

**A claim form for Housing Benefit, Council Tax Benefit,  
Second Adult Rebate and free school meals**



Issue date:  
Reference:

**For office use only** **V6/0209**

Issuing office stamp:	Receiving office stamp:	Benefits office stamp:
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**About this form**

- This claim form has been designed to be as easy as possible to fill in. It may be rather long, but we have to ask a lot of questions to make sure that everyone who claims gets the right amount of benefit.
- Please read the 'Notes for filling in the claim form' carefully before you fill in this form.
- Where we ask for proof we need to see original documents wherever possible. We will return them to you as soon as possible.
- If you do not provide the proof we ask for, we cannot consider your claim for benefit.

**We can make this information available in other formats and languages on request. Contact us at:**

<b>The Council Tax Offices</b>	<b>Phone:</b>	<b>01942 828644</b>
<b>PO Box 100</b>	<b>Fax:</b>	<b>01942 828613</b>
<b>Moore Street East</b>	<b>E-mail:</b>	<b>benefits@wigan.gov.uk</b>
<b>Whelley</b>	<b>Website:</b>	<b>www.wigan.gov.uk</b>
<b>Wigan</b>	<b>Textphone (for people who</b>	<b>01942 828725</b>
<b>WN1 3DS.</b>	<b>are hard of hearing):</b>	

## How to fill this form in

- Please write in CAPITAL LETTERS.
- Please fill this form in with black ink. Do not use pencil.
- Do not use correction fluid or tape.
- Please fill in all the sections that apply to you.
- If you make a mistake, cross it out and put the right answer next to it.

## Section 1 Your contact details

Full name:

Address:

  
  
  

Postcode:

Your phone number:

Your email address:

This will help us contact you quickly if we have a question about your claim and we may use it to update your Council Tax records.

## Section 2 The benefit you want to claim

Which benefits are you claiming? (Tick all boxes that apply.)

Housing Benefit

Council Tax Benefit

Free school meals

If you are only claiming this benefit fill in sections 1, 2, 3, 4, 5, 7, 11 and 20.

Second Adult Rebate

If you are only claiming this benefit fill in sections 1, 2, 3, 4, 6, 19 and 20.

## Section 3 About your home

Are you:

• a home owner or buying your home?

• a council tenant?

• living with your parents or relatives?

• living in a hostel?

• a joint tenant or joint owner?

• other?

• renting from a housing association?

• renting from a private landlord?

• living in board or lodgings?

• subletting from another tenant?

Who with?

Please explain.

## Section 4 About you and your partner

**Do you have a partner who normally lives with you?**

**No**  Answer all the questions about yourself.

A partner means someone 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. A civil partnership is a formal arrangement that gives same-sex couples the same legal rights as married couples.

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

**Title** (Mr, Mrs, Ms and so on):

You
<input type="text"/>

Your partner
<input type="text"/>

**Full name:**



**Any other last name you have used:**



**Address you want to claim benefit for:**

  
  

  
  


Postcode:

Postcode:

**Date of birth:**

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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Letters      Numbers      Letter

Letters      Numbers      Letter

**National Insurance number:**

<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"/>	<input type="text"/>
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<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"/>	<input type="text"/>
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If you do not have a National Insurance number, or cannot find it, tick this box.

If your partner does not have a National Insurance number, or cannot find it, tick this box.

**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?**

You
-----

Your partner
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**No**

**No**

**Yes**  We will write to you about this.

**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?**

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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(The UK is England, Northern Ireland, Scotland and Wales.)

**If you are claiming Second Adult Rebate only, go to section 6.**

## Section 4 About you and your partner (continued)

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

**You**

**Your partner**

**No**

**No**

**Yes**  When did you claim?

**Yes**  When did they claim?

/ /

/ /

Which council did you claim from?

Which council did they claim from?

What name did you claim in?

What name did they claim in?

What address did you claim for?

What address did they claim for?

Postcode:

Postcode:

**Have you or your partner told the council that paid your benefit that you have moved?**

**No**

**No**

**Yes**

**Yes**

**If you have moved home in the last 12 months, tell us your last address.**

Postcode:

Postcode:

**Were you the home owner, a private tenant, a housing association tenant, a boarder or living with relatives or friends at this address?**

**When did you move to your current address?**

/ /



## Section 4 About you and your partner (continued)

**Do you or your partner have a vehicle from a mobility scheme?**

**You**

No

Yes

**Your partner**

No

Yes

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

No

Yes  How much?

£

How often?

Every:

No

Yes  How much?

£

How often?

Every:

**Are you or your partner a student?**

By student we mean anyone who is attending a course of study at an educational establishment.

No

Yes  Do you study full time or part time?

Full time

Part time

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

£  a year

No

Yes  Do they study full time or part time?

Full time

Part time

How much of their income is taken into account when working out their grant?

£  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?













We will contact you if we need any more information.

We will contact you if we need any more information.

## Section 5 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 a GCE A-level, SCE Higher level or GNVQ (advanced).

Are there any children in your household?

No  Go to **section 6**.

Yes  Answer all the questions in this section.  
If you need to tell us about more than four children, use a separate sheet of paper to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

	Child 1	Child 2
Full name:	<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"/>
The child's sex:	Boy <input type="checkbox"/> Girl <input type="checkbox"/>	Boy <input type="checkbox"/> Girl <input type="checkbox"/>
Child's relationship to you:	<input type="text"/>	<input type="text"/>
Child's relationship to your partner:	<input type="text"/>	<input type="text"/>
Child Benefit number:	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>
Does the child get Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £
	We need to see proof of this.	We need to see proof of this.

