

# Housing Benefit and Council Tax Benefit claim form



ABERDEEN  
CITY COUNCIL

Name and address of the person  
claiming:

Reference number:



**For office use only**

Issue date:

Date received:

**Revenues and Benefits Office, Business Hub 16, Marischal College  
Broad Street, Aberdeen, AB10 1AB**

Phone: 08456 080921 (lines are open Monday to Friday from 8am to 6pm)

Email:benefits@aberdeencity.gov.uk

## How to fill in this form

- Please fill in this form using black ink. There are notes to help you on the next two pages.
- Please answer all the questions on the form. If they do not apply to you, write '**None**' in the box provided. If you do not fill in the form properly, it will take us longer to deal with your claim.
- You **must** return this form to one of the offices below straight away, even if you do not have all the information we have asked for. If you do not, you may lose benefit that you are entitled to.
- We may ask for information and proof to support your claim. You must send us original documents. We cannot accept photocopies. If you cannot provide **any** information or proof, please let us know **straight away**.
- **You can give your claim form and proof to a member of staff in our Revenues and Benefits department at any of our offices.**

Marischal College  
Broad Street  
Aberdeen  
AB10 1AB  
Open 8.30am to 5pm

Housing Office  
Formartine Road  
Tillydrone  
Aberdeen  
Open 8.30am to 5pm

Mastrick Customer Access Point  
Spey Road  
Mastrick  
Aberdeen  
Open 8.30am to 5pm

We can then copy and return your original proof to you while you are there.

- If you have any problems filling in this form, or if you would like it translated, please phone 08456 080921.

## Personal details

'Partner' means someone of the same or opposite sex that you live with as a couple. You may be married or in a civil partnership, or living together as if you are husband and wife or as if you are civil partners. (A civil partnership is a formal arrangement that gives same-sex couples the same legal status as a married couple.)

### 'Your nationality'

You must answer these questions, otherwise we cannot pay you benefit.

If you have not lived in the UK for the whole of the last five years, or if there are doubts about your immigration status, we may send you another form to fill in.

Don't forget, for new claims you must give us proof of identity and National Insurance number for yourself and also for your partner, if you have one. On the checklist, there is a full list of the type of documents we can accept as proof (see page 26).

## Children and young people

This section must only be used for children who are living with you, and who you get Child Benefit for. This would usually be your own children who are still at school, or in further education or training and under 20. Adult children, or children who are in higher education (for example, university), who still live with you should be included in the section immediately below.

## Other people who normally live with you

These people are often referred to as 'non-dependants'. A non-dependant is someone who lives with you, but does not pay any rent. They may have an informal arrangement to give you an agreed amount for their keep. People in this group may include grown-up children, parents, other relatives or friends. A non-dependant is different from a boarder, subtenant, joint tenant or non-resident overnight carer.

A **'boarder'** is someone who lives with you and who has an agreement with you to pay for his or her accommodation. Part of what they pay will be for meals which are eaten on your premises.

A **'subtenant'** is someone who pays you for accommodation, but whose rent does not cover any meals.

A **'joint tenant'** is someone (not your partner) who is jointly responsible with you for paying the rent at the property you live in.

A **'non-resident overnight carer'** is someone who stays overnight to care for you or someone in your family. The carer must live elsewhere and when they stay overnight, it must be in a separate bedroom.

## Income

If you cannot provide proof of your earnings, you will need to ask your employer to fill in a certificate of

earnings. If you have just started work and do not have any payslips, you can ask your employer to send us a letter telling us when you started work, what you will be paid, and how many hours you will work. You can send us your payslips as you get them. If you do send them in separately from your claim form, please make sure that your name, address and National Insurance number are clearly marked.

**'Self-employed earners'** - Where possible, you should send us properly prepared accounts. If you have not been self-employed for very long, or if for some reason you cannot provide accurate and complete accounts, we may have to send you another form to fill in. You can save time by ringing us and asking for this now, if you know that you will need it.

**'Students'** - Most students cannot qualify for benefit, but the rules are quite complicated and there are many exceptions. The following groups of students can claim.

- Those getting Income Support
- Those on part-time courses
- Those of pensionable age
- Those responsible for a child
- Those who have a disability premium or who have been classed as unfit for work for over 28 weeks

This is not a full list of students who can claim. If you are not sure if you are eligible, please ring us, or send in the filled-in form for assessment.

