

Your Housing Benefit reference number
(this will start with '500' and is 9 digits long)

500

Your name

Your current address

Your phone number

Your email address

Postcode:

IMPORTANT: Please complete and return this form within 10 days of receipt together with all original documents requested in each section. You are required to provide proof of income and savings even if there has been no change. Failure to do so will result in your Housing Benefit being suspended and your Council Tax Reduction being terminated.

PART 1 – People who live with you

Please list the names of everybody who normally lives with you. If no one lives with you, please write 'None'.

| Name | Relationship to you | Date of birth |
|------|---------------------|---------------|
| | | |
| | | |
| | | |
| | | |
| | | |

If anyone has moved in or out of your property, please confirm the date the change happened and their previous address or forwarding address

PART 2 – Earnings

Please confirm all earnings you/your partner/members of the household receive. If you do not have any, please write 'none'.

PLEASE SUPPLY THE LAST 2 MONTHS/5 WEEKLY OR LAST 3 FORTNIGHTLY WAGE SLIPS. IF YOU ARE SELF EMPLOYED YOU WILL NEED TO COMPLETE A SE1 FORM WHICH CAN BE FOUND AT www.herefordshire.gov.uk/se1 OR PROVIDE YOUR LATEST SET OF ACCOUNTS.

You

| Name and address of employer or your business if self-employed | Amount | How Often? |
|--|--------|------------|
| | £ | |
| | £ | |

Your Partner

| Name and address of employer or their business if self-employed | Amount | How Often? |
|---|--------|------------|
| | £ | |
| | £ | |

Other members of the household

| Name and address of employer or their business if self-employed | Household Member | Amount | How Often? |
|---|------------------|--------|------------|
| | | £ | |
| | | £ | |

If any of these details have changed for you/your partner/members of the household since you last contacted us please confirm the change and the date, i.e. wage increase, change of employer and increase in hours.

You will also need to supply new payslips since the change happened.

PART 3 - Income from benefits/pensions

Please give details of all benefits and pensions you/your partner/members of the household receive. Please tell us what type of benefit, pension and the amount and frequency it is paid.

If you/your partner/members of your household do not receive any, please write 'none'.

YOU WILL NEED TO SUPPLY PROOF OF THESE PAYMENTS

You

| Type | Amount | Frequency |
|------|--------|-----------|
| | £ | |
| | £ | |
| | £ | |
| | £ | |

Your Partner

| Type | Amount | Frequency |
|------|--------|-----------|
| | £ | |
| | £ | |
| | £ | |
| | £ | |

Other members of the household

| Household Member | Type | Amount | Frequency |
|------------------|------|--------|-----------|
| | | £ | |
| | | £ | |
| | | £ | |
| | | £ | |

If benefits and/or pensions have changed since you last contacted us, please tell us the date of the change. **You will need to provide proof of the change.**

PART 4 – Any other income

Please give details of any other income you have not already told us about. This could include maintenance payments, Boarder/sub tenant income, income from a Home Income Plan, student grants/loans.

| Household Member | Type | Amount | Frequency |
|------------------|------|--------|-----------|
| | | £ | |
| | | £ | |
| | | £ | |
| | | £ | |

If other income has changed since you last contacted us please tell us the date of the change. **You will need to provide proof of the change.**

PART 5 – Your bank accounts, savings, shares, property and land

Please tell us about any savings, shares, bank accounts (even if overdrawn), property or land which you or your partner own. If you do not have any please write 'none'

PLEASE PROVIDE YOUR LAST TWO MONTHS BANK STATEMENTS FOR ALL ACCOUNTS HELD. PROOF OF SHARES WHERE APPLICABLE.

You

| Type of account | Amount | Bank |
|-----------------|--------|------|
| | £ | |
| | £ | |
| | £ | |

Your Partner

| Type of account | Amount | Bank |
|-----------------|--------|------|
| | £ | |
| | £ | |
| | £ | |

If any of these details have changed for you and/or your partner since you last contacted us please confirm the change and the date. **You will need to supply proof of this change.**

PART 6 – Money you pay

Please list here any money that you/your partner pay out, how much paid and how often and to Whom
PLEASE PROVIDE EITHER A LETTER OR RECEIPTS FROM YOUR CHILDCARE PROVIDER

| Type | Amount | How Often/To Whom |
|--|--------|-------------------|
| Childcare Costs | £ | |
| Parental Contributions to Students used in the calculation of a Student Loan/Grant | £ | |
| Other please specify | £ | |

If the money you pay out has changed since you last contacted us please tell us the date of the change. **You will need to provide proof of the change.**

| | |
|-------------------------------------|--|
| Who do you rent your property from? | |
| How much is your rent? | |
| How often do you pay your rent? | |

PART 7 - Rent/Landlord – only complete if claiming HOUSING BENEFIT

Has your rent or any other details changed since you last filled in a form? (Please circle) **YES** **NO**

If yes please tell us about the change and the date this happened? **You will need to show us proof of this change.**

PART 8 – Any other information

Please use this space to tell us anything further that you think we should know about.

PART 9 - 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 that I have provided to process my claim for Housing Benefit or Council Tax Reduction, or both. You may check some of the information with other sources as allowed by law.
- You may use any information I have provided in connection with this and any other claim to DWP benefits that I have made or may make. You may give some information to other Government departments, local authorities and private sector companies such as banks and organisations that may lend me money, if the law allows this.
- I know 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.

Signed

Date

**Signed
(Partner)**

Date

**Claimant
Partner**