## Section 5 About children (continued)

**Child 1**

**Child 2**

**Is the child registered blind?**

**No**

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

**No**

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

**What is the child's usual address (if different from yours)?**

Postcode:

Postcode:

**What is the name and address of the child's school?**

Postcode:

Postcode:

**Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?**

**No**

**Yes**  Name and address of the minder:

**No**

**Yes**  Name and address of the minder:

Postcode:

Postcode:

The minder's registration number:

--

The minder's registration number:

--

How much do you pay a week?

£
---

How much do you pay a week?

£
---

We need to see proof of this.

We need to see proof of this.

**Is childcare provided every week?**

**No**  We will write to you about this.

**Yes**

**No**  We will write to you about this.

**Yes**

## Section 5 About children (continued)

	Child 3	Child 4
Full name:	<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"/>
The child's sex:	Boy <input type="checkbox"/> Girl <input type="checkbox"/>	Boy <input type="checkbox"/> Girl <input type="checkbox"/>
Child's relationship to you:	<input type="text"/>	<input type="text"/>
Child's relationship to your partner:	<input type="text"/>	<input type="text"/>
Child Benefit number:	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>
Does the child get Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £ We need to see proof of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> £ We need to see proof of this.
Is the child registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/> We need to see proof of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> We need to see proof of this.

## Section 5 About children (continued)

	Child 3	Child 4
What is the child's usual address (if different from yours)?	<div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding-left: 5px;">Postcode:</div>	<div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding-left: 5px;">Postcode:</div>
What is the name and address of the child's school?	<div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding-left: 5px;">Postcode:</div>	<div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding-left: 5px;">Postcode:</div>
Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?	<p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> Name and address of the minder:</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding-left: 5px;">Postcode:</div>	<p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> Name and address of the minder:</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border: 1px solid black; padding-left: 5px;">Postcode:</div>
	The minder's registration number:	The minder's registration number:
	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
	How much do you pay a week?	How much do you pay a week?
	£ <div style="border: 1px solid black; width: 150px; height: 20px;"></div>	£ <div style="border: 1px solid black; width: 150px; height: 20px;"></div>
	We need to see proof of this.	We need to see proof of this.



## Section 6 About other people who live with you (continued)

	Person 1	Person 2
<b>Do they get Disability Living Allowance or Attendance Allowance?</b>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ _____ a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ _____ a week
<b>Are they in hospital at the moment?</b>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? _____ / _____ / _____ When will they come out (if you know this)? _____ / _____ / _____	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? _____ / _____ / _____ When will they come out (if you know this)? _____ / _____ / _____
<b>Are they a full-time student, a student nurse, a care worker, an apprentice or on a youth training scheme?</b>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. _____	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which. _____
<b>Do they pay rent or money for board and lodging to you or your partner?</b>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ _____ a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ _____ a week
<b>Do they normally work for 16 hours or more a week?</b>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. £ _____ a week We need to see proof of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. £ _____ a week We need to see proof of this.

## Section 6 About other people who live with you (continued)

**Do they have any other income at all?**

You must include any benefits or allowances and any interest from savings and investments.

**No**  Go to **section 7**.

**Yes**  Give details below.

### Person 1

Name of first other income:

How much is it before deductions?

£  a week

We need to see proof of this.

Name of second other income:

How much is it before deductions?

£  a week

We need to see proof of this.

Name of third other income:

How much is it before deductions?

£  a week

We need to see proof of this.

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

**No**  Go to **section 7**.

**Yes**  Give details below.

### Person 1

Tell us their names and who they are the partner of.

### Person 2

Name of first other income:

How much is it before deductions?

£  a week

We need to see proof of this.

Name of second other income:

How much is it before deductions?

£  a week

We need to see proof of this.

Name of third other income:

How much is it before deductions?

£  a week

We need to see proof of this.

### Person 2

Tell us their names and who they are the partner of.

## Section 7 About Income Support, income-based Jobseeker's Allowance, income-related Employment and Support 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, income-related Employment and Support Allowance or Pension Credit?

No  Go to **section 8**.

Yes  Answer all the questions in this section.

Are you or your partner actually getting Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance or Pension Credit?

**You**

**Your partner**

No

No

Yes  When did you start getting it?

Yes  When did they start getting it?

/ /

/ /

If you have not told the Department for Work and Pensions about all of your income, savings and investments, please tell us on this form. You should also tell them straight away.

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

No

No

Yes  When did you claim?

Yes  When did they claim?

/ /

/ /

## Section 8 About being self-employed

Are you or your partner self-employed?

No  Go to **section 9**.

Yes  Answer all the questions in this section.

You must send 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.

What kind of work do you do?

**You**

**Your partner**

## Section 8 About being self-employed (continued)

When did the business start?



What is the business address?

Postcode:

Postcode:

Are there any other partners in the business?

No

Yes  Tell us their name and address.

No

Yes  Tell us their name and address.

Postcode:

Postcode:

How many hours a week do you normally work?



Did you get a Business Start-up Allowance?

No

Yes  How much?

No

Yes  How much?



How often?

Every:

How often?

Every:

Do you pay into a private pension scheme?

No

Yes  How much?

No

Yes  How much?



How often?

Every:

How often?

Every:

We need to see proof of this.

We need to see proof of this.

## Section 9 About working for an employer

Do you or your partner work for an employer?

No  Go to **section 10**.

Yes  Answer all the questions in this section.

If you or your partner work for more than one employer, use a separate sheet of paper to tell us all the information we ask for in this section about all the other employers.

Please tick this box if you are sending a separate sheet.