## Other income

You should use this section to list all other income you may receive. Don't forget to tell us about any changes in your income, for example when your Jobseeker's Allowance is due to end or you stop getting Child Benefit for one of your children.

## Savings and investments

So that we can assess your benefit accurately, you need to tell us about all your capital which is held either here or abroad. 'Capital' means bank accounts, building-society accounts, deposit accounts with other organisations (for example, the Post Office or insurance companies), cash, National Savings Certificates, Premium Bonds, shares, stocks, unit trusts, PEPs, ISAs and TESSAs. It also includes any land or property which you own, apart from where you are living. We will also need to know if you have money in a trust fund. This is not meant to be a complete list - please phone us if you have any questions. If your total capital is more than £16,000, you may not claim Housing Benefit or Council Tax Benefit (or both) unless you or your partner are receiving Pension Credit (Guarantee Credit).

If you have capital of more than £16,000 you can claim in certain circumstances, for example, we ignore Far Eastern Prisoner of War payments of more than £20,000.

## **Your tenancy**

'An agent' is someone employed by the landlord. It can be an individual or a company, and they can be responsible for just collecting the rent from you, or they may provide your tenancy agreement as well, and be your contact point for any problems you may have. If you have a formal tenancy agreement, the details of both landlord and agent should be on the agreement.

## **Your rent**

Your landlord should have explained to you whether or not any services are included within your rent, and you should give as much detail here as you can. If you cannot give us exact figures, we may have to make standard deductions, which are laid down by central government, or we may have to contact your landlord. We only need this information if you are a private tenant.

## **Payment and Council Tax**

For new claims, Housing Benefit is usually paid from the Monday after we receive your form. If you are also a new tenant, we can pay from the start date of your tenancy, but only if we receive your claim form by the Sunday after your tenancy starts.

Housing Benefit for private tenants is normally paid every month for the previous month.

Housing Benefit for council tenants is paid straight into your rent account.

Council Tax Benefit is paid straight into your Council Tax account.

If you rent from a private landlord and are making a new claim or you move address after 7 April 2008 you will normally have your benefit paid directly to you under Local Housing Allowance. The safest and easiest way to receive your benefits is directly into your bank account. We cannot pay Housing Benefit into a Post Office account.

## **Backdating**

It may be possible to backdate your claim and pay it from an earlier date if you have a good reason for not claiming on time. If you want us to look at your claim from an earlier date, please fill in section L 'Backdating' on page 23.

We can usually only backdate your claim for a maximum of three months if you are of pensionable age, and six months if you are younger than this.

## **Appeals**

If you disagree with any decision that we make about your benefit, you have the right to ask us to look at our decision again. You should put your appeal in writing, and send it to us as soon as you can, explaining why you think we have got it wrong – give as much detail as you can.

## **Second Adult Rebate**

Even if your income or capital is too high for you to claim benefit yourself, you could still get Second Adult Rebate. To qualify, you must be the only person in your home responsible for paying Council Tax, and someone else must live with you who is not your partner, is on a low income and does not pay rent to you. If you want to claim Second Adult Rebate, you only need to fill in sections A and H, provide proof and sign the declaration in section M.

## **Changes in your circumstances**

You must tell our staff at any of our offices listed on page 1 about any changes in your circumstances. There is a list of things you must tell us about at the back of this form. It is not a full list. If you are not sure please contact us. If you do not tell us about any changes within one month of the change happening, you will lose benefit.

## **Why do we need so much detail?**

Do not be put off by the length of this form. We are sorry to ask so many questions, but we do need you to answer in full so that we can be sure to pay you the right amount of benefit. For example, if you receive an allowance for a disability, it could mean that you can get more benefit. You may also be entitled to more benefit to help you pay childcare costs to a registered childminder while you are working, but only if you tell us about them. If you are finding it difficult to fill in this form or to send us proof and you need some help, please phone our Revenues and Benefits Office on 08456 080921. We can probably help you over the phone, or we can arrange for a visiting officer to see you at home.

## **Disabled people and people with learning difficulties**

If you need help filling in this form, or you cannot visit our offices or send us the proof we need, please phone our Revenues and Housing Benefits Office on 08456 080921. We can probably help you over the phone, but we can also arrange for a visiting officer to see you at home.

## **Don't delay**

You will see reminders on the form that you must send us original documents, not photocopies, and that we cannot process your claim until we have seen all of the documents. We understand that it is not always easy to get them to us straight away, so even if you haven't got everything, send us the form. If you don't you could lose benefit.

