



Phone: 01785 619000
Benefits direct dial: 01785 619478
Fax number: 01785 619219
E-mail: benefits@staffordbc.gov.uk
Website: www.staffordbc.gov.uk

Stafford

BOROUGH COUNCIL



INVESTOR IN PEOPLE

For our use only Claim reference:
Date issued:

Date received:

Claim form for Housing Benefit and Council Tax Benefit

(There are notes at the back to help you fill in this form.)

If you are just claiming Second Adult Rebate, only fill in Part 1, Part 3 and Part 18 of this form.

Are you a (please tick one box):

- owner-occupier? private tenant?
housing association or social landlord tenant? other?

Part 1 About you and your partner

Do you have a partner who normally lives with you?
By *partner* we mean someone you are married to or live with as if you are married.

No

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

	You	Your partner
Surname or family name	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>
Any other names you have used	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs, Ms, other)	<input type="text"/>	<input type="text"/>
Address, including your room number if you have one <small>Do not tell us your partner's address if it is the same as yours.</small>	<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
What date did you move to this address?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Your daytime phone number	Code <input type="text"/> Number <input type="text"/>	Code <input type="text"/> Number <input type="text"/>
What is this number? Please tick.	Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/> Textphone <input type="checkbox"/>	Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile <input type="checkbox"/> Textphone <input type="checkbox"/>
Your email address	<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 (NI) number <small>You can find this on payslips or letters from social security or the tax office. We cannot normally decide your claim if we do not have your NI number. We need to see proof of this.</small>	Letters <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/> If you do not have a National Insurance number, or cannot find it, tick this box. <input type="checkbox"/>	Letters <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/> If your partner does not have a National Insurance number, or cannot find it, tick this box. <input type="checkbox"/>

Do not delay returning this form or you may lose benefit.
If you are waiting for proof, return the form now and send the proof as soon as possible.

You

Your partner

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

No
 Yes Please tell us about it below.

No
 Yes Please tell us about it below.

When did you last claim?

 / /
 / /

Which council did you claim from?

What name did you use for the claim?

What address did you claim for?

 Postcode

 Postcode

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

No
 Yes

No
 Yes

If you or your partner have moved home in the last 2 years, tell us your last address if it is different from above.

 Postcode

 Postcode

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

We need to see proof of your identity and NI number. See the checklist at Part 16.

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

No
 Yes We will write to you about this.

No
 Yes We will write to you about this.

What is your nationality?

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

 / /
 / /

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

Do you have the right to live in the UK?

No
 Yes

No
 Yes

Are you or your partner in hospital at the moment?

No
 Yes Please tell us about it below.

No
 Yes Please tell us about it below.

When did you go in?

 / /
 / /

When will you come out, if you know this?

 / /
 / /

Do you or your partner get Disability Living Allowance?

No
 Yes How much?

No
 Yes How much?

We need to see proof of this.

Care £

Care £

Mobility £

Mobility £

You

Your partner

Do you or your partner get Attendance Allowance?

No
 Yes We need to see proof of this.

No
 Yes We need to see proof of this.

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

No
 Yes We need to see proof of this.

No
 Yes We need to see proof of this.

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

No
 Yes We need to see proof of this.

No
 Yes We need to see proof of this.

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

No
 Yes How much do you pay and how often?
 £ every

No
 Yes How much do they pay and how often?
 £ every

Are you or your partner a student?

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

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

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

Full time Part time

Full time Part time

How much of your income is taken into account when working out your grant or loan?

£ a year

£ a year

Please tick if you or your partner are:

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

-
-
-
-
-
-

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

No
 Yes

No
 Yes

We will contact you if we need any more information.

Part 2 About children

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

- under 16;
- aged 16 or 17 and registered for work or youth training; or
- aged 16 to 20 and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ (advanced).

Are there any children in your household as described above?

No Go to Part 3.

