

Name
Address
Postcode

Reference number
Date issued

Housing Benefit & Council Tax Support for people who have started work or have come off Income Support, Job Seekers Allowance, Pension Credit or Employment Support Allowance

Important - please take the time to read these notes below before you fill in this form.

Why we need you to fill in this form

We need to know about any new job or business you have and to check the details about your income and savings if these have changed too. This is because we need to make sure that we give you the right amount of benefit.

How to fill in this form

We need you to fill in **all** parts of the form, even if some of the details that you tell us about are the same as before. You must answer all the questions by ticking either Yes or No and writing details in where we ask for them. If you do not answer all the questions, we will have to write to you for the information, and we may have to stop your benefit in the meantime.

If there is not enough room on the form for you to write everything that you need to, please use the space in section 9. It will help us if you make it clear which part of the form it is that your information is about.

If you need any advice or have any problems filling in the form or providing proof, please ring us on the above phone number.

Use **black ink** to fill in this form and send it back to us as soon as you can.

Even if you do not have the proof we need at the moment, send this form back straight away. You can send us the proof or information later but please make sure you send **original documents** and put your name and address on everything you send.

What proof must I give?

As you go through the form it will tell you what proof you will need to send us. Remember that we need to see **original documents as we cannot accept photocopies**. We will aim to return your documents to you within two working days of having them. We are open 9.00am to 5.00pm Tuesday, Wednesday and Friday, and 9.00am till 12 noon on Monday and Thursday. You are also welcome to take your form and proof to any of the following Council Information Points. All original documents can be photocopied without charge at the Town Hall in Matlock, Ashbourne Leisure Centre, Bakewell Area Office or by staff working at your Housing Association landlord if the Council has entered into agreement with that landlord.

You have a duty to report all changes in your circumstance. Failure to do so may result in overpaid benefit being recovered from you.

Please return this form immediately – proofs that are not available can be provided to the Council.

Section 1

About you

In this part, give details about yourself and your partner, if you have one. By 'partner' we mean a person you are married to or have a civil partnership with, or a person you live with as if you were their husband, wife or civil partner.

	You	Your partner
Title (Mr, Mrs, Ms, Miss etc)	<input type="text"/>	<input type="text"/>
First names	<input type="text"/>	<input type="text"/>
Last name	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/> Age <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/> Age <input type="text"/>
National Insurance number	<input type="text"/>	<input type="text"/>
Daytime phone number	<input type="text"/>	This will help if we need to get in touch.
E-mail address	<input type="text"/>	Mobile <input type="text"/> No. <input type="text"/>

We now need to ask you about any work that you do and about any changes you have had in your income and savings. Remember to answer all of the questions that you need to. If there is not enough room for you to fill in everything that you need to tell us about, then use the space at the back of the form in section 9.

Section 2

Pension

Do you or your partner pay into a private pension scheme?

No Go to section 3.

Yes Please tell us about this here.

How much do you pay?

£

£

How often (weekly, fortnightly, four-weekly, monthly)?

Every

Every

Please provide proof of payment e.g. a statement or savings book if paid into an account

Section 3

Self-employed earnings

Are you or your partner self-employed?

No Go to section 4.

Yes Please tell us about it here.

We need to see the following as proof of your self-employed income. Please read this carefully to make sure you send us what we need.

- Your **latest audited** business accounts (Income and Expenditure Accounts or your Trading, Profit and Loss Accounts with your Balance Sheet).
- The **last three months** bank statements for your business and the **original** letter detailing any Government Business Allowance that you get.
- If you have a business partner, the **partnership agreement** and information to confirm the percentage of the business income you receive.
- If you have just started your business or have been trading for less than three months then please ring or write to us and we will be happy to advise you what to do next. Our phone number and address are on the front of this form.**

	You	Your partner
What is the business called?	<input type="text"/>	<input type="text"/>
What is the address of the business?	<input type="text"/>	<input type="text"/>
What is the telephone number for the business?	<input type="text"/>	<input type="text"/>

Section 3

Self-employed earnings (continued)

	You	Your partner
When did the business start?	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
What kind of work do you do?	<input type="text"/>	<input type="text"/>
How many hours a week do you normally work?	<input type="text"/> hours	<input type="text"/> hours
Do you have a business partner?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you earn each week?	£ <input type="text"/>	£ <input type="text"/>
Do you get a Government Business Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you get?	£ <input type="text"/>	£ <input type="text"/>
	every <input type="text"/>	every <input type="text"/>
Is this the only work you do?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Section 4 Earnings you get from someone you work for

Are you or your partner working (including voluntary work), getting Statutory Sick Pay, Statutory Maternity Pay or Statutory Paternity Pay?

