letter on official company paper. Please note - we cannot accept hand-written payslips.
- **Earnings from self-employment**
Certified accounts for your last trading year. If you have been trading for less than 1 year, we will send you a form to fill in.
- **Benefits, pensions, credits and allowances**
Current award notice or letter from the Dept. for Work & Pensions or Pension Service, current bank statement showing payments made to your account by direct payment or benefit payment book – please do not send order books in the post.
Working Tax Credit / Child Tax Credit - we need to see your **full** award notice.
- **Other money coming in**
Current award notice, letter from source of income, payment slips or current bank statements showing payments made to you.
- **Capital, savings and investments**
Bank, building society or post office books or statements for the last **2 months**, certificates for premium bonds, stocks, shares, unit trusts, National Savings Certificates, ISAs, or letter from the investment company.
- **Money you pay out**
A pension policy or statement, letter from the pension company or recent bank statement showing payments you make. Your last 5 weekly or 2 monthly child- care payment receipts, contract, or letter from your carer. Letter or award notice from the Education Authority.
- **Your rent**
A tenancy agreement, or a fair rent registration document. If you are a Housing Association tenant send us the rent letter / agreement your landlord gave you. If you do not have a tenancy agreement ask your landlord to complete the -“Tenancy Confirmation” - document at Part 12 of this form and return it to us as soon as possible.

We must see original documents, not copies. If you post documents to us, we will return them to you within 3 working days of receiving them. Please do not send valuable items such as order books, through the post. If you can, take them into the Council office address shown on the front of this form. We will take the details we need and give you the documents straight back.

If you cannot send the evidence we need at the moment, tell us this at Part 14 of your form. Send the form back to us now and send the evidence later. We can then start to process your claim **but we will not be able to pay you any benefit until we have all the evidence.**

Part 17 Declaration

We must protect the public funds we handle and so we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations which handle public funds. We will put the information onto a computer system within the Council registered under the Data Protection Act 1998.

Even if someone else has filled in this form for you, you must sign this declaration.

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

I understand the following.

- I understand that the details I have provided on my claim form will be held in a computer system registered under the Data Protection Act.
- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit, or both. You may check some of the information with other sources such as government departments, or local authorities as required by law.
- You may use any information I have provided in connection with this and any other claim for Social Security benefits, Tax Credits or Pension Credit I have made (or may make). You may give some information to other departments of Harrogate Borough Council for official purposes; to other organisations, such as government departments, local authorities and private-sector companies such as banks, if the law allows this.
- You may tell the North Yorkshire County Council Supporting People team about my claim where my landlord provides a funded support service to me.

I know I must let the council know immediately about any change in my circumstances which may affect my claim. **I declare** the information I have given on this form is correct and complete.

Signature of person claiming :

Date : / /

Partner's Signature :

Date : / /

Part 18 Help with forms

If this form has been filled in by someone other than the person claiming, we need further information below :

Name, address and signature of the person who filled in the form.

Name :

Address :

Post Code :

Signature :

Date : / /

If you would like us to send future forms and letters to another person on your behalf, please give us their name and address.

Name :

Address :

Post Code :

Important Information about your claim

The final check

We want to deal with your claim as quickly as we can. You can help us to do this by checking your claim carefully before sending it to us. If the form is incomplete or there is evidence missing when we receive it, we will have to write to you about this. This will delay us being able to make a decision on your claim and will mean that you have to wait longer before we can pay you any benefit that you may be due.

Before you send your form to us, please check :-

- That you have completed all parts that relate to you.
- That you have enclosed all the documentary evidence we need to see and ticked the checklist at Part 16.
- That you have read, understood and signed the declaration at Part 17.

What to do next

When you are sure that your form is complete, post it to us at PO Box 13, Scottsdale House, Springfield Avenue, Harrogate HG1 2SD. If you prefer, you can bring the form and evidence to us direct at Scottsdale House. You can also hand deliver it to any Council management office or Ripon Town Hall. Do not send valuable items such as benefit order books or bank books in the post. Bring them in with your form and we will take a copy of the information we need and give them straight back to you.

You can get a receipt for this form when you hand it in, by asking the person receiving it, to stamp the front page, tear it off and hand it back to you.

How we collect and use the information you have given us

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

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

We may check information you have provided or information about you that someone else has provided, with other information held by us. We may also get information about you from certain third parties such as government departments, local authorities and private- sector companies such as banks, or give them information to :

- Make sure the information is accurate
- Prevent or detect crime ; and
- Protect public funds.

Some information may also be shared with the Council Tax and rent sections of the Council to ensure we collect the right amount of council tax and rent from you, where applicable.

If you live in “supported” accommodation where your landlord, or someone acting on their behalf, provides support, such as an emergency alarm system or help of a Warden, we may tell the North Yorkshire County Council about your benefit starting, changing or ending, so that the money paid to your landlord is correct.

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

We, Harrogate Borough Council, are the data controller for the purposes of the Data Protection Act. If you want to know more about what information we have about you, or the way we use it, please ask us.

Reporting Changes to Us

BCRI

Tear off here

Changes you must tell us about

It is important that you tell us if anything you have put on your form, changes. Tell us straightway if :

- Any of your children leave school or home;
- Anyone moves into or out of your home (including lodgers and subtenants);
- Your income and expenses or the income of anyone living with you, including benefits, changes;
- Your capital, savings or investments change ;
- You or anyone living with you becomes a student, goes on a Youth Training Scheme, goes into a hospital or nursing home, goes to prison, or gets, changes or leaves a job;
- Your rent changes;
- You move or you or your partner are going to be away from home for more than a month;
- You receive any decision from the Home Office.

It is an offence not to tell us about any change of circumstances that affects 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.

You must tell us about these changes in writing – a phone call is not enough. If you need to tell us about a change in your circumstances, you can use the form below. Please tear off this page and keep it in case you need to report a change to us in the future. If the change relates to your income or capital, you must also send us evidence of this.

CHANGE OF CIRCUMSTANCES

Please use a pen with black ink and write in capital letters.

I wish to report a change in my circumstances which might affect my claim for benefit :

Your Full Name :	Your Benefit Reference :
Your Address :	
Your Daytime Telephone Number :	
Your Signature :	Today's Date :

Please return this form to Benefit Services, Scottsdale House, Springfield Avenue, Harrogate, HG1 2SD

Tear off here