# Please provide the following information.

**Which of the following are you? Tick one box only.**

A council tenant

Living in a hostel

A private tenant

An owner-occupier

A housing association tenant

A boarder

# A

## You and your partner

If you do not have a partner, tick this box.

### You

Surname

Other name

Title (Mr, Mrs, Miss or other)

National Insurance number

Date of birth

/ /

Please tell us if you use another name, or are known by another name.

Address you want to claim for

Postcode

E-mail address

Phone number

Mobile number

### Your partner

Surname

Other name

Title (Mr, Mrs, Miss or other)

National Insurance number

Date of birth

/ /

Please tell us if you use another name, or are known by another name.

Address you want to claim for

Postcode

E-mail address

Phone number

Mobile number

# A

## You and your partner (continued)

### You

What date did you move to this address?

Do you own the property?

Yes  No

Are you a joint owner or joint tenant?

If 'Yes', who with?

What is your nationality?

Have you lived in the UK for the whole of the last five years?

Yes  No

If 'No', what date did you arrive in the UK?

What was your last address?

Did you own this property?

Yes  No

### Your partner

What date did you move to this address?

Do you own the property?

Yes  No

Are you a joint owner or joint tenant?

If 'Yes', who with?

What is your nationality?

Have you lived in the UK for the whole of the last five years?

Yes  No

If 'No', what date did you arrive in the UK?

What was your last address?

Did you own this property?

Yes  No

# A You and your partner (continued)

## You

Did you rent this property?

Yes  No

Were you living with relatives at this address?

Yes  No

Did you claim Housing Benefit or Council Tax Benefit at your last address?

Yes  No

Do you fall into any of the following categories? Tick all that apply.

Have a severe learning disability, mental illness or form of dementia

A student

In legal custody

Date you went into legal custody: .....

An apprentice

On a youth training course

Registered blind

In hospital

Date you went into hospital: .....

## Your partner

Did you rent this property?

Yes  No

Were you living with relatives at this address?

Yes  No

Did you claim Housing Benefit or Council Tax Benefit at your last address?

Yes  No

Do you fall into any of the following categories? Tick all that apply.

Have a severe learning disability, mental illness or form of dementia

A student

In legal custody

Date you went into legal custody: .....

An apprentice

On a youth training course

Registered blind

In hospital

Date you went into hospital: .....

Please send original documents as proof of your identity and National Insurance number.

**Remember, you must send original documents, otherwise we will not process your claim.**

**Do not send your own photocopies.**

## You

Are you in paid employment?

Yes

No

If 'No', go to section D.  
If 'Yes', please give  
details below.

Employer's name and address

When did you start this job?

Is your job seasonal or temporary?

Yes

No

If 'Yes', when will it end?

How many hours a week do you work?

How much are you paid after deductions?

£

How often are you paid (for example, every  
week, every two weeks or every month)?

## Your partner

Are you in paid employment?

Yes

No

If 'No', go to section D.  
If 'Yes', please give  
details below.

Employer's name and address

When did you start this job?

Is your job seasonal or temporary?

Yes

No

If 'Yes', when will it end?

How many hours a week do you work?

How much are you paid after deductions?

£

How often are you paid (for example, every  
week, every two weeks or every month)?

# B Earnings (continued)

## You

How are you being paid (for example in cash, into a bank account)?

Do you regularly work overtime?

Yes  No

Do you receive any bonuses, tips or commission?

Yes  No

Do you pay into a pension scheme?

Yes  No

Do you have more than one job?

Yes  No

If 'Yes', please give details below.

Employer's name and address

## Your partner

How are you being paid (for example in cash, into a bank account)?

Do you regularly work overtime?

Yes  No

Do you receive any bonuses, tips or commission?

Yes  No

Do you pay into a pension scheme?

Yes  No

Do you have more than one job?

Yes  No

If 'Yes', please give details below.

Employer's name and address

Have you declared everything? Do you know someone who has not?

**Benefit Fraud Hotline — phone 08456 080922**



# Self-employed earnings

Are you or your partner self-employed?

Yes  No

If 'No', go to section D.

If 'Yes', please give details below.

We may need to write to you for more information.

## You

What is the name of your business?

What is the registered address of your business?

Business phone number

What type of business do you run?

When did you start trading?

Do you have up-to-date audited accounts?  
Yes  No  If yes, what period do they cover?

When does the business's financial year start?

What is your estimated weekly profit?

