

# Help with your rent and Council Tax

**Send this form back straight away or you may lose money.**

For official use only:

Issued by:

Date requested/date of intention:

Received stamp:

Date of issue:

Please try to provide the evidence we need and send it with this form so that your claim for Housing Benefit or application for Council Tax Reduction is not delayed.

## Part 1 About you and your partner

By partner we mean:   
 • a person you are married to or a person you live with as if you are married to them; or   
 • a civil partner or a person you live with as if you are civil partners (see part 18).

Are you a:   
 council tenant  private tenant  housing association tenant    
 homeowner  lodger or boarder

Are you housed by the Council in temporary or emergency accommodation?

Which Council housed you?

Are you housed in supported accommodation? Yes  No

If you wish to apply for Alternative Maximum Council Tax Reduction only, please tick the box.

**Please refer to application notes.**

### You

Mr  Mrs  Miss  Ms  Mx

Surname

First names

Any other names

you have been known by

Date of birth

National Insurance Number

Email address

(we may contact you by email)

Address and postcode

(including flat or room number)

Daytime phone number

Date you moved

into this address

### Your partner

Mr  Mrs  Miss  Ms  Mx

Surname

First names

Any other names

you have been known by

Date of birth

National Insurance Number

Your Housing Benefit

or Council Tax Reduction reference

number (if you know it)

If you are claiming Housing Benefit or applying for Council Tax Reduction in Haringey for the first time, please provide some original personal identification (for example, a passport or ID card).

**Help to pay your rent and Council Tax**

**Haringey**  
LONDON

## Part 1 About you and your partner (continued)

	<b>You</b>	<b>Your partner</b>
Do you or your partner get Universal Credit?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you or your partner get Income Support, income-based Jobseeker's Allowance or income-related Employment and Support Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you or your partner get the guaranteed part of Pension Credit from The Pension Service?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner students?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you receive a bursary, grant or loan?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner getting Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner getting Disability Living Allowance care component?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner getting Personal Independence payment (care component)?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you or your partner getting Armed Forces Independence Payment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you or your partner have a carer who lives elsewhere, but provides care overnight in your home?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does anybody get Carer's Allowance for looking after you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes', please tell us who gets Carer's Allowance for you?	<input style="width: 150px; height: 20px;" type="text"/>	<input style="width: 150px; height: 20px;" type="text"/>
Have you or your partner been unfit for work for the past 28 weeks or more?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes', when did this start?	<input style="width: 150px; height: 20px;" type="text"/>	<input style="width: 150px; height: 20px;" type="text"/>
Do you or your partner get Incapacity Benefit, contribution-based Employment and Support Allowance, Severe Disablement Allowance, motability car or a private car allowance for a disability?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If you are retired, were you or your partner getting any of the benefits shown above until you retired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you or your partner pay rent on a home somewhere else?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

# Part 1 About you and your partner (continued)

Are you a joint owner or a joint tenant with someone else who lives with you?

No  Yes  If 'Yes' please tell us their full names

Person 1

Person 2

Person 3

Relationship   
to you

Relationship   
to you

Relationship   
to you

If there are any other joint tenants, please write the details in Part 19.

**What was your last address?**



postcode

What date did you leave?

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What was your situation?  
(For example, tenant, owner-occupier, living with parents)

**You**

**Your partner**

Have you or your partner claimed Housing Benefit or a Council Tax Reduction anywhere else before?

No  Yes

No  Yes

If 'Yes', please give the last address you claimed from (if different to the one above).



postcode

What date did you leave?

--	--	--	--	--	--	--	--

Have you claimed Housing Benefit within the last 52 weeks?

No  Yes

**You**

**Your partner**

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?

No

No

Yes

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 and apply to stay in the UK? The UK is England, Northern Ireland, Scotland and Wales.

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**If you are an Asylum Seeker or a Refugee and you need advice on your right to get Housing Benefit or Council Tax Reduction contact the Citizens Advice Bureau.**

## Part 2 Children living with you

Do you have any dependent children living with you? (Dependent children are those you would normally receive Child Benefit for.)

No   
Go to Part 3.

Yes   
Please fill in the boxes below.