	You	Your partner
What kind of work do you do?	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
When did you start this job?	/ /	/ /
What is your employer's name and address?	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
	Postcode: <input style="width: 90%; height: 25px;" type="text"/>	Postcode: <input style="width: 90%; height: 25px;" type="text"/>
What is your employer's phone number?	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
What is your payroll, employee or staff number?	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
Are you employed for a limited period?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> When will you finish?	Yes <input type="checkbox"/> When will they finish?
	/ /	/ /
How often do you get paid?	Every: <input style="width: 90%; height: 25px;" type="text"/>	Every: <input style="width: 90%; height: 25px;" type="text"/>
How much do you get paid before tax and National Insurance are taken off?	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>
How are you paid?	Cash <input type="checkbox"/>	Cash <input type="checkbox"/>
	Cheque <input type="checkbox"/>	Cheque <input type="checkbox"/>
	Straight into a bank or building society <input type="checkbox"/>	Straight into a bank or building society <input type="checkbox"/>

## Section 9 About working for an employer (continued)

	You	Your partner
How many hours a week do you normally work?		
When was your last pay rise?	/ /	/ /
When will your next pay rise be?	/ /	/ /
Give details of any regular overtime, bonuses or commission.		
Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did this start? / /	No <input type="checkbox"/> Yes <input type="checkbox"/> When did this start? / /
Are you getting any other sick pay or maternity pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did this start? / /	No <input type="checkbox"/> Yes <input type="checkbox"/> When did this start? / /
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ How often? Every:	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ How often? Every:
	We need to see proof of this.	We need to see proof of this.
Can we contact your employer direct if we need more details?	No <input type="checkbox"/> Go to <b>section 10</b> . Yes <input type="checkbox"/>	No <input type="checkbox"/> Go to <b>section 10</b> . Yes <input type="checkbox"/>

This may help us to deal with your claim quicker.

**Section 9 About working for an employer (continued)**

**Permission to contact your employer**

	You	Your partner
<b>Name:</b>	<input type="text"/>	<input type="text"/>
<b>National Insurance number:</b>	<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"/>	<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"/>
<b>What is your payroll, employee or staff number?</b>	<input type="text"/>	<input type="text"/>
<p>I give you permission to contact my employer about my earnings and employment so that you can assess my entitlement to Housing Benefit and Council Tax Benefit.</p>		
<b>Signature:</b>	<input type="text"/>	<input type="text"/>
<b>Date:</b>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

## Section 10 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 unpaid.

**No**  Go to **section 11**.

**Yes**  Answer all the questions in this section.

**What other work do you do?**

You

Your partner

**When did you start this work?**

/ /
-----

/ /
-----

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

Postcode:

Postcode:

**How many hours a week do you normally work?**

--

--

**Do you get paid?**

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

**No**   
**Yes**  How much?

£
---

How often?

Every:
--------

We need to see proof of this.

**No**   
**Yes**  How much?

£
---

How often?

Every:
--------

We need to see proof of this.

## Section 11 About benefits and pensions

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

No  Go to **section 12**.

Yes  Answer all 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 and are waiting to hear about.

If you need to tell us about more than three benefits or pensions, use a separate sheet to give us the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

- Bereavement Allowance
- Carer's Allowance (Invalid Care Allowance)
- Child Benefit
- Contribution-based Jobseeker's Allowance
- Contribution-based Employment and Support Allowance
- Fostering Allowance
- Guardian's Allowance
- Incapacity Benefit
- Industrial Injuries Disablement Benefit
- Pension Credit (the savings part)
- State Retirement Pension
- Severe Disablement Allowance
- Statutory Maternity Pay or Paternity Pay
- Statutory Sick Pay
- War Disablement Benefit, War Pension or War Widow's Pension
- Widow's, Widowed Mother's or Widower's Benefits
- Working Tax Credit or Child Tax Credit

If you are getting or have claimed any benefit that is not listed, tell us about it.

### Benefit or pension 1

	You	Your partner
<b>The name of the benefit or pension:</b>	<input type="text"/>	<input type="text"/>
<b>Are you:</b>	waiting to hear? <input type="checkbox"/>	waiting to hear? <input type="checkbox"/>
	getting now? <input type="checkbox"/> How much?	getting now? <input type="checkbox"/> How much?
	<input type="text"/> £	<input type="text"/> £
	How often?	How often?
	Every: <input type="text"/>	Every: <input type="text"/>
	How is this paid?	How is this paid?
	<input type="text"/>	<input type="text"/>
	We need to see proof of this.	We need to see proof of this.

## Section 11 About benefits and pensions (continued)

### Benefit or pension 2

	You	Your partner
The name of the benefit or pension:	<input type="text"/>	<input type="text"/>
Are you:	waiting to hear? <input type="checkbox"/>	waiting to hear? <input type="checkbox"/>
	getting now? <input type="checkbox"/> How much?	getting now? <input type="checkbox"/> How much?
	£ <input type="text"/>	£ <input type="text"/>
	How often?	How often?
	Every: <input type="text"/>	Every: <input type="text"/>
	How is this paid?	How is this paid?
	<input type="text"/>	<input type="text"/>
	We need to see proof of this.	We need to see proof of this.

### Benefit or pension 3

	You	Your partner
The name of the benefit or pension:	<input type="text"/>	<input type="text"/>
Are you:	waiting to hear? <input type="checkbox"/>	waiting to hear? <input type="checkbox"/>
	getting now? <input type="checkbox"/> How much?	getting now? <input type="checkbox"/> How much?
	£ <input type="text"/>	£ <input type="text"/>
	How often?	How often?
	Every: <input type="text"/>	Every: <input type="text"/>
	How is this paid?	How is this paid?
	<input type="text"/>	<input type="text"/>
	We need to see proof of this.	We need to see proof of this.

## Section 12 About other money coming in

**Do you or your partner have any money coming in (or expect to have some money coming in) that you have not already told us about?**

**No**  Go to **section 13**.

**Yes**  Answer all the questions in this section.

If you or your partner get more than four other types of money, tell us about all the other types on a separate sheet of paper.