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

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

	First child	Second child	Third child	Fourth child
Last name				
Other names				
Date of birth	/ /	/ /	/ /	/ /
What is the child's sex?				
The child's relationship to you				
The child's relationship to your partner				
Usual address, if different from yours				
Child Benefit number				
Who gets the Child Benefit for them?				

We need to see proof of this.

Is the child registered blind?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> We need to see proof of this.	Yes <input type="checkbox"/> We need to see proof of this.	Yes <input type="checkbox"/> We need to see proof of this.	Yes <input type="checkbox"/> We need to see proof of this.

Does the child get Disability Living Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?

Care	£	£	£	£
Mobility	£	£	£	£

We need to see proof of this. We need to see proof of this. We need to see proof of this. We need to see proof of this.

Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Please tell us about it below.	Yes <input type="checkbox"/> Please tell us about it below.	Yes <input type="checkbox"/> Please tell us about it below.	Yes <input type="checkbox"/> Please tell us about it below.

Tell us the name and registration number of the minder.				
---	--	--	--	--

How much do you pay a week?	£ a week	£ a week	£ a week	£ a week
-----------------------------	----------	----------	----------	----------

We need to see proof of this. We need to see proof of this. We need to see proof of this. We need to see proof of this.

Part 3 About other people who live with you

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

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

Do any adults usually live with you and your partner? **No** Go to Part 4.
 By *adults* we mean people over 16 who nobody gets Child Benefit for. **Yes** Fill in this section.

	First person	Second person	Third person
Last name			
Other names			
Date of birth	/ /	/ /	/ /
Their relationship to you or your partner			

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

	First person	Second person	Third person
Do they get Income Support, income-based Jobseeker's Allowance or Pension Credit?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do they get Disability Living Allowance or Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input type="text"/> a week
Are they registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. <input type="text"/>
Do they pay rent or money for board and lodgings to you or your partner? How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. £ <input type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. £ <input type="text"/> a week
Does this include money for food?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does this include money for heating?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. <input type="text"/>
When did they go in?	<input type="text"/>	<input type="text"/>	<input type="text"/>
When are they due to come out (if you know)?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Tell us their earnings before any deductions.	£ <input type="text"/> <small>We need to see proof of their earnings.</small>	£ <input type="text"/> <small>We need to see proof of their earnings.</small>	£ <input type="text"/> <small>We need to see proof of their earnings.</small>
Do they have any other income at all? <small>Make sure you tell us about all other income they have.</small>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below. <input type="text"/>
<small>This includes any benefits or allowances you have not told us about on this form and interest from savings and investments.</small>			
1 Where does this income come from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
2 Where does this income come from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
3 Where does this income come from?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much is it before deductions?	£ <input type="text"/> <small>We need to see proof of their income.</small>	£ <input type="text"/> <small>We need to see proof of their income.</small>	£ <input type="text"/> <small>We need to see proof of their income.</small>

Are any of the people who normally live with you married to each other or living together as if they were married? We call these people *partners*.

No
 Yes Tell us their names below.

<input type="text"/>	is the partner of	<input type="text"/>
<input type="text"/>	is the partner of	<input type="text"/>

Part 4 About Income Support, income-based Jobseeker's Allowance and Pension Credit

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

No Go to Part 5.
 Yes Answer both the questions in this part.

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

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

No
 Yes When did you start getting it?
 / /

No
 Yes When did they start getting it?
 / /

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

No
 Yes When did you claim?
 / /

No
 Yes When did they claim?
 / /

Which benefit are you getting or waiting to hear about?

<input type="checkbox"/> Income Support	<input type="checkbox"/> Income Support
<input type="checkbox"/> income-based Jobseeker's Allowance	<input type="checkbox"/> income-based Jobseeker's Allowance
<input type="checkbox"/> Pension Credit	<input type="checkbox"/> Pension Credit

We must see evidence of your benefits, allowances or pension before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as evidence.

Part 5 About being self-employed

Are you or your partner self-employed?