No **Go to section 5.**

Yes Please tell us about this here.

Please give details of all the earnings that you and your partner are paid. If you or your partner have more than one job, you will need to tell us about each job that you have.

We need to see the following as proof of your and your partner's earnings, Statutory Sick Pay or Statutory Maternity Pay for each job that you have. We may check with your employer the details you give us. Please read this carefully to make sure you send us what we need.

- Your last five payslips if you are paid weekly, three if you are paid fortnightly or two if you are paid four-weekly or monthly. We do **not** accept brown-envelope payslips.
- A Certificate of Earnings can be provided if you request this. You will need to ask your employer to fill this in if you do not have any payslips or only get brown-envelope payslips, **we cannot accept handwritten pay slips.**
- If you have just started a new job then you may not have any or all of the payslips that we need. If so, send back your form with any payslips you do have already or a letter from your employer on headed paper telling us what they expect your earnings to be. We will still need to see your payslips as proof of what you get, so make sure that you send them to us straight away as soon as you get them. If you do not, then we will have to write and ask you for them and this might delay your benefit.
- If you have told us that your wages are paid into an account, please remember to tell us about this account in Section 8 (Accounts, Savings and Investments).

All documents provided must be originals. We cannot accept photocopies.

Job 1

	You	Your partner
Who do you work for?	<input type="text"/>	<input type="text"/>
What is the company's address?	<input type="text"/>	<input type="text"/>
Company phone number.	<input type="text"/>	<input type="text"/>
When did you start this job?	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>

Section 4 Earnings you get from someone you work for (continued)

	You	Your partner
What is your payroll number (this will be on your payslip)?	<input type="text"/>	<input type="text"/>
How many hours do you normally work each week?	<input type="text"/> hours	<input type="text"/> hours
How much are you paid?	£ <input type="text"/>	£ <input type="text"/>
How often are you paid (weekly, fortnightly, four-weekly, monthly)?	<input type="text"/>	<input type="text"/>
How are your wages paid (by cheque, cash, into an account)?	<input type="text"/>	<input type="text"/>
When is your next pay rise due?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you work regular overtime or get regular bonuses, tips or commission?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you get?	£ <input type="text"/>	£ <input type="text"/>
If this job is for a fixed period, what date will it end?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you get Statutory Sick Pay, Statutory Maternity Pay or Statutory Paternity Pay?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you get?	£ <input type="text"/>	£ <input type="text"/>
When did it start?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you or your partner have more than one job?	No <input type="checkbox"/> Go to Section 5. Yes <input type="checkbox"/> Please tell us about this here.	

Job 2

Who do you work for?	<input type="text"/>	<input type="text"/>
What is the company's address?	<input type="text"/>	<input type="text"/>
Company phone number.	<input type="text"/>	<input type="text"/>
When did you start this job?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is your payroll number (this will be on your payslip)?	<input type="text"/>	<input type="text"/>
How many hours do you normally work each week?	<input type="text"/> hours	<input type="text"/> hours
How much are you paid?	£ <input type="text"/>	£ <input type="text"/>
How often are you paid (weekly, fortnightly, four-weekly, monthly)?	<input type="text"/>	<input type="text"/>
How are your wages paid (by cheque, cash, into an account)?	<input type="text"/>	<input type="text"/>
When is your next pay rise due?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you work regular overtime or get regular bonuses, tips or commission?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you get?	£ <input type="text"/> every	£ <input type="text"/> every
If this job is for a fixed period, what date will it end?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Section 4 Earnings you get from someone you work for (continued)

	You	Your partner
Do you get Statutory Sick Pay, Statutory Maternity Pay or Statutory Paternity Pay?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
How much do you get?	£ <input type="text"/>	£ <input type="text"/>
When did it start?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

If you or your partner have more than two jobs, tell us about this in section 9.

