

# Housing Benefit & Council Tax Benefit

## Self-employed earnings information

# SE1



Local Authority Reference No

Please complete this form and return it to the Benefits Section, Herefordshire Council, Plough Lane, Hereford HR4 0LE

### 1 About yourself

Title  Last name  Other names Address   
Post code 

### 2 About your business

Name of business Business address   
Post code Type of business Date business commenced  Start date of current financial year Average number of hours worked per week Is your business a partnership?  Yes  NoIf yes, what percentage of the total profit/loss is yours? *(Please provide partnership agreement)*  %Is your husband/wife a partner in the business?  Yes  NoIf yes, what percentage of the profit/loss is theirs?  %Is your husband/wife on the payroll of the business?  Yes  NoIf yes, what are his/her earnings? £  every Are there any other people on the payroll of the business?  Yes  NoDo you use part of your own home for business purposes?  Yes  No

If yes, give details:

  

### 3 About the business income

Do you have any prepared accounts (audited or otherwise) for the last financial year?  Yes  NoIf YES, return an original set of accounts with this form - go to **Section 5**

If NO, state reason why and the date you expect to have them

If you do not have any prepared accounts or if you have not been trading for a full year, please complete **Section 4**Do you have your last Schedule D Tax Assessment?  Yes  No

If YES, return it with this form

If NO, state reason why and the date you expect to receive it.

## 4 Income and expenditure

Complete this section only if you do not have any prepared accounts for the last financial year or if you have not been trading for a full year.

For Office use only

State exact period covered

From

To

This should be your last financial year OR if you have not been trading for a year it should be the date your business started until current date.

SALES/TAKINGS/INCOME	£		+
<b>Plus</b> SINGLE REGENERATION BUDGET	£		+
<b>Plus</b> ENTERPRISE ALLOWANCE	£		+
<b>Plus</b> CLOSING STOCK	£		+
<b>Less</b> COST OF SALES (Purchases)	£		-
<b>Less</b> VAT PAID IN EXCESS OF VAT RECEIVED	£		-
<b>Less</b> OPENING STOCK	£		-
<b>Gross Profit</b>	£		

**EXPENSES - You must only include amounts that relate solely to the business, e.g. Telephone - if calls are made you must apportion the total cost in accordance with the amount of private use and enter the amount for business use only.**

DRAWINGS (Cash or Stock)	£	
WAGES PAID OUT:		
TO SELF	£	
TO SPOUSE/PARTNER	£	
TO OTHERS	£	
RENT <small>(Business Premises or proportion of your home rent attributed to business)</small>	£	
BUSINESS RATES	£	
HEATING AND LIGHTING	£	
CLEANING	£	
TELEPHONE	£	
BUSINESS INSURANCE	£	
ADVERTISING	£	
PRINTING AND STATIONERY	£	
POSTAGE	£	
ACCOUNTANTS CHARGE	£	
BANK CHARGES	£	
INTEREST PAYMENTS ON BUSINESS LOAN <small>(Please enclose copy of loan agreement)</small>	£	
REPAIR/REPLACEMENT OF BUSINESS ASSET <small>(Do not include motoring)</small>	£	
- Was this covered by insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
LEASING CHARGES	£	

For Office use only

- Please state what is leased:

For Office use only

BUSINESS ENTERTAINMENT

£

BAD DEBTS

£

- Please give details:

OTHER EXPENSES

£

- Please give details:

**MOTORING EXPENSES - You must only include amounts that relate solely to the business e.g. Petrol - if petrol is used you must apportion the total cost in accordance with the amount of private use and enter the amount for business use only.**

CAR LEASE

£

ROAD TAX

£

PETROL/DIESEL

£

REPAIRS

£

INSURANCE

£

Who owns the vehicle(s)?

Self  Business

If business, do you use other than for business?

Yes  No

For Office use only

**You may be required to provide proof of any expense items listed. The housing benefit office will contact you if necessary.**

Is it reasonable to assume that the trading figures for the next six months will be similar to those given above?

Yes  No

If NO, please explain the likely differences:

For Office use only

## 5 Other outgoings

NATIONAL INSURANCE

- Do you hold an exemption certificate?

Yes  No

If NO, please provide evidence of your contributions

£

Weekly/monthly/annually

PERSONAL PENSION CONTRIBUTIONS

Contribution to personal pension scheme

£

Weekly/monthly/annually

You must provide proof of the scheme to which you belong and of the payments made.

For Office use only

## 6 Declaration

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

**I understand the following**

- If I give information that is incorrect or incomplete, you may take action against me.
- 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 within the council, rent offices, and other councils.
- You may use any information I have provided in connection with this and any other claim for Social Security benefits that I have made or may make. You may give some information to other government organisations, if the law allows this.

**I know** I must let the council know about any changes in my circumstances, which might affect my claim.

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

Signature of person claiming

Date