Surname

First child date of birth

Surname

Second child date of birth

Surname

Third child date of birth

Surname

Fourth child date of birth

First names

Male  Female  Do you receive Child Benefit for this child? No  Yes

First names

Male  Female  Do you receive Child Benefit for this child? No  Yes

First names

Male  Female  Do you receive Child Benefit for this child? No  Yes

First names

Male  Female  Do you receive Child Benefit for this child? No  Yes

**If there is not enough space to include everyone, please write the details in Part 19.**

**You must give us proof of the Child Benefit you receive. If you do not get Child Benefit for any of the children above, you must tell us why in Part 19.**

Do you pay for a registered childminder or a childminding scheme to look after a child while you or your partner are at work? No  Yes  If 'Yes', which child is looked after?

Name  of 1st child      Name  of 2nd child      Name  of 3rd child

Name and address of registered childminder or childminding scheme   
 **postcode**

Phone number       Childminder's   
How much do you pay each week  registration number (please provide a letter from your childminder or scheme)

Are any of your children blind receiving Disability Living Allowance or Personal Independence Payment? No  Yes  If 'Yes' what is  the child's name?

**If there is not enough space above to include everyone, please continue on a separate sheet.**

Do any children you are claiming for, own land or property, or have any property or money held in trust? No  Yes

**We must see proof of your benefits and allowances before we can deal with your claim. This proof can include original letters from the Department for Work and Pensions. If you or your partner are getting Pension Credit, please read the important information on page 11.**

## Part 3 Everyone else living with you

Please tell us about anyone else who lives with you. Do not include your partner, children you get Child Benefit for, joint tenants or people who pay you rent. **Include adult children, or other relatives and friends who live as part of your household.**

Does anybody else live with you? No  Yes  If 'No', go to Part 4.

### First person

Surname  First names

First person date of birth  Male  Female  Relationship to you

What date did they move in?

Is this person getting Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance, Pension Credit or Universal Credit? No

Is this person working? No

If 'Yes', how many hours does he or she work each week?

How much does he or she earn each week before tax and other deductions? £

Does he or she have any other income? No  Yes

If 'Yes', please give details.

Is this person a student? No  Yes  (If 'Yes' please provide proof)

**It would help us verify your non-dependant's DWP Benefit if you provide their National Insurance Number.**

Yes  (If 'Yes' please provide proof)

Yes  (If 'Yes' please provide proof of their income)

### Second person

Surname  First names

Second person date of birth  Male  Female  Relationship to you

What date did they move in?

Is this person getting Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance, Pension Credit or Universal Credit? No

Is this person working? No

If 'Yes', how many hours does he or she work each week?

How much does he or she earn each week before tax and other deductions? £

Does he or she have any other income? No  Yes

If 'Yes', please give details.

Is this person a student? No  Yes  (If 'Yes' please provide proof)

**It would help us verify your non-dependant's DWP Benefit if you provide their National Insurance Number.**

Yes  (If 'Yes' please provide proof)

Yes  (If 'Yes' please provide proof of their income)

## Part 3 Everyone else living with you (continued)

### Third person

Surname  First names

Third person date of birth  Male  Female  Relationship   
to you

What date did they move in?

Is this person getting Income Support,  
income-based Jobseeker's Allowance,  
income-related Employment and Support  
Allowance, Pension Credit or Universal Credit?

No

Yes  (If 'Yes' please provide proof)

Is this person working?

No

Yes  (If 'Yes' please provide proof of their  
income)

If 'Yes', how many hours does he or she work each week?

How much does he or she earn each week before tax and other deductions?

£

Does he or she have any other income?

No

Yes

If 'Yes', please give details.

Is this person a student?

No

Yes  (If 'Yes' please provide proof)

Are any of the people you have told us about  
married to each other, civil partners or living  
together as if they are married or civil partners?

No

Yes

If 'Yes', please give their names.

is the partner of

**We need to see proof of all their income — please read Part 18.**

**If there is not enough space above to include everyone, please write the details in Part 19.**

If you are a Council or Housing Association joint tenant (with someone other than your partner) we need to know the names, date of birth and gender of all other children and adults living in the property. Please write details in Part 19.

## Part 4 About you and everyone else living with you

Are you or your partner, or anybody else living with you, any of the following?