£

How many hours each week do you work?

Are you a partner in the business?

Yes  No

Do you pay into a pension scheme?

Yes  No

## Your partner

What is the name of your business?

What is the registered address of your business?

Business phone number

What type of business do you run?

When did you start trading?

Do you have up-to-date audited accounts?  
Yes  No  If yes, what period do they cover?

When does the business's financial year start?

What is your estimated weekly profit?

£

How many hours each week do you work?

Are you a partner in the business?

Yes  No

Do you pay into a pension scheme?

Yes  No

Please send **original** proof for earnings and self-employed earnings for yourself and your partner, if you have one. See the checklist for examples of documents you can provide.

Remember, you must send original documents, otherwise we will not process your claim.

Do not send your own photocopies.

# D Other income

If you receive Income Support, income-related Employment and Support Allowance, income-based Jobseeker's Allowance or Pension Credit (Guarantee Credit), please tick this box.

**Please answer all questions and fill in all parts of each section. If you do not fill in all parts, your benefit claim may be delayed.**

If you do receive any of the benefits listed below, please tell us how often you receive payment (for example, every week, every two weeks, every four weeks or every month).

	You		Your partner	
	How much do you get?	How often is it paid?	How much do you get?	How often is it paid?
Compensation from the Armed Forces Compensation Scheme	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Attendance Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bereavement Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Benefit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Tax Credit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contribution-based Employment and Support Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contribution-based Jobseeker's Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Disability Living Allowance (care component)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Disability Living Allowance (mobility component)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fostering Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Guardian's Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Industrial Injuries Disablement Benefit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Long-term Incapacity Benefit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maintenance you receive (including payments from the Child Support Agency and any other money you receive for yourself or your children)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maternity Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Occupational pension, superannuation or work pension	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Pension Credit (Savings Credit)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Severe Disablement Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Short-term Incapacity Benefit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
State Pension	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
War Disablement Pension	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
War Widow's or War Widower's Pension	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Widowed Parent's Allowance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Working Tax Credit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

# D Other income (continued)

		You		Your partner	
		How much do you get?	How often is it paid?	How much do you get?	How often is it paid?
<b>Carer's Allowance</b>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Who do you receive it for?</b>		Name <input type="text"/>		<input type="text"/>	
		Address <input type="text"/>		<input type="text"/>	

Does anyone receive Carer's Allowance to look after you? Yes  No

If 'Yes', what is their name?

What is their address?

Statutory Sick Pay (start date)

Statutory Maternity Pay (start date)

Youth training scheme payment or training credits

Payments from boarders

Weekly amount from letting or subletting part of a property

Life insurance annuities

Payments from a charity or other voluntary payments

Any other income (please give details)

# D Other income (continued)

Have you or your partner recently applied for any benefits or income, but not yet received payment?

Yes

No

Please tell us which benefits or income you are waiting for.

What date did you apply for it?

Please send **original** proof for any other income you and your partner, if you have one, receive. See the checklist for examples of documents you can provide.

**Remember, you must send original documents, otherwise we will not process your claim.**

**Do not send your own photocopies.**

Have you declared everything? Do you know someone who has not?

**Benefit Fraud Hotline — Phone 08456 080922**

Are you or your partner a student?

Yes  No

If 'No', go to section F.

If 'Yes', please give details below.

## You

Are you studying:

full-time?  part-time?

Name of college or university

Address of college or university

Title of course

Length of course

Which year of study are you in?

1st  2nd  3rd  4th

What date does your current year of study start?

What date does your current year of study end?

What is your matriculation number (if you know this)?

Do you receive a student grant, bursary or loan?

Yes  No

## Your partner

Are you studying:

full-time?  part-time?

Name of college or university

Address of college or university

Title of course

Length of course

Which year of study are you in?

1st  2nd  3rd  4th

What date does your current year of study start?

What date does your current year of study end?

What is your matriculation number (if you know this)?

Do you receive a student grant, bursary or loan?

Yes  No

## You

If 'Yes', how much is paid?

£

How often is it paid?

£

How much student loan are you entitled to?

£

Are you on a sandwich course?

Yes  No 

Do you receive sponsorship?

Yes  No 

Do you receive money from your parents?

Yes  No 

Do you have any other income?

Yes  No 

If 'Yes', please give details below.

## Your partner

If 'Yes', how much is paid?

£

How often is it paid?

£

How much student loan are you entitled to?

£

Are you on a sandwich course?