**Please tick this box if you are sending a separate sheet.**

Examples of other money coming in include:

- money from a trust fund;
- councillor's expenses;
- occupational pensions;
- training allowances;
- a student grant or loan;
- money from people living in your home;
- maintenance or child support for you, your partner or any of the children you have told us about on this form; and
- any other money you get.

If you are getting or expect to get any money that is not listed, tell us about it.

We may be able to ignore some of this income.

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

**What is the money for?**

	Other money 1	Other money 2
	<div style="border: 1px solid black; height: 40px;"></div>	<div style="border: 1px solid black; height: 40px;"></div>
Who gets it?	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
How much do they get?	<div style="border: 1px solid black; padding: 2px;">£</div>	<div style="border: 1px solid black; padding: 2px;">£</div>
How often?	<div style="border: 1px solid black; padding: 2px;">Every:</div>	<div style="border: 1px solid black; padding: 2px;">Every:</div>
When did they start getting this income?	<div style="border: 1px solid black; padding: 2px; text-align: center;">/ /</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">/ /</div>
When is the income likely to go up?	<div style="border: 1px solid black; padding: 2px; text-align: center;">/ /</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">/ /</div>
	We need to see proof of this.	We need to see proof of this.

## Section 12 About other money coming in (continued)

	Other money 3	Other money 4
<b>What is the money for?</b>	<div style="border: 1px solid black; height: 40px;"></div>	<div style="border: 1px solid black; height: 40px;"></div>
Who gets it?	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
How much do they get?	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">£</div>	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">£</div>
How often?	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">Every:</div>	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">Every:</div>
When did they start getting this income?	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">/ /</div>	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">/ /</div>
When is the income likely to go up?	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">/ /</div>	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">/ /</div>
	We need to see proof of this.	We need to see proof of this.
<b>Does anyone owe money to you or your partner?</b>	<b>No</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
	<b>Yes</b> <input type="checkbox"/> Who is it owed to?	<b>Yes</b> <input type="checkbox"/> Who is it owed to?
	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
What is it owed for?	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
How much?	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">£</div>	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">£</div>
	We need to see proof of this.	We need to see proof of this.
<b>Are you or your partner expecting to get any money in the next 12 months?</b>	<b>No</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
	<b>Yes</b> <input type="checkbox"/> Who is it for?	<b>Yes</b> <input type="checkbox"/> Who is it for?
	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
What is it for?	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
How much?	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">£</div>	<div style="border: 1px solid black; height: 20px; padding-left: 5px;">£</div>
	We need to see proof of this.	We need to see proof of this.

For example, a redundancy payment or a payment instead of notice or holiday.

## Section 12 About other money coming in (continued)

Do you or your partner get a Far Eastern Prisoner of War payment? No   
Yes

## Section 13 About bank accounts, savings, investments and property

Do you or your partner have any bank accounts, savings or investments in the UK or abroad? No  Go to section 14.  
Yes  Give details below.

Examples include cash held at home or in bank or building society accounts, money in post office accounts, property, Premium Bonds, National Savings Certificates, and stocks, shares and bonds.

Is the total value of money held in these less than £6000? No  Give details below. We need to see proof of this.  
Yes  Give details below. We do not need to see proof.

Do you or your partner have any bank accounts?

Tell us about all your bank accounts, even empty or overdrawn ones.

No   
Yes  Give details below.  
If you need to tell us about more than two bank accounts use a separate sheet to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

Name of the bank:

Bank account 1	Bank account 2
<input type="text"/>	<input type="text"/>
Account number: <input type="text"/>	Account number: <input type="text"/>
Whose name is the account in? <input type="text"/>	Whose name is the account in? <input type="text"/>
How much is in the account? £ <input type="text"/>	How much is in the account? £ <input type="text"/>

## Section 13 About bank accounts, savings, investments and property (continued)

**Do you or your partner have any building society accounts?**

Tell us about all your building society accounts, even empty or overdrawn ones.

No

Yes

Give details below.

If you need to tell us about more than two building society accounts use a separate sheet to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

**Name of the building society:**

**Building society account 1**

**Building society account 2**



Account number:

Account number:



Whose name is the account in?

Whose name is the account in?



How much is in the account?

How much is in the account?

£

£

**Do you or your partner have any post office accounts?**

Tell us about all your post office accounts, even empty or overdrawn ones.

No

Yes

Give details below.

If you need to tell us about more than two post office accounts use a separate sheet to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

**What type of account is it?**

**Post office account 1**

**Post office account 1**



Account number:

Account number:



Whose name is the account in?

Whose name is the account in?



How much is in the account?

How much is in the account?

£

£

**Section 13 About bank accounts, savings, investments and property (continued)**

**Do you or your partner have any National Savings Certificates?**

**No**

**Yes**

Give details below.

If you need to tell us about more than four National Savings Certificates use a separate sheet to tell us all the information we ask for in this section.

**Please tick this box if you are sending a separate sheet.**

**National Savings Certificates 1**

Who do they belong to?

Issue number:

Value:

How many?

**National Savings Certificates 2**

Who do they belong to?

Issue number:

Value:

How many?

**National Savings Certificates 3**

Who do they belong to?

Issue number:

Value:

How many?

**National Savings Certificates 4**

Who do they belong to?

Issue number:

Value:

How many?

**Do you or your partner have any Premium Bonds?**

**No**

**Yes**

Give details below.

If you need to tell us about more than two Premium Bonds use a separate sheet to tell us all the information we ask for in this section.

**Please tick this box if you are sending a separate sheet.**

## Section 13 About bank accounts, savings, investments and property (continued)

### Premium Bonds 1

Whose name are they in?

Value:

 £

**Do you or your partner have any stocks, shares, bonds or unit trusts?**

**No**

**Yes**  Give details below.

If you need to tell us about more than two stocks, shares, bonds or unit trusts use a separate sheet to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

### Stocks, shares, bonds or unit trusts 1

Who do they belong to?