Severely mentally impaired  
(That is, having a severe learning  
disability, mental illness or dementia)

No

Yes

Please say who

In hospital for more than 52 weeks

No

Yes

Please say who

In prison or on bail but living  
away from home

No

Yes

Please say who

## Part 4 About you and everyone else living with you (continued)

In a nursing home or care home	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Please say who <input type="text"/>
A full time student or a student nurse	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Please say who <input type="text"/>
An apprentice or Youth Training trainee	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Please say who <input type="text"/>
Providing full time care to someone other than their parent or child	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Please say who <input type="text"/>
A member of a religious community	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Please say who <input type="text"/>
A member of an International Headquarters or defence organisation	No <input type="checkbox"/>	Yes <input type="checkbox"/>	Please say who <input type="text"/>

### Important information if you or your partner are getting Pension Credit from The Pension Service

If you or your partner get Pension Credit, the way you provide information to us may be different.

If you get **the guaranteed part**, you do not need to tell us about your income or fill in Parts 5 to 11 of this form.

If you get **the savings part**, you still need to fill in Parts 5 to 11 but you do not need to give us proof of your income. This is because The Pension Service gives details of your income straight to us.

## Part 5 About work

	<b>You</b>		<b>Your partner</b>
<b>Do you do any work?</b> (This includes childminding.)	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Please give details below.

If both you and your partner don't work, please go to Part 6.

### Your details

Name and address of your employer	<input type="text"/>		
	<input type="text"/>		
	postcode		
Employers phone number	<input type="text"/>	Works payroll number	<input type="text"/>
What is your job?	<input type="text"/>	Number of hours you usually work each week	<input type="text"/>
How much do you normally earn?	£ <input type="text"/> every <input type="text"/>	When did you start work	<input type="text"/>

## Part 5 About work (continued)

### Your partner's details

Name and address of their employer		
	postcode	
Employers phone number		Works payroll number <span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>
What is their job?		Number of hours they usually work each week <span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>
How much do they normally earn?	£ <span style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></span> every <span style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></span>	When did they start work <span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>

## Part 6 More about you and your partner

	You		Your partner
Do you or your partner do any other work at all? (Please tell us about your other jobs in part 19.)	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you on a Government Training Scheme? (For example, Youth Training, Training for Work)	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you self-employed?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes', do you get the New Enterprise Allowance?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you have a private pension plan?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If you are on a temporary or fixed-term contract, when will it finish?	<span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>		<span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>
What is the date of the next pay increase?	<span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>		<span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>
How are your wages paid? (For example, cash, cheque, or into a bank account)	<span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>		<span style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></span>

**We must see proof of your earnings before we can deal with your claim.**

**If you or your partner are working, we will need to see your:**

- ♦ last five payslips if you are paid weekly;
- ♦ last three payslips if you are paid fortnightly; or
- ♦ last two payslips if you are paid monthly.

**If you do not have these, ask your employer to fill in the pay form which is included in this form. Do not wait for your employer to fill in the pay form. Send this form to us straight away or you may lose benefit.**

**If you do not provide these details, we may need to contact your employer.**

**If you or your partner are self-employed, please send us your most recent profit and loss accounts and tax assessment.**

**If you have a private pension plan, please send proof of the payments you make.**

**We need to see proof of all of your income — please read Part 18.**

**If you or your partner are getting Pension Credit, please read the important information on page 11.**

**If you or your partner have recently started work please provide us with your contract confirming your annual salary and hours of work per week. If you are unable to provide this please ask your employer to provide an estimate of your income.**



# Part 7 Benefits and other money

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

No  Go to Part 8.

Yes  Tell us about the benefits below. Tell us the full rate of the benefits before deductions.

Read the list of benefits below and tell us about any you or your partner are getting now or have claimed.