Yes  No 

Do you receive sponsorship?

Yes  No 

Do you receive money from your parents?

Yes  No 

Do you have any other income?

Yes  No 

If 'Yes', please give details below.

Please send **original** proof of any student income for you or your partner, if you have one.

See the checklist for examples of documents you can provide.

**Remember, you must send original documents, otherwise we will not process your claim.**

**Do not send your own photocopies.**

# F

## Cash, savings and investments

You need to tell us about all your bank accounts, building-society accounts and Post Office accounts (even if they are overdrawn), and all other cash and investments.

Type of capital	Name of bank or building-society account (for example, current or savings)	Amount held	In the name of		
			You	Your partner	Both
Bank account					
Bank account					
Building-society account					
Building-society account					
Post Office account					
Cash savings					
Premium Bonds					

Do you jointly own any of the above accounts with anyone who is not your partner?

Yes  No

If 'Yes', please provide details.

Type of capital	Details (for example, share names, certificate numbers or issue numbers)	Amount held	In the name of		
			You	Your partner	Both
National Savings Bonds					
National Savings Certificates					
Income Bonds					
Shares or unit trusts					
Stocks, shares and so on					

Do you or your partner have any other savings or investments or money owing to you, which have not been included in the list above (for example, PEPs, ISAs or personal loans)?

Yes

No

If 'Yes', please provide details.

Do you or your partner own another property?

Yes

No

If 'Yes', please provide details.

Do you or your partner, or any of your children, have any money or property held in trust?

Yes

No

If 'Yes', please give details. We may ask you for more information.

You must send **original** copies of any proof of your cash, savings and investments that you and your partner have. You must send us current statements showing all transactions for the last two months. We will not accept mini-statements.

**Remember, you must send original documents, otherwise we will not process your claim.**

**Do not send your own photocopies.**

Have you declared everything? Do You know someone who has not?

**Benefit Fraud Hotline — Phone 08456 080922**



# Children who live with you

If there are no children who live with you, tick this box.  Now go to section H.

Do you or your partner receive Child Benefit for any children who live with you?

Yes  No

	First child	Second child	Third child
Surname	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<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"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is their relationship to you?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they male or female?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they registered blind?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they receive Disability Living Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they go to a registered nursery, childminder or playscheme?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', please give the name and address of the childminder, nursery or playscheme.	<input type="text"/>	<input type="text"/>	<input type="text"/>
What is the weekly cost of childcare for each child?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

Any other information.

For each child, please send **original** documents for Child Benefit, any childcare costs (for example, the costs of sending your child to a nursery or childminder), Disability Living Allowance and blind registration certificate.

**Remember, you must send original documents, otherwise we will not process your claim.**

**Do not send your own photocopies.**

Apart from you, your partner and your dependent children, does anyone else live with you in your home?

Yes  No  If 'No', go to section I.

If 'Yes', please give details below. You should include grown-up children who you no longer get Child Benefit for, friends, relatives, boarders, subtenants, joint tenants and overnight carers (for overnight carers please also answer the questions in section H(c)).

### Section H(a)

	First person	Second person	Third person
Surname	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other name or names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Insurance number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date they moved in	<input type="text"/>	<input type="text"/>	<input type="text"/>
What is their relationship to you?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are they a joint tenant or joint owner?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they pay rent to you?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', how much and how often?	£ per	£ per	£ per

If you only have joint tenants living with you, go to section I.

### Section H(b)

Does the rent include payment for meals?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does their rent include payment for heating or hot water?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they receive Income Support, Jobseeker's Allowance, Pension Credit (Guarantee Credit) or Pension Credit (Savings Credit)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they receive contribution-based Employment and Support Allowance or income-related Employment and Support Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they get any other state benefits?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', which ones do they receive and how much do they get each week?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they work?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>



## Other people who live with you (continued)

	First person	Second person	Third person
If 'Yes', how many hours do they work each week?			
What are their earnings before tax and National Insurance?			
Do they have any other income?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', please give details and the amounts.			
Do they get Disability Living Allowance or Attendance Allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', how much do they get each week?			
Do they have a severe disability, mental illness or form of dementia?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are they in prison?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes', what date were they sentenced?			
Are they an apprentice?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are they a student?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do they care for someone in your home?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are they on a youth training course (for example, YTT or Skillseekers)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

### Section H(c)

Is overnight care provided by a carer who does not live in your home?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a separate room where your carer sleeps?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

For each person that lives with you, please send original documents for any income that they have and any rent that they pay you.