Company name:

How many?

 £

**Do you or your partner have any other savings or investments?**

For example, TESSAs, ISAs, TOISAs, compensation or any other money you have not told us about on this form.

**No**

**Yes**  Give details below.

We will write to about this.

**Do you or your partner have any money from selling a house or money from a charity?**

**No**

**Yes**  Give details below.

We will write to you about this.

### Premium Bonds 2

Whose name are they in?

Value:

 £

### Stocks, shares, bonds or unit trusts 2

Who do they belong to?

Company name:

How many?

 £

## Section 13 About bank accounts, savings, investments and property (continued)

Do you or your partner own or partly own any property, land or timeshare (other than the home you live in) either in the UK or abroad?

No

Yes

Give details below.

If you need to tell us about more than two properties, timeshares or pieces of land, use a separate sheet to tell us all the information we ask for in this section.

Please tick this box if you are sending a separate sheet.

**Property, timeshares or land 1**

**Property, timeshares or land 2**

Address:

Postcode:

Address:

Postcode:

How much is it worth?

£
---

How much is it worth?

£
---

If you have a mortgage or loan for this, how much is left to repay?

£
---

If you have a mortgage or loan for this, how much is left to repay?

£
---

## Section 14 About where you live

Are you living away from home at the moment?

No

Yes

Answer the following questions.

Why are you not living at home?

--

When did you last live at home?

/   /
-------

When do you expect to move back home?

/   /
-------

Tell us the address of where you are living at the moment.

Postcode:

If your home has been sublet, tell us who lives there now.

--

## Section 14 About where you live (continued)

Do you pay rent for your home?

No  Go to section 19.

Tick 'Yes' if you would pay rent but you already get Housing Benefit.

Yes  If you rent your home from Wigan and Leigh Housing, go to section 19. Otherwise, go to section 15.

## Section 15 About rent

What sort of building do you live in?

Please tick one box only.

- |                       |                          |                      |                          |                            |                          |
|-----------------------|--------------------------|----------------------|--------------------------|----------------------------|--------------------------|
| A detached house      | <input type="checkbox"/> | A flat in a house    | <input type="checkbox"/> | A caravan or mobile home   | <input type="checkbox"/> |
| A semi-detached house | <input type="checkbox"/> | A flat in a block    | <input type="checkbox"/> | A hotel                    | <input type="checkbox"/> |
| A terraced house      | <input type="checkbox"/> | A flat over a shop   | <input type="checkbox"/> | A residential nursing home | <input type="checkbox"/> |
| A maisonette          | <input type="checkbox"/> | A bedsit or room     | <input type="checkbox"/> | A residential care home    | <input type="checkbox"/> |
| A bungalow            | <input type="checkbox"/> | A hostel             | <input type="checkbox"/> | Board and lodgings         | <input type="checkbox"/> |
| A houseboat           | <input type="checkbox"/> | Other. Give details. | <input type="text"/>     |                            |                          |

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

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

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

How many floors are there in the whole building?

Which floors do you live on?

For example, ground floor, basement, all.

## Section 15 About rent (continued)

**How many rooms are there in the building?**

	In the whole building	Just for you and your household	That you share with other people
Living rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedsitting rooms	<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"/>
Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Do you use your home for business?**

No

Yes

**Do you have a main home somewhere else?**

No

Yes

What is the address?

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

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

How much do you pay for this home?

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

**What is your landlord's name and address?**

By landlord we mean the person or organisation who owns the property you live in. We won't accept a 'care of' address. Please give full details. A PO box or bank account number is not enough.

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

**If your landlord has an agent, tell us their name and address.**

By agent we mean the person or organisation you actually pay rent to.

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

## Section 15 About rent (continued)

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

No

Yes  What is the relationship?

is my landlord's or agent's

Related includes related through marriage, even if the relationship has ended. Some examples are ex-wife, ex-husband, aunt, brother, grandson, father and son-in-law.

**Do you or your partner own, or have you or they ever owned, any part of the property you now live in?**

No

Yes

**Do you rent the accommodation from a company you or your partner are a director or employee of?**

No

Yes

**Do you live in the property as a condition of your or your partner's job?**

No

Yes

**Is your landlord your or your partner's ex-partner?**

No

Yes

**Is your landlord the parent of a child you or your partner are responsible for?**

No

Yes

**Is your landlord a trust fund which you or your partner are a trustee or beneficiary of?**

No

Yes

**Is your landlord a trust of which your child or your partner's child is a trustee or beneficiary of?**

No

Yes

**When did you start renting your home?**

/ /

**When did you move to this address?**

/ /

If you have not moved in yet, tell us when you expect to move in, then tell us when you have actually moved in.

**What sort of tenancy do you have?**

For example, short hold, assured, tied.

## Section 15 About rent (continued)

Is your tenancy for a fixed period?

No

Yes  When does it end?

Is the property rented as:

furnished?

hardly furnished?

partly furnished?

unfurnished?

How much is the rent for your home?

£  every

For example, every week, fortnight, 4 weeks or month.

Do you pay your rent to someone other than your landlord or agent?

No

Yes  Who to?

We will write to you about this.

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

No

Yes  Tell us their names and their relationship to you and your partner.

How much rent do they pay?

£  every

Has your rent changed in the last 12 months?

No

Yes  Send us proof of the date it changed and how it changed.

When is the next rent increase due?

Have you applied for a pre-tenancy determination?

No

Yes

Has your rent been registered as a fair rent by a rent officer?

No

Yes  Send us the notice of registration (RO5).

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

No

Yes  How many in a year?

## Section 15 About rent (continued)

Are you behind with your rent?

No

Yes  By how many weeks?

By how much?

£

Who gets the Council Tax bill for your home?

You or your partner

Your landlord

Someone else

Tell us who gets the Council Tax bill.