- ◆ Armed Forces Independence Payment
- ◆ Attendance Allowance
- ◆ Carer's Allowance
- ◆ Child Benefit
- ◆ Child Tax Credit
- ◆ Contribution-based Jobseeker's Allowance
- ◆ Disability Living Allowance - care component
- ◆ Disability Living Allowance - mobility component
- ◆ Guardian's Allowance
- ◆ Incapacity Benefit
- ◆ Contribution-based Employment and Support Allowance
- ◆ Industrial Injuries Disablement Benefit
- ◆ Maternity Allowance
- ◆ Pension Credit
- ◆ Personal Independence Payment - Care Component
- ◆ Personal Independence Payment - Mobility Component
- ◆ Severe Disablement Allowance
- ◆ State Pension
- ◆ War Pension, War Disablement Benefit or War Widow's Pension
- ◆ Widow's or Widower's Benefits
- ◆ Working Tax Credit
- ◆ Universal Credit

**If you or your partner get Income Support, income based Jobseeker's Allowance, income related Employment and Support Allowance the guaranteed part of Pension Credit from The Pension Service or Universal Credit, go straight to Part 12.**

If you are getting or have claimed any benefit that is not listed, tell us about it in Part 8.

<b>1</b>	<b>You</b>	<b>Your partner</b>
The name of the benefit or other money	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/>	<input type="checkbox"/>
How much is it?	£ <input type="text"/>	£ <input type="text"/>
How often do you receive the payment? (For example, every week or every four weeks)	<input type="text" value="Every"/>	<input type="text" value="Every"/>
How is it paid? (For example, straight into your bank)	<input type="text"/>	<input type="text"/>

<b>2</b>	<b>You</b>	<b>Your partner</b>
The name of the benefit or other money	<input type="text"/>	<input type="text"/>
Waiting to hear	<input type="checkbox"/>	<input type="checkbox"/>
Getting now	<input type="checkbox"/>	<input type="checkbox"/>
How much is it?	£ <input type="text"/>	£ <input type="text"/>
How often do you receive the payment? (For example, every week or every four weeks)	<input type="text" value="Every"/>	<input type="text" value="Every"/>
How is it paid? (For example, straight into your bank)	<input type="text"/>	<input type="text"/>

## Part 7 Benefits and other money (continued)

**3**

**You**

**Your partner**

The name of the benefit or other money

Waiting to hear

Getting now

How much is it?

How often do you receive the payment?  
(For example, every week or every four weeks)

How is it paid?  
(For example, straight into your bank)

**4**

The name of the benefit or other money

Waiting to hear

Getting now

How much is it?

How often do you receive the payment?  
(For example, every week or every four weeks)

How is it paid?  
(For example, straight into your bank)

**5**

**You**

**Your partner**

The name of the benefit or other money

Waiting to hear

Getting now

How much is it?

How often do you receive the payment?  
(For example, every week or every four weeks)

How is it paid?  
(For example, straight into your bank)

# Part 8 Any other money coming in

Do you or your partner have any other money coming in?  
(For example, maintenance from a previous partner,  
a student grant or loan, or a private pension)

No  Go to Part 9.

Yes  Tell us about this money below.

<b>1</b>	<b>You</b>	<b>Your partner</b>
What is the money for?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How much is it?	£ <input style="width: 90%;" type="text"/>	£ <input style="width: 90%;" type="text"/>
How is it paid? (For example, straight into your bank)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How often do you receive the payment? (For example, every week or every four weeks)	Every <input style="width: 80%;" type="text"/>	Every <input style="width: 80%;" type="text"/>
When did you start getting this?	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<b>2</b>		
What is the money for?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How much is it?	£ <input style="width: 90%;" type="text"/>	£ <input style="width: 90%;" type="text"/>
How is it paid? (For example, straight into your bank)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How often do you receive the payment? (For example, every week or every four weeks)	Every <input style="width: 80%;" type="text"/>	Every <input style="width: 80%;" type="text"/>
When did you start getting this?	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<b>3</b>		
What is the money for?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How much is it?	£ <input style="width: 90%;" type="text"/>	£ <input style="width: 90%;" type="text"/>
How is it paid? (For example, straight into your bank)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How often do you receive the payment? (For example, every week or every four weeks)	Every <input style="width: 80%;" type="text"/>	Every <input style="width: 80%;" type="text"/>
When did you start getting this?	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Have you or your partner applied for any other income that you have not received? (For example, maintenance payments or health insurance policies)	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
If 'Yes' what is it for?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

**We must see proof of your benefits and allowances before we can deal with your claim.**

**This proof can include original letters from the Department for Work and Pensions which are up to date and show current amounts. You can send a letter or pay statements from the company paying your pension.**

**If you or your partner are getting Pension Credit, please read the important information on page 11.**

# Part 9 About bank accounts, savings, investments and property

We need to know about ALL bank accounts, building society accounts, savings, investments and property in the UK and abroad, held by you and your partner. This includes cash, current accounts and savings accounts with bank or building society, Post Office® accounts, Premium Bonds, National Savings Certificate, and stocks and shares even if you do not use them or they have no money in them.