**Remember, you must send original documents, otherwise we will not process your claim.**

**Do not send your own photocopies.**

## Your tenancy

You should only fill in section I, J or K if you rent your property from a private landlord or housing association. If you are a council tenant or an owner-occupier, go to section L.

When did your tenancy start at your current address?			
Are you a shared owner or co-owner of the property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Have you owned the property in the last five years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If 'Yes', why did you sell it?			
What is your landlord's name?			
What is your landlord's home address?			
What is your landlord's phone number?			
If someone else manages the property for your landlord, what is their name?			
What is their address?			
What is their phone number?			
Are any of the children in the household related to the landlord or their partner?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If 'Yes', who is related and what is the relationship?			
Are you or any other members of your household related to your landlord?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If 'Yes', please say what the relationship is.			
At any time at this address, has your landlord been your partner?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
At any time at this address, has your partner been your landlord's partner?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Have you signed a tenancy agreement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
How long is it for?	<input type="text"/>	months	
What kind of tenancy is it?			
Assured <input type="checkbox"/>	Short assured <input type="checkbox"/>	Other <input type="text"/>	Don't know <input type="checkbox"/>
Do you give us permission to discuss your claim with your landlord?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Please send **original** documents for proof of rent that you pay (for example, lease, tenancy agreement, or a letter from your landlord).

**Remember, you must send original documents, otherwise we will not process your claim. Do not send your own photocopies.**



# Your home

You should only fill in this section if you pay rent to a private landlord or housing association.

If you are a council tenant, or an owner-occupier, go to section L.

Please tick <b>one</b> box that best describes your home.		Please tell us the number of each type of room in your home and who uses them.			
Type of property		How many in the whole property?	How many are only used by you and your family?	How many do you share with other people?	
Detached	<input type="checkbox"/>	Living room	<input type="text"/>	<input type="text"/>	<input type="text"/>
Semi-detached	<input type="checkbox"/>	Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Terraced	<input type="checkbox"/>	Bedsit rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bungalow	<input type="checkbox"/>	Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maisonette	<input type="checkbox"/>	Bathrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Flat in a block	<input type="checkbox"/>	Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Flat in a shop	<input type="checkbox"/>	Other rooms (please give details)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Flat over a shop	<input type="checkbox"/>				
Studio flat	<input type="checkbox"/>	How many floors are there in the whole building?	<input type="text"/>		
Bedsit	<input type="checkbox"/>				
Room	<input type="checkbox"/>				
Caravan	<input type="checkbox"/>				
Other (please give details)	<input type="text"/>				

If you rent a room, please tell us the room number.

Do you share a room with anyone? Yes  No

Is there central heating in your home? Yes  No

Does your landlord live in the property? Yes  No

Do you have a garage? Yes  No

Is your accommodation:

fully furnished?

partly furnished?

unfurnished?

Who is responsible for decorating the inside of your home?

You

Landlord

Someone else

Do you have double glazing? Yes  No

Do you have a garden? Yes  No

How much rent does your landlord charge you?  £

Is this every:

day?  week?  two weeks?  four weeks?  month?   
 Any other period?  Do you pay in advance (for example, for the week or month to come)?  Do you pay in arrears (for example, for the week or month just gone)?

Who do you pay rent to?

Do you have any rent-free weeks? Yes  No

If 'Yes', when are they?

Are meals included in your rent? Yes  No

If 'Yes', which ones (tick as appropriate)? Breakfast  Lunch  Evening meal

Are you behind with your rent? Yes  No  How many weeks do you owe?

What is the total amount of your rent arrears?

Does the rent you pay include any of the following charges? If 'Yes', please tell us how much (if you know). We may write to you for more details.

	Yes	No	Amount		Yes	No	Amount
<b>Council Tax</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<b>Heating (of your rooms)</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<b>Hot water</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<b>Fuel for cooking</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<b>Laundry</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<b>Lighting</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<b>Garage</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<b>Charges for general counselling and support</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<b>Cleaning rooms and windows</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<b>Cleaning</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<b>Charges for an emergency alarm system</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>				

Has your rent for your house been registered by the Rent Officer? Yes  No

Do you want your Housing Benefit to be paid to you? Yes  No

Do you want your Housing Benefit to be paid to your landlord? (Housing association tenants only) Yes  No

We will write to your landlord if you want us to pay your Housing Benefit direct to them.