No Go to Part 6.
 Yes Answer the questions on this page.

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

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

What kind of work do you do?

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

When did the business start?

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

What is the business address?

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

Do you have any business partners?

No <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> Tell us their name and address.	Yes <input type="checkbox"/> Tell us their name and address.
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Postcode	Postcode

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

You

No
Yes

Your partner

No
Yes

Do you pay into a private or company pension scheme?

No
Yes How much and how often?

£ every

No
Yes How much and how often?

£ every

We must see evidence of any earnings before we can decide how much benefit you can get. Read the checklist at **Part 16** to see what you can use as evidence. If you get tips or bonuses, tell us about these in **Part 15**.

Part 7 About any other work

Do you or your partner do any other work at all? This could be voluntary work or any other work, even if it is not paid work.

No Go to **Part 8**.
Yes Answer the questions in this section.

You

Your partner

What other work do you do?

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

Postcode

Postcode

When did you start this work?

/ /

/ /

How many hours a week do you usually work?

Do you get paid? If you only get expenses or tips, still tick **Yes** and give details.

No
Yes Tell us about it below.

No
Yes Tell us about it below.

How much do you get before any deductions?

£

£

How often are you paid?

Every

Every

We must see evidence of any earnings before we can decide how much benefit you can get. Read the checklist at **Part 16** to see what you can use as evidence.

Part 8 About benefits and pensions

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

No Go to **Part 9**.
Yes Answer the questions in this section. Tell us the full rate of the benefits before any deductions.

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

- Child Benefit
- Child Tax Credit
- Fostering Allowance
- Contribution-based Jobseeker's Allowance
- Maternity Allowance
- Working Tax Credit
- Incapacity Benefit
- Employment Support Allowance
- Industrial Injuries Disablement Benefit
- Industrial Death Benefit
- Carer's Allowance
- Severe Disablement Allowance
- Statutory Sick Pay
- Statutory Maternity Pay
- Statutory Paternity Pay
- Adoption Pay
- Bereavement Allowance
- Guardian's Allowance
- Pension Credit (including Savings Credit)
- State Retirement Pension
- War Disablement Benefit
- War Pension or War Widow's Pension
- Widow's or Widower's Benefit

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

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

	You	Your partner
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method?	<input type="checkbox"/> How much, how often and by what method?
	£ <input type="text"/> every <input type="text"/> by <input type="text"/>	£ <input type="text"/> every <input type="text"/> by <input type="text"/>
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method?	<input type="checkbox"/> How much, how often and by what method?
	£ <input type="text"/> every <input type="text"/> by <input type="text"/>	£ <input type="text"/> every <input type="text"/> by <input type="text"/>
The name of the benefit or pension	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/> How much, how often and by what method?	<input type="checkbox"/> How much, how often and by what method?
	£ <input type="text"/> every <input type="text"/> by <input type="text"/>	£ <input type="text"/> every <input type="text"/> by <input type="text"/>

Part 9 About other money coming in

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

No Go to Part 10.

Yes Answer the questions on this page.

You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust.

This includes:

- occupational pensions
- work pensions and private pensions
- maintenance or child support for you, your partner or any of the children you have told us about on this form

- any cash payments
- money from a trust fund
- training allowances
- a student grant or loan

- any money you get from people living in your house as boarders, lodgers or subtenants
- any money received from ex-partners or partners who have died.

	Other money 1	Other money 2	Other money 3
What is the money for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets it?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do they get?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often?	Every <input type="text"/>	Every <input type="text"/>	Every <input type="text"/>
How is this paid?	<input type="text"/>	<input type="text"/>	<input type="text"/>
When did they start getting this income?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When is the income likely to go up?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Does anyone owe money to you, your partner or any children you are claiming for?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
What for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Who is it owed to?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are you expecting to get any money in the next 12 months?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
For example, a redundancy payment or a payment instead of notice or holiday.			
What for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

We must see evidence of any money coming in before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as evidence.