## Do you or your partner have any of the following?

**Bank account** No  Yes  How many accounts  Total amount £

Name of the bank(s) where the accounts are held?

Acc number         Sort code   -   -

Acc number         Sort code   -   -

Acc number         Sort code   -   -

**Building society accounts** Roll number  Sort code   -   -

Roll number  Sort code   -   -

Roll number  Sort code   -   -

No  Yes  How many accounts  Total amount £

Name of the building society(ies) where the accounts are held?

## Post Office® accounts

No  Yes  How many accounts  Total amount £

**Money in cash** No  Yes  Total amount £

**Premium Bonds** No  Yes  How many bonds  Total amount £

**Unit trusts, ISAs, PEPs, TESSAs** No  Yes  How many accounts  Total amount £

Where are they held?

**Income Bonds** No  Yes  How many bonds  Total amount £

Where are they held?

**Money and property trust** No  Yes  How many  Total amount £

Where is the money held?

Address of the property?

**National Savings Certificate** No  Yes  How many certificates  Total amount £

**Shares** No  Yes  How many shares  Total amount £

Name of the company the shares are held with?

**Any other savings or investments** No  Yes  How many  Total amount £

Type of other savings or investment?

Where are they held?

Are any of your savings and investments monies from sale of a house or money from a charity No  Yes

Do you own a property or land in the UK or abroad? Even if it is on a mortgage or a loan, still tick **Yes**.

No  Yes  Tell us the address of your property:

Does your partner own a property or land in the UK or abroad? Even if it is on a mortgage or a loan, still tick **Yes**.

No  Yes  Tell us the address of your property

**We must see evidence of ALL bank accounts, building society accounts, savings, investments and property before we can decide how much benefit you can get. Read the checklist in Part 18 to see what you can use as evidence.**

## Part 10 Money from renting out property

Do you rent out any other property?

No  Yes

If **'Yes'**, give us the address of the property, how much you get, and how often.

 every

(If you have more than one property, please continue on a separate sheet of paper.)

Do you rent out part of your home?

No  Go to Part 11. Yes

If **'Yes'**, please write the name of everyone you rent part of your home to. Put the amount that they pay and tell us if heating or meals are included.

**1** Full name

Is heating included?

No  Yes

Are any meals included?

No  Yes

Weekly amount they pay

**2** Full name

Is heating included?

No  Yes

Are any meals included?

No  Yes

Weekly amount they pay

If there are more than two people who pay you rent, please tell us about them in Part 19.

## Part 11 Money you pay out

Do you pay any money to help support a son or daughter under 25 at college or university?

No  Yes

If **'Yes'**, please send proof.

# Part 12 About the rent you pay

If you receive Universal Credit you should only complete this section:

- ♦ If you are moving into or currently living in supported housing.

- ♦ If you have been living in temporary accommodation

**Go straight to part 15 if this does not apply**

**Council tenants, homeowners and those applying for Council Tax Reduction only, go straight to Part 15.**

What type of tenancy do you have?  
(For example, assured shorthold)

How long is your tenancy for?

How much is your rent?

£

How often is it paid?  
(For example, every week, every four weeks, or every month)

If you share with other tenants, how many do you share with?

Did you rent this property as:

fully furnished  partly furnished  not furnished

Who is responsible for decorating inside your home?

Landlord  You

Does your rent include any meals?

No  Yes

If 'Yes', what meals are included?

Breakfast only  Breakfast and one other meal a day  Three meals or more a day

Do you owe any rent?

No  Yes

If 'Yes', how much?

£  (Please provide a letter from your landlord confirming amount of arrears and period)

Do you pay for any of the things below as part of your rent?