Does your rent include money for the following?

**Meals**

No

Yes  How much each week?

£

For which meals?

Breakfast

Lunch

Evening meal

**Water charges**

No

Yes  How much each week?

£

**Heating**

No

Yes  How much each week?

£

**Lighting**

No

Yes  How much each week?

£

**Hot water**

No

Yes  How much each week?

£

**Fuel for cooking**

No

Yes  How much each week?

£

**Laundry**

No

Yes  How much each week?

£

## Section 15 About rent (continued)

**Cleaning**

No

Yes  How much each week?

£

**Gardening**

No

Yes  How much each week?

£

**Personal care and support**

No

Yes  How much each week?

£

**Garage or parking space**

No

Yes  How much each week?

£

**Do you have to rent the garage as part of your tenancy agreement?**

No

Yes

**Do you pay any service charges with your rent?**

No

Yes  How much each week?

£

For example, for cleaning or lighting in shared areas, a warden, an alarm system or lift maintenance.

What for?

**We must see proof of your rent and tenancy before we can decide how much benefit you can get.**

## Section 16 Sharing information with your landlord or agent

Sharing information with your landlord or agent could help us to deal with your claim more quickly and reduces the risk of falling behind with your rent because of your claim being delayed. We would only share information with your landlord or agent if you have agreed we can do this.

Under the Data Protection Act, we need your permission to share information.

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

- if you have claimed Housing Benefit;
- if we have made a decision on your claim;
- if we need further information to make a decision on your claim and, if so, what information this is; or
- when we have made a decision on your claim.

If you allow us to share information with your landlord we may be able to solve problems and so prevent your landlord taking action against you to recover unpaid rent.

There may be other information about your claim that we need to check with your landlord or agent (such as the date your tenancy started) before we can make a decision on your claim. If this is the case, we have to talk to your landlord or agent, even if you have not given us permission to discuss your claim with them. But unless you have given us permission by signing this form, we will not discuss anything else with your landlord or agent.

## Section 16 Sharing information with your landlord or agent (continued)

If you have rent arrears your landlord or landlord's agent may ask us to pay your Housing Benefit to them. In this case we may contact you for more information.

We may talk to them about rent arrears if they ask us to.

We will not give them any information about:

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

**Do you give permission for us to contact your landlord or agent?**

**No**  Go to **section 17**.

**Yes**

**What is your landlord or agent's name:**

**Landlord or agent's email address:**

**Landlord or agent's phone number:**

**Your signature:**

**Date:**

## Section 17 Paying your Housing Benefit

### Private Tenants

- If we assess your claim under the Local Housing Allowance we will send your Housing Benefit to you.
- If you have difficulty managing your affairs or paying your rent it may be possible for us to send it to your landlord.

### Housing Association Tenants

- If you rent your home from a Housing Association you can ask us to send your Housing Benefit straight to them.

**How do you want us to pay your Housing Benefit?**

**I want my benefit to be paid to me.**

Go to **section 18**.

**I want my benefit to go straight to my Housing Association.**

Go to **section 19**.

**I want my benefit to go straight to my landlord or landlord's agent because I have difficulty managing my affairs or paying my rent.**

## Section 17 Paying your Housing Benefit (continued)

In some circumstances we may be able to pay your Housing Benefit to your landlord on your behalf if:

- you have 8 weeks or more rent arrears;
- you are having deductions made from Income Support, Jobseeker's Allowance or Employment and Support Allowance to pay for rent arrears;
- we believe that it is unlikely that you will pay your rent because:
  - you have a history of rent arrears; or
  - you have left a property leaving rent arrears.
- we believe it is in your best interests to pay your landlord because:
  - you have financial difficulties or severe debt problems; or
  - you have difficulty in managing your own affairs.

**The information you give in this section will help us to decide if we should pay your landlord.**

**If possible you should answer the questions yourself.**

**If you can not do this you could ask your:**

- family member or friend
- support worker
- Landlord or letting agent
- main carer
- local advice or welfare agency
- local council office

**to help.**

**Do you have difficulty managing your money or day to day affairs?**

No

Yes

Tell us about this below.

**Is this because you: (Tick all boxes that apply.)**

- |  |                          |  |                          |
|--|--------------------------|--|--------------------------|
| • have a medical condition?                                  | <input type="checkbox"/> | • live alone without the support you need?                         | <input type="checkbox"/> |
| • have learning difficulties?                                | <input type="checkbox"/> | • were recently homeless?  | <input type="checkbox"/> |
| • have physical disabilities?                                | <input type="checkbox"/> | • receive help from a homeless charity?                            | <input type="checkbox"/> |
| • have mental ill health?                                    | <input type="checkbox"/> | • receive help from supporting people grant?                       | <input type="checkbox"/> |
| • have an addiction to alcohol, other substance or gambling? | <input type="checkbox"/> | • have reading difficulties or English is not your first language? | <input type="checkbox"/> |
| • are leaving or have recently left prison?                  | <input type="checkbox"/> | • are fleeing violence?  | <input type="checkbox"/> |
| • have financial difficulties                                | <input type="checkbox"/> | • are going into care or hospital?                                 | <input type="checkbox"/> |
| • are leaving care or hospital?                              | <input type="checkbox"/> | • other  | <input type="checkbox"/> |

**Give us as much information as you can about this on the next page.**

## Section 17 Paying your Housing Benefit (continued)

Use this space to tell us more about why you have difficulty managing your money or day to day affairs?

Please explain whether these are temporary or permanent, and how you pay other bills such as gas, electricity, water rates or Council Tax.

**Please send us some written evidence to support what you have told us. Examples can be found on the last page of this form.**

**Do you have rent arrears?**

**No**

**Yes**  How much are your rent arrears?

£

What period do they cover?