Do you own your home or have a mortgage?

- No Go to the next question.
 Yes Go to **Part 12**.

What sort of building do you live in?

Tick one box only.

- | | | |
|---|---|--|
| Detached house <input type="checkbox"/> | Flat in a house <input type="checkbox"/> | Caravan, mobile home or houseboat <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"/> | Hotel <input type="checkbox"/> |
| Maisonette <input type="checkbox"/> | Bedsit or rooms or a studio flat <input type="checkbox"/> | Residential nursing home <input type="checkbox"/> |
| Detached bungalow <input type="checkbox"/> | Hostel <input type="checkbox"/> | Residential care home <input type="checkbox"/> |
| Semi-detached bungalow <input type="checkbox"/> | Other – give details <input type="checkbox"/> _____ | |

How many floors does your home have?

Does your home have central heating?

- No Yes

Does your home have a garden?

- No Yes

Does your home have a garage?

- No Yes

Does your home have a parking space?

- No Yes

Do you and your household live in only part of the building you have ticked?

- No Yes

Where in the building do you live?

- At the front In the middle At the back

Which floors do you live on?

For example, the ground floor or first floor.

How many rooms are there in the building?

Living rooms

	In the whole building	Just for you and your household	That you share with other people
Bedsitting rooms	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Bedrooms	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Bathrooms or shower rooms	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Toilets	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Kitchens	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Other rooms	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Do you use your home for business?

- No Yes

Do you have a main home somewhere else?

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

- No
 Yes Tell us about it below.

What is the address?

Postcode

Do you pay rent on this home?

- No
 Yes How much? £

Has your rent been registered as a fair rent by a rent officer? No Yes Please send us the notice of registration form R05.

Do you have any weeks when you do not have to pay rent? No Yes How many in a year?

Are you behind with your rent? No Yes By how many weeks?

Does your rent include money for the following?

Service	Yes	No	Amount
Council Tax	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Water rates	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Heating	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Electricity	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Gas	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Hot water	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Fuel for cooking	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Room cleaning	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>

Service	Yes	No	Amount
Laundry	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Garage or parking space	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Telephone	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Window cleaning	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Gardening	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Emergency alarm	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
TV/video/satellite/cable	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Other – please specify below	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>

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

Who receives the Council Tax bill for your home? You Your landlord Someone else

Do you get gas and electricity bills in your own name? No Yes

Are meals included in the rent? No Yes If 'Yes', which meals are provided?

Breakfast Lunch Evening meal

Who provides the meals? Landlord You Other Please specify

Personal care and support No

Yes How much? £ every

Do you pay any service charges separate from your rent, for example, for cleaning or lighting in shared areas, an alarm system, a warden, general counselling or support, meals, or lift maintenance?

No

Yes How much? £ every

Apart from you and your household, is there anyone else who lives in the property?

No Yes If 'Yes', please give details.

Part 12 Temporary absence

Are you living away from home at the moment? No Go to Part 13.

Yes Tell us about it below.

Why are you not living at home?

When did you last live at home? / /

When do you expect to go back home? / /

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

Postcode

Have you sublet your home?

No Yes

Who lives there now?

We must see evidence of your rent and tenancy before we can decide how much benefit you can get. Read the checklist at Part 16 to see what you can use as evidence.

Part 13 About your investments or savings

Important: You must answer all the questions by ticking the relevant box and writing the current value of all savings and investments, even if you are overdrawn. To check your savings, we need to see the last two full monthly bank or building society statements or passbooks, share accounts, certificates and so on.

Do you or your partner have any of the following? If 'Yes', please give the current value.

If you do not have enough space for all your investments details, please use an extra sheet of paper.