	No	Yes	How much?
Council Tax	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Water rates	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Heating	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Hot water	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Fuel for cooking	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Electricity for things like TV and radio	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Personal care or medical expenses	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Personal laundry	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Emergency alarm system	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Lighting, heating, cleaning common areas	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Room cleaning or window cleaning	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
General counselling or support	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Garage	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>
Other services	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>

We must see proof of your rent before we can deal with your Housing Benefit claim. Please send us your current tenancy agreement or rent book. If you have a registered rent, please provide your rent registration form R05.

## Part 13 About the property you live in

Please tick what sort of accommodation you pay rent for.

Bedsit	<input type="checkbox"/>	Flat in a house	<input type="checkbox"/>	House	<input type="checkbox"/>
Own room	<input type="checkbox"/>	Flat in a block	<input type="checkbox"/>	Hostel	<input type="checkbox"/>
Room shared with other tenants	<input type="checkbox"/>	Flat over a shop	<input type="checkbox"/>		
Studio flat	<input type="checkbox"/>	Other	<input type="checkbox"/>		

If 'Other', please describe your accommodation.

If you live in a room or bedsit, where is it in the building? Front  Back  Middle

How many floors are there in the building that you live in?

Which floor or floors do you live on?  
(For example, ground floor, third floor, basement)

Fill in the table below to tell us how many rooms there are in your property.

	Living or dining rooms	Bedrooms	Bathrooms	Kitchen	Toilets
How many are in the <b>whole</b> property?					
How many are used <b>only</b> by you and your family?					
How many do you share with people who are <b>not</b> in your family?					

Do you have:

a garden	<input type="checkbox"/>	central heating	<input type="checkbox"/>
a garage	<input type="checkbox"/>	a parking space	<input type="checkbox"/>

## Part 14 About your landlord

Council tenants, home owners and those applying for Council Tax Reduction only, go to part 15.

Please give the name and address of your landlord or the agency you pay rent to

  
  
 postcode

Landlord's or agency's email

Landlord's or agency's telephone number

Please give the name and address of the owner of your home if it is different from the name and address you have given above.

  
  
 postcode

## Part 14 About your landlord (continued)

Does your landlord live in your house or flat?

No

Yes

Is your landlord (or agent), or the partner of your landlord (or agent):

No

Yes

If 'Yes', what is the relationship?

- ♦ your former partner;
- ♦ your partner's former partner;
- ♦ related to you or your partner;
- ♦ related to your children; or
- ♦ related to your partner's children?

## Part 15 How your award is paid

### Council Tax Reduction Scheme

If you are entitled to Council Tax Reduction, we will take it off your Council Tax bill.

### Housing Benefit – council tenants

We will pay any Housing Benefit you are awarded to your rent account.

**Council tenants, home owners and those applying for Council Tax Reduction only go to Part 16.**

#### If you:

- ♦ are a housing association tenant;
- ♦ live in a caravan, houseboat or mobile home;
- ♦ moved into your home before 15 January 1989; or
- ♦ rent from a charity or voluntary organisation that gives you care or support;

we can pay your benefit to your landlord or to you.

- ♦ If you are in one of the categories above and you want us to pay to your landlord direct, tick this box .  
Give us their account details on the next page.

If you rent from a housing association and you want us to pay benefit direct to your landlord, we will normally have their account details.

You should just give us their landlord reference number if you know it .

If you do not know their landlord reference number, give their bank account details on the next page.

#### All other tenants

If you are a private tenant, your benefit will normally be paid direct to your bank or building society account (not post office card accounts). Please give your account details over the page.

If you do not have a bank or building society account, please tell us why. For advice on setting up a basic bank account, phone the Financial Conduct Authority (FCA) on 0300 500 0597.

If you think we should pay your benefit direct to your landlord, tell us why in the space below. You need to:

- ♦ tell us if you will secure or retain your tenancy if Housing Benefit is paid direct to your landlord;
- ♦ tell us why you have difficulty managing your finances;
- ♦ tell us why you will not be able to pay your rent; and
- ♦ provide any evidence you think is relevant (for example, a letter from your social worker or a letter from your landlord confirming that you are eight weeks or more behind with your rent).



## Part 15 How your benefit is paid (continued)

### Bank details (we will pay your benefits into this account)

Name of account holder

Name and address of bank or building society

Sort code

 -  - 

Account number

Roll number (building-society accounts only)

## Part 15a Sharing information with your landlord

Sharing information with your private landlord could help us deal with your Housing Benefit claim more quickly and reduce the risk of you falling behind with your rent because of your claim being delayed. We may need to confirm information (for example, the date your tenancy started) with your landlord before we can make a decision on your claim. In these circumstances, we can contact your landlord without your permission.