**From**  /  /  **to**  /  /

**Has your landlord taken any action to recover the rent arrears?**

For example, court action, notice of seeking possession, notice to quit, sent you a letter or set up a payment plan.

**No**

**Yes**  Give details.

We need to see proof of this.

**Section 17 Paying your Housing Benefit (continued)**

Have you had problems paying your rent in the past?

No

Yes  Give details.

Are you having deductions made from your Income Support, Jobseeker's Allowance or Employment and Support Allowance to pay rent arrears?

No

Yes  We need to see proof of this.

Do you get help from a support worker who can help you to organise your rent payment and finances?

No

Yes  Give details.

Is there anyone else that can help you to manage your finances?

No

Yes  Give details.

## Section 17 Paying your Housing Benefit (continued)

Do you have multiple debts?

No

Yes

See the Notes that accompany this form for information about who can help you with this.

Would you like us to contact an agency for you? They can provide free debt and money advice.

No

Yes

We will tell you when we have done this.

## Section 17 Filled in by someone other than the tenant

If you are filling this form in for someone else, please tell us why you are doing this.

Name of the person who filled this section in:

Address of the person who filled this section in:

Postcode:

Relationship to the person claiming:

Phone number of the person who filled the form in:

As far as possible, I have confirmed with the tenant that the answers I have written on this form are correct.

Signature of the person who filled this section in:

Date

/ /

## Section 17 Paying benefit to your landlord or agent

If you want us to pay your benefit straight to your landlord or agent, you must both sign this declaration. Please pay my Housing Benefit to my landlord or agent. I understand that:

- I must always tell you straightaway about any change in my circumstances;
- if I do not tell you about any change in my circumstances and you pay me too much benefit because of this, I will have to pay back the extra benefit; and
- I may be prosecuted if I do not tell you about any change in my circumstances.
- I will contact the Housing Benefit Section as soon as I feel able to receive my benefit directly.
- I understand any decision to pay my landlord or agent may be reviewed.

Your signature:

Date:

**Now ask your landlord or agent to sign the following part of this section.**

**Landlord's or agent's declaration:**

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

- I must always tell you straightaway about any change in my tenant's circumstances;
- you can stop paying benefit to me if I do not tell you about any changes of circumstances;
- I can be prosecuted if I accept Housing Benefit which I know I am not entitled to;
- if you pay me too much Housing Benefit for any tenant, I must repay it;
- you can take the amount of any overpaid benefit I get from the Housing Benefit of other tenants and this will not affect their rent;
- I should contact you before taking court action against my tenant to recover unpaid rent;and
- any decision to pay me may be reviewed.

Landlord's or agent's name:

Landlord's or agent's signature:

Date:

Name of your landlord's or agent's bank or building society:

Address:

We can not pay Housing Benefit into a Post Office account or building society savings accounts.

Postcode:

Name the account is held in:

Account number:

Sort code:

## Section 18 How do you want to be paid?

We can not pay Housing Benefit into a Post Office account or building society savings accounts.

Do you want your Housing Benefit paid straight into your bank or building society?

No  Tell us why not.

Yes

Name of your bank or building society:

Address of your bank or building society:

Postcode:

Name the account is held in:

Account number:

Sort code:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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We need to see proof of this.

## Section 19 Backdating

We usually award benefit from the Monday after we get 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. **You must be able to show good cause for not claiming earlier.** You should provide as much information as possible and continue on a separate sheet if necessary. You must also provide full documentary evidence to support the reasons for your delay. This evidence may include, for example medical evidence, proof of hospitalisation, a letter from Social Services.

Date you want to claim benefit from:

Tell us why you did not claim earlier.

## Section 20 Your declaration

Please read this declaration carefully before you sign and date it. It is an offence to give false information.

Even if someone else has filled this form in for you, you must sign this declaration if you can. If you have a partner, it would be helpful if they signed below to confirm all the details about them are correct. But they do not have to sign.

I understand the following.

- 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, Council Tax Benefit and free school meals.
- 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 or any other claim for social security benefits that I have made or may make.
- You may give some information to other organisations, such as government departments, local authorities and private-sector companies such as banks and organisations that may lend me money, if the law allows this.
- The details provided will be used to ensure that the amount of Council Tax you are asked to pay is correct

I know I must let you know about any changes in my circumstances that may affect my claim.

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

**Signature of person claiming:**

**Date:**

**Your partner's signature:**

**Date:**

## Section 21 Forms filled in by someone other than the person claiming

**If you are filling this form in for someone else, please tell us why you are doing this.**

Name of the person who filled the form in:

## Section 21 Forms filled in by someone other than the person claiming (continued)

Address of the person who filled the form in:

Postcode:

Relationship to the person claiming:

--

Phone number of the person who filled the form in:

--

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

Signature of the person who filled the form in:

--

Date

/      /
----------

## Section 22 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, put your name and address on each sheet and tell us how many.**

--

## Section 23 Checklist

**Please tick the relevant boxes to tell us what proof you are sending with this form.**

Remember we must see original documents, we cannot accept photocopies.

Please do not send valuable items through the post. If you can, bring them in to us. 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 proof we need within one month, we may not be able to pay you any benefit. We need the same proof for your partner, if you have one, and for any other adults living in your home.

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

### **Proof 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, water or electricity bill. We may need to see two of these documents for each person.

### **Proof of National Insurance number**

Such as a National Insurance number card, payslips or letter from the Department for Work and Pensions or the tax office.

### **Proof of bank accounts, 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 proof of any interest or dividends you get on investments and savings. The proof you send must show details for at least the last two months.

**We do not need to see proof of these if the total value of money held is less than £6000.**

### **Proof of earnings**

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 cannot provide payslips, we can contact your employer for details. 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 12 months, a summary of your trading records so far.