	You	Your partner
Cash savings	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
Bank accounts or Building society accounts	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Please give the bank or building society name and the amount each account holds.	Name of Account <input style="width: 100%; height: 20px;" type="text"/>	Name of Account <input style="width: 100%; height: 20px;" type="text"/>
	Account number <input style="width: 100%; height: 20px;" type="text"/>	Account number <input style="width: 100%; height: 20px;" type="text"/>
	Amount in account £ <input style="width: 100px;" type="text"/>	Amount in account £ <input style="width: 100px;" type="text"/>
	Name of Account <input style="width: 100%; height: 20px;" type="text"/>	Name of Account <input style="width: 100%; height: 20px;" type="text"/>
	Account number <input style="width: 100%; height: 20px;" type="text"/>	Account number <input style="width: 100%; height: 20px;" type="text"/>
	Amount in account £ <input style="width: 100px;" type="text"/>	Amount in account £ <input style="width: 100px;" type="text"/>
Other bonds (not including post office bonds)	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	Issue number	Number of units
	<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"/>
Investments or assets outside the UK	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	Issue number	Number of units
	<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"/>
National Savings Certificates	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	Issue number	Number of units
	<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"/>
Stocks and shares	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width: 100px;" type="text"/>
	Company	Number held
	<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"/>
If 'Yes', please give the name of the company and the number you hold.	Company	Number held
	<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"/>
	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

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

<p>Post office savings bonds No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>
--	---

<p>If 'Yes', give the name, type and number you hold. <input style="width:100%; height:30px;" type="text"/></p>	<p><input style="width:100%; height:30px;" type="text"/></p>
---	--

<p>Post office accounts No <input type="checkbox"/> Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/></p>
---	---

<p>Please give the type of account and the amount each account holds.</p> <p>Name of Account <input style="width:100%; height:25px;" type="text"/></p>	<p>Name of Account <input style="width:100%; height:25px;" type="text"/></p>
--	--

<p>Account number <input style="width:150px;" type="text"/> Amount in account <input style="width:150px;" type="text"/></p>	<p>Account number <input style="width:150px;" type="text"/> Amount in account <input style="width:150px;" type="text"/></p>
---	---

<p>Name of Account <input style="width:100%; height:25px;" type="text"/></p>	<p>Name of Account <input style="width:100%; height:25px;" type="text"/></p>
--	--

<p>Account number <input style="width:150px;" type="text"/> Amount in account <input style="width:150px;" type="text"/></p>	<p>Account number <input style="width:150px;" type="text"/> Amount in account <input style="width:150px;" type="text"/></p>
---	---

<p>Name of Account <input style="width:100%; height:25px;" type="text"/></p>	<p>Name of Account <input style="width:100%; height:25px;" type="text"/></p>
--	--

<p>Account number <input style="width:150px;" type="text"/> Amount in account <input style="width:150px;" type="text"/></p>	<p>Account number <input style="width:150px;" type="text"/> Amount in account <input style="width:150px;" type="text"/></p>
---	---

<p>Premium Bonds No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>
--	---

<p>Unit trusts, ISAs, PEPs, TESSAs or other investments No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>
---	---

<p>Any other savings or investments No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>	<p>No <input type="checkbox"/> Yes <input type="checkbox"/> £ <input style="width:150px;" type="text"/></p>
---	---

Do you have any other type of investment which you have not already mentioned on this form (including investments held jointly with other people, for example, a son or daughter)?

No Yes

Do you or your partner own or partly own a property other than the one you live in? No Yes

Property includes a holiday home, property that you rent to someone else and timeshare property. You must provide evidence of any other property you own.

If 'Yes', please tell us the address.

How much is it worth? £

Have you or your partner received:

- a Far Eastern Prisoner of War Compensation payment; or
- a compensation payment made to victims of atrocities that happened during the Second World War?

We need to know this to make sure we do not count it as part of your savings.

No

Yes What payment did you receive? Who received the payment?

A Far Eastern Prisoner of War Compensation payment You Your partner

A compensation payment made to victims of atrocities that happened during the Second World War You Your partner

Have you, your partner or any children you are claiming for received a payment from the vCJD (Creutzfeldt-Jakob Disease) Trust? No Yes We will write to you about it.