Please remember that we can only pay Housing Benefit to your landlord in exceptional circumstances. For more information, phone us on 08456 080921.

We pay Housing Benefit by Bacs (bank transfer) direct into your bank account. Please give us your account details below.

<b>Your name and address</b>	<b>Name the account is in</b>
<input type="text"/>	<input type="text"/>
<b>Postcode</b>	<b>Branch sort code</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"/>
<b>Name and address of your bank or building-society</b>	<b>Bank or building-society account 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"/>
<b>Postcode</b>	
<input type="text"/>	

# L

## Backdating

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

**Please remember that we can only backdate your claim for up to three months if you are of pensionable age, and six months if you are younger than this.** For more information visit [www.direct.gov.uk/en/Pensionsandretirementplanning/StatePension/DG\\_4017919](http://www.direct.gov.uk/en/Pensionsandretirementplanning/StatePension/DG_4017919)

Date you want to claim benefit from

 

Have your circumstances changed since this date (see page 26)?

Yes  No

Tell us why you have not claimed for benefit before.

Please read and sign the declaration below. Fill in the checklist and return the form to us in the envelope provided. You must also send original documents so we can process your claim.

If you do not have all your evidence, you must return the form as soon as you can and send the evidence later. If you do not send the form immediately, you may lose benefit.

**Please read this declaration carefully before you sign and date it. If you do not sign it, we will have to send the form back to you and this will delay your claim. Where the declaration says 'I', 'me' or 'my', this refers to you and your partner (if you have one).**

**I understand the following.**

- It is a criminal offence to provide information that is incorrect or incomplete.
- It is a criminal offence if I fail to tell you about a change of circumstances.
- You will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit, or both. You may check the information with other departments within the council and other councils.
- You may use any information I have provided in connection with this and any other claim for state benefits that I have made or may make. You may give information to other government organisations, including private agencies who are working for the Government to detect fraud. You will only share information if the law allows this.

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

I have read **page 25** and understand how you may use the information I have provided.

I have read **page 26** and understand what a change in circumstances is.

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

**Your signature**

**Date**

**Name of person filling in the form (if this is not you)**

**Your relationship to the person claiming**

**Signature of the person filling in the form (if this is not you)**

**Date**

## Benefit fraud

**We are committed to tackling benefit fraud. If you think someone is committing fraud, please help us to stop them. Please phone our confidential hotline on 08456 080922 or visit [www.aberdeencycity/benefitfraud](http://www.aberdeencycity/benefitfraud).**

## How we collect and use information

We collect information for Housing Benefit and Council Tax Benefit purposes, but we may also use it for any other purpose. We may check information that you provide or that another organisation provides about you, with other information we hold. We may also get information about you from other organisations, or give information to them to check that the information is accurate, to prevent or detect crime, or to protect public funds in other ways, as allowed by law. These other organisations could include government departments, local authorities or private companies. We will not release information about you to anyone outside the council, unless the law allows us to. We will use your information in line with the Data Protection Act 1998.

Please remember that under section 100 of the Local Government Scotland Act 1973, we must take part in the National Fraud Initiative. We will compare the details of your claim with records within this council and other public organisations. For more information, please visit [www.audit-scotland.gov.uk/work/nfi.php](http://www.audit-scotland.gov.uk/work/nfi.php).

Please contact us on the phone number below if you want this document in Braille, in large print or on an audio CD, or if you want the document translated into another language.

إذا كنت تود الحصول على هذه الوثيقة بالخط العريض أو البريلا أو الأشرطة الصوتية المدمجة أو كنت تود ترجمتها إلى لغة أخرى فالرجاء الاتصال بنا على الهاتف أدناه.

আপনি যদি এই দলিলটি ব্রেইলে, বড় ছাপার অক্ষরে বা শোনার জন্য সিডি, অথবা দলিলটি অন্য কোন ভাষায় অনুদিত চান তবে অনুগ্রহ করে নীচের টেলিফোন নম্বরে ফোন করে আমাদের সাথে যোগাযোগ করুন।

如欲索取此文件的凸字版、大字版、語音光碟，或其他語文翻譯本，請致電下列號碼。

Proszę się skontaktować z nami pod poniższym numerem telefonu jeśli ten dokument jest wymagany w alfabecie Brajla, w dużym druku, na płycie kompaktowej CD lub przetłumaczony na inny język.