### **Proof of other income**

Such as your latest pension slip from a former employer or a letter from the court showing how much maintenance you are getting. We need proof of any money people pay you for board and lodgings. If you have any non-dependants (people who do not depend on you financially) in the household, they need to provide proof of their income and earnings. If they don't provide this proof, we may make the highest deduction.

### **Proof of benefits, allowances or pensions**

Such as current award notices or letters from the Department for Work and Pensions confirming how much you get. If you do not have proof tell us about this.

### **Proof of private rent and tenancy**

Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord.

**If you are posting the form back to us, make sure that you pay the correct postage. This will make sure that the form and all the proof reaches us on time.**

## Section 24 Benefit consent form

You need to sign this form and take it with you if you want to claim at one of the following offices.

- Wigan and Leigh Housing
- Arena Housing
- Adactus Housing
- Family Housing Association Manchester Ltd
- English Churches Housing
- A library

Your name:

Address:

  
  
  

Postcode:

Date of birth:

 /  / 

National Insurance number:

Letters		Numbers						Letter
<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"/>

### Declaration

I agree to the conditions set out over the page. I give you permission to pass any information I provide to Wigan Council Benefits Section for them to assess my entitlement to Housing Benefit and Council Tax Benefit.

I understand that I can withdraw my permission, as given in this form, at any time and may still go to the Benefits Section direct to deal with my claim. This permission will continue until I, the council or my landlord withdraw it.

If the Benefits Section need more information to make a decision on my claim, they can tell my landlord that they have asked for this information.

If I sign below, it will not affect the final result of my claim for benefit, or my tenancy.

**I give permission for my landlord collecting information for the purposes set out above.**

Your signature:

Date:

 /  / 

Your partner's signature:

Date:

 /  / 

Name of your landlord:

## **Collecting information as evidence**

By signing this consent form you are agreeing to your landlord collecting evidence to process your claim for Housing Benefit or Council Tax Benefit (or both).

If you decide not to sign this form, and so not to provide consent, this will not affect the outcome of your claim for Housing Benefit or Council Tax Benefit (or both). However, if your landlord is able to collect evidence on behalf of Wigan Council, this may speed up the decision on your claim. This will help make sure that all the evidence is collected the first time and so may help reduce processing time. You may also find it more convenient to deal with your landlord.

To help Wigan Council process your claim as quickly as possible, your landlord will check any changes in your circumstances.

This consent form will allow Wigan Council to tell your landlord about any information that they are waiting for from you, so that they can help collect it.

Any information, claim form and evidence you give your landlord will only be used for the purposes of assessing your entitlement to Housing Benefit or Council Tax Benefit (or both). Your landlord will not keep the information, claim form or evidence or pass it to anyone else, apart from Wigan Council.

You may withdraw your consent at any time by filling in a 'withdrawal of consent form' which you can get from your landlord.

## **How the information and evidence will be used**

The information that your landlord collects will be passed to Wigan Council who will use it:

- to process your claim for Housing Benefit or Council Tax Benefit (or both); and
- in connection with this or any other claim for Social Security benefits that you may have made or may make.

Wigan Council will not give the information about you to anyone outside Wigan Council, or use the information for other purposes, unless the law allows.

Wigan Council may give some information to other government organisations, if the law allows this.

Wigan Council is the 'Data Controller', for the purposes of the Data Protection Act. If you want to know more about what information they have about you, or the way they use your information, you can ask at the address below.

**Council Tax Offices  
PO Box 100  
Moore Street East  
Whelley  
Wigan  
WN1 3DS**

## Section 25 Receipt for benefit claim form



Fill in this section, and get it stamped by us or the office you hand your claim in at, to act as a receipt for your claim.

<b>Name:</b>	
<b>Address:</b>	
	<b>Postcode:</b>
<b>Official stamp:</b>	

This is a receipt to show that you have applied for one or more of the following benefits.

- Housing Benefit.
- Council Tax Benefit.
- Second Adult Rebate.
- Free school meals.

We received your form on the date shown above.

Please keep this in a safe place. You may be asked to produce it later.

We will deal with your claim for benefit as soon as possible.

If we ask for more information or proof so that we can process your claim, please supply it straight away.

If you want to know how much rent and Council Tax to pay while you are waiting for your benefit, contact us at the address below.

**The Council Tax Offices**  
**PO Box 100**  
**Moore Street East**  
**Whelley**  
**Wigan**  
**WN1 3DS**

**Phone: 01942 828644**

We will work out your benefit using the details that you have put on your form.  
If these details change, you must tell us straight away.

If you do not tell us about changes you may be paid too little or too much benefit.  
We will then recover any overpaid benefit from you.

## **Examples of proof that you can send to us about paying your landlord**

### **Proof of rent arrears**

- Rent account statement
- Rent book or receipts
- Letter of rent arrears action
- Court documents
- Notice to quit
- Eviction notification

### **Proof of financial difficulties**

- Court orders
- Letters from a support organisation
- Letters or statements from creditors
- Letters from solicitors

### **Proof of medical conditions, disabilities, learning difficulties**

You can get written evidence to support your application from:

- Care Workers
- Adult Services
- Department for Work and Pensions
- Doctor or Consultant
- Hospital
- Pension Service

### **Proof of alcohol, substance abuse or gambling addiction**

You can get written evidence to support your application from:

- Care Workers
- Adult Services
- Support organisations
- Doctor or Consultant
- Hospital

### **Proof of a temporary life changing experience**

By this we mean a person fleeing violence, leaving prison, going into care or hospital, leaving care or hospital, homeless or receiving help from a homeless charity.

You can get written evidence to support your application from:

- Probation Service
- Adult Services
- Support organisations
- Homeless charity
- Hospital

### **Proof of reading difficulties or English is not first language**

A letter from a support organisation.

**You can send any other evidence that you think will help us to make our decision.**