Please note those tenants affected by the Local Housing Allowance will normally be paid direct to themselves who will then pay the landlord. However, we will consider making direct payments to landlords for tenants who are unable to manage their own financial affairs; or who are not capable of taking responsibility for the payment of their own rent; or if they are 8 weeks or more in arrears with their rent. If you wish us to consider this please give your reasons below at Part 15.

Please tell us here how you want your Housing Benefit entitlement to be paid:

Direct into a bank, building society, giro or National Savings Bank account No Yes

If you would like your Housing Benefit to be paid direct into your account, please give the following details:

Name of bank or building society:

Address of bank or building society:

Postcode

Whose name is the account in?

Account number:

Sort code:

You must tell us how you want us to pay your Housing Benefit.

Would you like your Housing benefit paid straight into an account or by cheque? (Tick the appropriate box.)

Straight into an account By cheque

If you are having the benefit paid straight to you, how often do you want it paid?

Every two weeks Every four weeks

If you are not affected by the Local Housing Allowance we may be able to pay Housing Benefit directly to your landlord. Tick here if you would like us to pay this way.

No

Yes

If you ticked 'Yes', don't forget to fill in the tear-off sheet 2 at the back of this form. Then tear it out and give it to your landlord to sign. You or they must then return the authorisation sheet to us.

Part 15 Anything else you need to tell us

Please use this space 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 any separate sheets of paper with this form, please tell us how many.

I am enclosing a filled-in *Paying benefit to your landlord* form.

I will send you a filled-in *Paying benefit to your landlord* form later.

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

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

If you do not provide all the evidence we need, we might not be able to pay you any benefit. We need the same evidence for your partner, if you have one.

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

- **Evidence of identity**
Such as a birth certificate, marriage certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit, EEC identity card or recent gas or electricity bill. At least two forms of proof of identity required for both claimant and partner.
- **Evidence of your address**
Such as a recently paid gas or electricity bill or a TV licence.
- **Evidence of National Insurance number**
Such as a National Insurance number card, payslips or letters from social security or the tax office.
- **Evidence of savings and investments**
Such as all your bank, building society or post office books, full bank statements, or certificates for Premium Bonds, National Savings Certificates, ISAs, stocks, shares and unit trusts. We need to see evidence of any interest or dividends you get on investments and savings. We need to see this evidence for all adults in your household as well. The evidence you send must show details for at least the last two months.
- **Evidence of earnings**
We also need this for any other adults living in your home.
This means your last five payslips if you are paid every week, your last three payslips if you are paid every two weeks, or your last two payslips if you are paid every month. If you or your partner are self-employed, we need to see your accounts for the last financial year or, if you have been trading for less than six months, a summary of your trading records so far.
- **Evidence of other income**
We also need this for any other adults living in your home.
Such as pension slips from a former employer or a letter from the court showing how much maintenance you are getting. We need to see evidence of any money people pay you for board and lodgings.
- **Evidence of benefits, allowances or pensions**
We also need this for any other adults living in your home.
Such as current award notices or letters from social security confirming how much you get. If you do not have evidence, let us know straight away.
- **Evidence of private rent and tenancy**
Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord.
- **Evidence of other money paid out**
Such as letters about student grants or maintenance, agreements or receipts from registered childcarers.

Make sure you read and sign the declaration on pages 17 and 18.

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

Date you want to claim benefit from

For this earlier period, were your circumstances the same as on this form?

No Yes

Tell us why you have not claimed before, giving as much detail as possible.

Part 18 Declaration

If this form has been filled in by someone other than the person claiming, please tell us why you are filling in this form for the person claiming.

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

Name of the person who filled in the form

Signature

Relationship to the person claiming

Date

In the future, do you want someone else to act for you in relation to your claim? No Yes

If 'Yes', please give the name and address of that person.