Section 5 Benefit Income

We need to know about all the different benefits, allowances, pensions and tax credits that you get. This includes things like:

- Contribution-based Jobseeker's Allowance
- Contribution based Employment Support Allowance
- Child Benefit
- Pension Credit (Savings Credit)
- Industrial Injuries Disablement Benefit
- Disability Living Allowance or Personal Independence Payment
- Incapacity Benefit (short or long term)
- Child Tax Credit and/or Working Tax Credit
- Maternity Allowance
- State Retirement Pension
- War Widow's Pension and War Disablement Pension
- Attendance Allowance

Please note these are only examples. It is not a list of all the types of benefit income you can get.

If you or your partner are waiting to hear about a benefit income that you have applied for, please give us the details in the box below. Remember to write the date that you applied for this income.

If you or your partner do not have any benefit income, or are not waiting to hear about a benefit income that you have applied for, then go straight to section 6.

Please tell us here about any benefit income that you get now.

You	Name of benefit	How much?	How often?
		£ <input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>

Your partner	Name of benefit	How much?	How often?
		£ <input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>

You must send us up-to-date proof of all your benefit income. This could be a letter or a recent bank statement showing what you get. You can use your order book but do **not** send it through the post.

Section 6 Child care payments

You may be able to get more benefit if you have a child who is looked after by a registered childminder or who goes to a nursery, playscheme or after-school club.

Do you or your partner make payments for child care? No Yes **Go to section 7.**
We will write to you about this.

Section 7

Other income you receive

Please tell us here about any other income that you get. This includes things like works, service and occupational pensions, student grants, maintenance payments and private pensions. **If you or your partner do not have any other income then go straight to section 8.**

Please note these are only examples. It is not a list of all the types of benefit income you can get.

You	Name of income	How much?	How often?
		£	Every
		£	Every
		£	Every

Your partner	Name of income	How much?	How often?
		£	Every
		£	Every
		£	Every

We need proof of what you and your partner get. Please send us original documents.

Section 8

Accounts, savings and investments

Please tell us here about any accounts, cash savings and investments you or your partner have. This includes **all** bank, building society or post office accounts that you have, even if the accounts are overdrawn. We also need to know about any savings you have invested in bonds, savings certificates, stocks, shares, unit trusts as well as any property or land that you or your partner own. **If you or your partner do not have any accounts, cash savings, investments, property or land then go straight to section 9.**

We need proof of all your accounts, savings and investments. We accept the following.

- Bank, building society and post office statements or passbooks, even if the account is overdrawn. These must cover **at least the last two months**. We cannot accept balance slips showing the current amount.
- A letter from your bank or building society. This should show the type of account held, the account number, the current balance and details of any transactions for the previous two months.
- For investments or other savings, such as unit trusts, savings certificates, stocks, shares, bonds and so on, we need original documents showing proof that you own them.

All documents provided must be originals. We cannot accept photocopies.

You	Name of account or type of savings	How much?	Account Number
		£	
		£	
		£	

Your partner	Name of account or type of savings	How much?	Account Number
		£	
		£	
		£	

Forms filled in by someone other than the person claiming.

Please tell us why you are filling in this form for someone else.

I confirm that I have read each question to the person claiming benefit and I have accurately recorded the answers given.

Name of the person who filled in the form

Signature of the person

Relationship to the person claiming

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 Support, or both. You may check some of the information with other sources within Derbyshire Dales District 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, immediately in writing.

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

Your signature

Date

Your partner's signature

Date

Warning: Any person making a false statement or failing to report a change in their circumstances or withholding information may be prosecuted.

How we collect and use information

The information collected by Derbyshire Dales District Council, on this form and from supporting evidence, will be used to process your Housing Benefit and Council Tax Support claims. The information may be passed to the Department for Work & Pensions, Job Centre Plus and Her Majesty's Revenues & Customs as allowed by law.

We may check information you or anyone else has provided with other information we hold. We may also get information from certain other organisations, or give information to them, to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, as allowed by law. These other organisations include government departments and local authorities.

We will not reveal information about you to anyone outside Derbyshire Dales District Council or use information about you for any other purposes unless the law allows us to.

Derbyshire Dales District Council is the data controller for the purposes of the Data Protection Act 1998. If you want to know more about what information we have about you, or the way we use your information, you can ask at the Town Hall.