

### Claim for Discretionary Housing Payments

If you are getting Housing Benefit, but it does not cover your rent in full, you may be able to claim extra help from Discretionary Housing Payments.

The money available for Discretionary Housing Payments is very limited and we can only help those in greatest need. We will look at your income and outgoings to see if you can afford to pay the shortfall yourself, and if you have any exceptional circumstances.

We cannot pay Discretionary Housing Payments towards any of the following:

- Rent arrears at a previous property
- Reductions of benefit due to a sanction or recovery of an overpayment
- Some service charges
- Increases in rent due to outstanding rent arrears

We need to assess your situation fully. Please fill in this application form and answer in full all the questions that apply to you. We treat all information as confidential.

If you have difficulty with any part of the form or if you require further details we would like to help you. Please contact your local council office or telephone the Customer Service Centre on 03000 200 292 (lines are open Monday to Friday from 8am to 6pm)

Please return this form to: Revenues and Benefits, Finance, Corporate Governance, Hub16, Marischal College, Aberdeen, AB10 1AB.

**NB: Please note that if DHP is granted, there may still be a shortfall between the extra help granted and your contractual rent.**

<u>Personal details:</u> Name Address	HB Reference: Telephone Number:
1. Please briefly explain why you are claiming a Discretionary Housing Payment?	
2. Please provide the number of Bedrooms in your property .....	

<p>3. Please provide the names of all people resident in the property and their dates of birth.</p>
<p>4. If you have rent arrears and are under the threat of eviction or have received a notice to quit please provide the following information:</p> <p style="padding-left: 40px;">Date you received formal notice .....</p> <p style="padding-left: 40px;">Amount of your arrears .....</p>
<p>5. Has your property been adapted to meet the needs of a disability for you or a member of your household. <b>YES / NO (delete as appropriate)</b></p> <p>If yes please provide the name of the person affected and the nature of the illness:</p>
<p>6. Do you have any special needs which involve you incurring extra costs, for example, special diets, medical conditions, etc. <b>YES / NO (delete as appropriate)</b></p> <p>If yes please provide the name of the person affected and the nature of the illness:</p>
<p>7. Are there any deductions being made to your state benefits? <b>YES / NO (delete as appropriate)</b></p> <p>If <b>YES</b>, what are these deductions for, how much is being deducted weekly and when will the deductions cease?</p>
<p>8. If your claim is successful and you are a Private Tenant do you wish any DHP payment to be made to your landlord? <b>YES / NO (delete as appropriate)</b></p>

9. If you believe there is any further information which I should know, give full details below.

## YOUR INCOME AND EXPENDITURE

You must now complete the tables shown in page 5 and 6. All expenses and income for both you and any partner must be declared. Once the tables have been fully completed you must read the declaration below. If you fully understand the declaration, sign it below.

### DECLARATION AND SIGNATURE

- 1) Please read these notes carefully and sign in the box below.
- The information I/we have given on this claim form is correct and complete to the best of my knowledge.
  - I/we authorise the local authority to make any necessary enquiries to verify the information on this claim form.
  - I/we authorise the local authority to cross check the information I/we have given with other sections within the local authority, Rent Officer and other Benefit authorities within the terms of the Data Protection Act, 1998.
  - I/we understand that if I/we give information that is incorrect or incomplete I/we may be prosecuted.
  - I/we know that I/we must notify the local authority promptly in writing, of any changes in circumstances that occur after this claim.
  - **I/we understand that failure to report any change in circumstances will result in recovery of any overpaid Discretionary Housing Payments.**
  - I/we have read and understood the above declaration.

<b>Claimants Name</b>
<b>Claimants Signature</b>
<b>Partners Name</b>
<b>Partners Signature</b>
<b>Date</b>

**YOUR INCOME: DHP CLAIM**

Income Details	Per Week		Per Month	
	Claimant	Partner	Claimant	Partner
Attendance Allowance				
Carer's Allowance				
Child Tax Credit				
Disability Living Allowance				
Earnings (Employed)				
Earnings (Self- Employed)				
Employment Support Allowance-Income Based				
Employment Support Allowance-Contribution Based				
Incapacity Benefit				
Industrial Injuries Benefit				
Income Support				
Job Seeker's Allowance-Contribution Based				
Job Seeker's Allowance-Income Based				
Maintenance for a child				
Maternity Allowance				
Pension Credit - Guarantee Credit				
Pension Credit - Savings Credit				
Personal Independence Payment				
Rent from boarders/sub-tenants				
Severe Disablement Allowance				
State Retirement Pension				
Statutory Maternity Pay				
Statutory Sick Pay				
Superannuation				
Universal Credit				
War Disablement Pension				
War Widow's Pension				
Widow's/Widower's Pension				
Working Tax Credit				
Works Pension/ Occupational Pension				
Other Income (Please state name of income)				
<b>TOTAL INCOME</b>				

**YOUR EXPENDITURE : DHP CLAIM**

Expenditure Details	Per Week		Per Month	
	Claimant	Partner	Claimant	Partner
Mortgage / Rent				
Mortgage / Rent Arrears				
Council Tax				
Council Tax Arrears				
Housing Benefit Overpayment				
Electric (Inc. Arrears)				
Gas (Inc. Arrears)				
Other Fuel (Inc. Arrears)				
Mobile Telephone				
Telephone/Internet				
TV License				
House Insurance				
Life Assurance (Inc. Endowment Policy)				
Child Minding				
Clothing				
Housekeeping				
Maintenance for a child				
School Meals				
Travel Expenses				
Car Loan Repayment				
Car Insurance				
Petrol				
Other Car Expenses				
Credit Cards Repayments				
Loans Repayments				
Hire Purchase				
Other (List Details)				
<b>TOTAL EXPENDITURE</b>				