Пожалуйста, свяжитесь с нами по номеру телефона, указанному ниже, если Вы хотите получить этот документ шрифтом Брайля, крупным шрифтом или на компактном аудио диске, а также если Вам нужен перевод этого документа на другой язык.



**08456 080921**

## Change you must tell us about

**We will assess your claim using the information you have given to us. You must tell us straight away if there are any changes to your circumstances. Here are some examples of changes you must report.**

- A child leaves school or leaves home.
- You have a baby.
- Your child starts to be cared for, or stops being cared for, by a registered childminder, nursery or playgroup.
- Someone moves into or out of your home (including boarders and subtenants).
- You stop receiving Income Support, Jobseeker's Allowance, Employment Support Allowance or Pension Credit (Guarantee Credit).
- Your income, or the income of anyone living with you, goes up or down.
- You, or anyone living with you, become a student or take up a government training scheme.
- You, or anyone living with you, go into hospital or a nursing home, or go into prison (even if this is on remand).
- You, or anyone living with you, get a job, or change job, or become unemployed.
- You, or anyone living with you, take a second job.
- Your Working Tax Credit or Child Tax Credit changes.
- You return to work after a period of illness you have been receiving benefit for.
- You, or anyone living with you, have a change in capital or savings.
- Your rent changes.
- You move (even if you only move to a different room or flat within the same property).
- You move out of your property, even if this is temporary.
- Someone starts to receive Carer's Allowance for looking after you.
- You change the bank account that we are paying your Housing Benefit into.
- Anything at all which is different from what you have told us on this claim form.

**You must tell us about these changes in writing – a phone call is not enough. Do not rely on anyone else to give us the information or pass a message on, not even Jobcentre Plus, The Pension Service or HM Revenue & Customs.**

**If you don't tell us about the changes, you may lose money you are entitled to, or we may pay you too much benefit which we can ask you to repay.**

**If you're not sure about whether or not you need to tell us about a change, please call the Revenues and Benefits office to check, or write to us with the details.**

# Checklist

**Have you answered every question? Have you signed the declaration? Have you enclosed the following original documents for you and your partner?**

**Proof of National Insurance number (for new claims only)**

One item for each of you (such as P45 or P60 from last employer, National Insurance card, printed payslips, letter from the Department for Work and Pensions or Jobcentre Plus, a letter or tax code from HM Revenues & Customs or an occupational pension slip).

Yes  Does not apply  To follow

**Proof of identity (for new claims only)**

As well as one item from the list above, at least one other item for each of you from the following list. (Up-to-date driving licence, passport, gas, electricity or water bill, bank statements, birth or marriage certificates, divorce papers, a medical card, residence permit or a letter from the Home Office, a probation officer, a solicitor, a social worker or HM Revenue & Customs)

Yes  Does not apply  To follow

**Proof of earnings (for each of you)**

Two monthly, three fortnightly or five weekly payslips in a row. Or, a detailed letter from your employer, or a filled-in certificate of earnings.

Yes  Does not apply  To follow

**Proof of self-employed earnings (for each of you)**

Most recent accounts, bank statements or a form for self-employed people - ask us for this if you need one.

Yes  Does not apply  To follow

**Proof of benefits, pensions or allowances (for each of you)**

Current award letters from the DWP or other pension provider.

Yes  Does not apply  To follow

**Proof of any other income** - including student grants or loans.

Yes  Does not apply  To follow

**Proof of savings and investments (for each of you)**

Bank, building-society and Post Office account statements or passbooks for the last two months. For all other investments and capital, please provide certificates or other documents.

Yes  Does not apply  To follow

**Proof of rent – private tenants and housing association tenants only**

Tenancy agreement, letter from landlord or agent, rent book. Include any proof you have of service charges.

Yes  Does not apply  To follow

**Proof of income, capital and savings for all non-dependants**

These are the people entered in the section 'Other people who normally live with you'.

Yes  Does not apply  To follow

**Proof of payments to a registered childminder**

Yes  Does not apply  To follow

**Proof of payments to a pension scheme**

Except those you make through your employer (these will show on your payslips).

Yes  Does not apply  To follow

**Proof that you are a student and details of your course**

If you do not have all the proof to hand, do not delay in sending or bringing this form to our office as you could lose benefit. You can bring missing proof in later.

Yes  Does not apply  To follow

**We cannot accept photocopies, but please do not send valuable documents through the post. If you need more time to provide any of the information or proof, then please ask us in writing and tell us the date when you think you can provide the information and proof we need.**

**Version 3**

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