Phone: _____

We will need to write to your named person, to get their approval.

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

Please read this declaration carefully before you sign and date it. If both you and your partner are claiming, you must both read the declaration before signing and dating the form. This declaration applies to both the person claiming and their partner.

- This is my claim for Housing Benefit or Council Tax Benefit (or both).
- I declare that the information I have given on this form is correct and complete as far as I know.
- I authorise you to check the information I have given with other sections within the council, the Rent Service, other councils or authorities handling public funds, as long as you do so only to prevent and detect fraud and error.
- I understand that you will share the information you hold on your computer to prevent and detect fraud and error by providing information to the Housing Benefit Matching Services and the Audit Commission's National Fraud Initiative.
- I understand that if I give incorrect or incomplete information or documents, or fail to report any changes that might affect my benefit, I may be prosecuted.
- I know I must tell you immediately of any changes that may affect the amount of benefit I receive.

I know I must tell you, my local council if:

- I start or stop getting Income Support, Jobseeker's Allowance, Pension Credit or any other benefit;
 - the rent goes up or down (private tenants only);
 - my wages go up or down (for example, the work is casual and the hours vary or if I work overtime);
 - any other money from family or that I have coming in goes up or down, or my or my family's savings change;
 - anyone living with me has a change in their situation, such as starting work;
 - anyone moves in or out, even if it is a temporary move; and
 - the Home Office refuse my application for asylum.
- I understand that it is my duty to tell you about any of the changes above and that I cannot rely on any other organisation or person to tell the council on my behalf.
 - I know and accept that if I do not report any changes affecting my benefit, or I give incorrect or incomplete information, I must repay any overpayment.
 - I accept that you may prosecute any person who gives incorrect, incomplete or misleading information to fraudulently claim benefit.

The information you have given us will be used to manage your benefit claim and will be shared with other central or local government bodies in line with the council's registration under the Data Protection Act 1998.

We would like to share the information you have given us to provide other council services. If you **do not** want us to share your information for this purpose, please tick here.

Your signature

Date

Your partner's
signature

Date

Sharing information with your landlord

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

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

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

If you give us permission by signing this form, we will only share information with your landlord if you have agreed that your Housing Benefit can be paid direct to your landlord.

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

- you have claimed or renewed your claim for Housing Benefit;
- we have made a decision on your claim; or
- we need more information to make a decision on your claim, and what that information may be.

We will not give your landlord any information about:

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

You can withdraw your permission at any time.

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

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

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

Signature

Your full name
(in CAPITAL LETTERS)

Date

Your address

Postcode

If you are not affected by the local housing allowance and you want us to pay your benefit straight to your landlord, you must sign this declaration.

Your declaration

Please pay my Housing Benefit straight to my landlord.

- I understand that I must always tell you about any change in my circumstances.
- I understand that if I do not tell you about any change of circumstances and you pay me too much benefit because of this, I may have to pay back the extra benefit.
- I understand that I may be prosecuted if I do not tell you about any change of circumstances.

Signature

Full name
(in CAPITAL LETTERS)

Date

Address

Your landlord's, landlady's or agent's declaration

I confirm that I am or represent the landlord or landlady of this tenant.

I agree to accept Housing Benefit payments for the tenant named in this form.

I understand that by law:

- I must tell you straight away if I find out about any change in the tenant's circumstances;
- you can stop paying benefit to me if I do not tell you about any change of circumstances;
- I can be prosecuted if I accept Housing Benefit which I know I am not entitled to; and
- if you pay me too much Housing Benefit for any tenant, I may have to repay it. You can take the amount of overpaid benefit from the benefit I get for any other tenants. This will not affect their rent.

