



**Haringey** Council

**HOUSING BENEFIT AND COUNCIL TAX BENEFIT CHANGE OF CIRCUMSTANCES**

Name .....

Address .....

Claim Ref .....

Phone Number ..... E-mail Address .....

Please tell us about any changes by filling in the **relevant** section and returning this straightaway.

**PEOPLE MOVING INTO YOUR PROPERTY**

Who has moved into your property?

Surname ..... First Name .....

Date of Birth ..... Relationship to you .....

Date they moved in .....

Do you receive Child Benefit for this person? Yes  No   
*(You must provide proof)*

If not, what income do they receive? .....  
*(You must provide proof)*

If they work, how many hours do they work each week? .....

*(You must provide their last five weekly, two monthly or three fortnightly payslips. If they have just started work, you must provide the payslips they have received so far.)*

Are they a full-time student? Yes  No   
*(You must provide proof)*

**PEOPLE MOVING OUT OF YOUR PROPERTY**

Who has moved out of your property? Name .....

Date they moved out .....

**CHANGE IN RENT** (Council Tenants do not need to fill this in.)

Has your rent: Increased  Decreased

Date of Change .....

How much is your new rent? .....  
*(You must provide proof)*

**CHANGE IN INCOME OR SAVINGS**

Who has had a change in income or savings? Name .....

What is the change? .....  
*(You must provide proof)*

Date of Change ..... Have your Income/ Savings: Increased  Decreased

Has this person started work? Yes  No

*(You must provide their first five weekly, two monthly or three fortnightly payslips. If they have just started work, you must provide the payslips they have received so far.)*

Employer's Name and Address .....

Employer's Phone Number .....

What is the job? .....

How many hours do they work each week? ..... Weekly Earnings £.....

**ANY BREAK IN BENEFIT**

If you have had any breaks in Jobseeker's Allowance, Employment and Support Allowance or Income Support, please give the dates and say what income you had for that period.  
If you had no income, please say so.

.....  
.....

**ANY OTHER CHANGE IN CIRCUMSTANCES**

Who does the change relate to? Name .....

Date of Change .....

What is the change? .....  
*(You must provide proof)*

.....  
.....

**PLEASE SIGN**

I would like to continue claiming Housing Benefit and Council Tax Benefit.

Signature ..... Date .....

**Post to: Benefits & Local Taxation Service, PO Box 10505, Wood Green, N22 7WJ**  
**South Tottenham Customer Services Centre** Apex House 820 Seven Sisters Road Tottenham N15 5PQ  
Opening times: Monday - Friday 8.45am - 5.00pm  
**Wood Green Customer Services Centre** Ground Floor 48 Station Road Wood Green N22 7TY  
Opening times: Monday - Friday 8.45am - 5.00pm.  
**Call Centre** If visiting one of our centres is not convenient then telephone our Call Centre - Tel: 020 8489 1000  
Opening times: Monday - Friday 9.00am - 5.00pm