Signature

Date

Notes for filling in the claim form for Housing Benefit and Council Tax Benefit for you to remove and keep for future reference

- Filling in the form
- About this form
- About Housing Benefit and Council Tax Benefit
- Second Adult Rebate
- Proof
- If you need help to fill in the form
- What to do next
- Changes you must tell us about
- How we collect and use information

Filling in the form

Use black ink to fill in the form. Do not use pencil. If you make a mistake, just cross it out and put the right answer next to it. Please put your initial next to the correction. Do not use correction fluid or tape.

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

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

About this form

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

You may not have to fill in all parts of the form (for example, a few questions would not apply to most pensioners) but you must fill in any part that is relevant to you. Every part starts with a question to help you decide if you need to fill in that part.

About Housing Benefit and Council Tax Benefit

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

Second Adult Rebate

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

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

If you are claiming *Second Adult Rebate*, only fill in **Part 1**, **Part 3** and **Part 18** of this form.

Proof

We will need to see proof of some of the things you write about on the form. There is a checklist in **Part 16** of the form to help you. If you are not sure if we need to see proof of something, get in touch with us. We will tell you what we need to see. We cannot pay you benefit until we have seen the proof we need.

If you need help to fill in the form

If you do not understand any part of the form, or you need help filling it in, call in or phone our Customer Contact Centre (01785 619478) Monday to Thursday 8.30am to 5.00pm, Friday 8.30am to 4.30pm. Or contact your local citizens advice bureau.

If you cannot leave your home because you are elderly, or because you have serious illness or disability, we can visit you. All visiting staff carry identity cards. Ask to see proof of identity before letting anyone into your home. Phone us on 01785 619478 to request a visit.

What to do next

When you have filled in the form, sign it and send it to us with the proof we need to see. Or, you can take the form and proofs to the Council Offices. Do not send valuable items such as bank books or passports in the post. Bring them to our reception and we will get the information we need and give them back to you.

If you cannot get the proof we need straight away, do not worry. Send the form to us with the proof you do have and let us know that you will be sending some proof later. If you do not send the form to us straight away, you might lose money.

Changes you must tell us about

You must tell us if:

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

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

How we collect and use information

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

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

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

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

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

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

Stafford Borough Council is 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 that information, you can ask.

If you need any help filling in the application form, please contact us at:

**The Benefits Service
Stafford Borough Council
Civic Centre, Riverside, Stafford ST16 3AQ.
Phone: 01785 619478**

اگر آپ کو درخواست فارم پُر کرنے کے لئے مدد کی ضرورت ہو تو براہ مہربانی بینیفٹس سروس، سٹافورڈ بروکونسل سے ٹیلی فون نمبر: (01785 619478) پر رابطہ کریں۔	Urdu <input type="checkbox"/>
ਜੇਕਰ ਤੁਹਾਨੂੰ ਅਰਜ਼ੀ-ਪੱਤਰ ਭਰਨ ਲਈ ਕੋਈ ਸਹਾਇਤਾ ਚਾਹੀਦੀ ਹੈ ਤਾਂ, ਕਿਰਪਾ ਕਰਕੇ ਸਾਡੇ ਨਾਲ ਬੈਨੀਫਿਟਸ ਸਰਵਿਸ, ਸਟੈਫੋਰਡ ਬਾਰੋ ਕੌਂਸਲ ਵਿਖੇ ਟੈਲੀਫੋਨ (01785 619478) ਤੇ ਸੰਪਰਕ ਕਰੋ।	Punjabi <input type="checkbox"/>
यदि आपको अर्जी फ़ार्म अर्थात आवेदन पत्र भरने में कोई मदद की जरूरत है तो, कृपया बेनिफिट्स सर्विस, स्टेफोर्ड बरो काउन्सिल पर हमारा संपर्क करें (01785 619478)	Hindi <input type="checkbox"/>
إذا كنت في حاجة إلى المساعدة في ملء استمارة التقديم هذه؛ من فضلك اتصل بنا على خدمة المنتفعين في بلدية ستافورد بورو على الرقم التالي: (01785 619478)	Arabic <input type="checkbox"/>