With your permission, we will also share information about your claim with your landlord where your Housing Benefit is paid directly to your landlord. We may tell you landlord whether:

- ♦ you have claimed Housing Benefit;
- ♦ we have made a decision on your claim; or
- ♦ we need more information to make a decision on your claim, and general information of what that may be.

We will not give your landlord any information about your personal, household or financial circumstances. You can withdraw your permission at any time. It will not affect your claim if you do not give us permission to discuss your claim with your landlord. If you want to give us permission to discuss your claim with your landlord, please sign below.

**However, we will not give your landlord any information about:**

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

You can withdraw your permission at any time.

It will not affect your claim if you do not give us permission to discuss your claim with your landlord. If you want to give us permission to discuss your claim with your landlord, please sign below.

**I give you permission to share information about my Housing Benefit claim with my landlord or their representative.**

Your signature

Full name

(in CAPITAL LETTERS)

Date

## Part 16 Extra help

We may be able to backdate your Housing Benefit and/or application for Council Tax Reduction if you are able to show continuous good cause for not claiming earlier. **You must state a reason for the delay.**

Period you wish to request backdating

from  to  (If there is not enough space please write details in Part 19.)

We may be able to give you extra help if you are finding it hard to pay your rent. If there is a shortfall between the benefit you expect to receive and the rent you are being charged by your landlord please tick the box if you need extra help .

If you can get extra help, we will send you a letter to tell you.

## Part 17 Telling us about any changes

Please tell us right away if anything changes for you or the people who live with you as this could affect your award. If we find that we have paid you too much money, you will have to pay us back. We may have to take any money you owe us off your award.

(If you are getting Pension Credit from The Pension Service, please go to Part 17a.)

Here are **some** of the things you must tell us about.

- ♦ If you stop or start getting Income Support, Jobseeker's Allowance, Employment and Support Allowance or any other benefits.
- ♦ If your rent goes up or down (private tenants only).
- ♦ If your or your partner's wages go up or down (for example, if you work regular overtime).
- ♦ If the other money that you and your partner have coming in goes up or down.
- ♦ If your savings or your partner's savings change.
- ♦ If anyone who lives with you has a change in their situation, such as starting work.
- ♦ If anyone who lives with you moves out.
- ♦ If anyone moves in to live with you.
- ♦ If you change your address.
- ♦ If you are going away for 4 weeks or more.
- ♦ If you are refused asylum by the Home Office.
- ♦ If you stop, start or change the amount you pay for your childcare.
- ♦ If you go into hospital or if you are imprisoned.

## Part 17a Telling us about any changes (for people getting Pension Credit)

If you are getting the guaranteed part or the guaranteed part plus the savings part of Pension Credit, you must tell us the following.

- ♦ Changes to your tenancy (for example, if your rent changes or you move out).
- ♦ If anyone who lives with you moves out or their situation changes, such as starting work.
- ♦ If someone moves into your household.
- ♦ If you are going away for 4 weeks or more.
- ♦ Although you do not need to, it is in your best interest to let us know when you start receiving Attendance Allowance.
- ♦ If you go into hospital or if you are imprisoned.

If you are getting the savings part only, you must tell us the following.

- ♦ Changes to your tenancy (for example, if your rent changes or you move out).
- ♦ If anyone who lives with you moves out or their situation changes, such as starting work.
- ♦ If someone moves into your household.
- ♦ If you are going away for 4 weeks or more.
- ♦ If you have savings and investments over £16,000.
- ♦ Changes to the income or capital of your partner (if they were not included in the Pension Credit claim).
- ♦ Changes affecting any children who live with you.
- ♦ If you go into hospital or if you are imprisoned.

## Part 18 Checklist

Before you return this form please read through the checklist below and make sure that you have provided all the information we have asked for.

If you cannot provide all the information right now, please return the form and send the missing information later.

If you or your partner are getting Pension Credit, please read the important information on page 11.

Please tick to show where you have provided information.

### **Personal details**

If you or your partner are claiming Housing Benefit or applying for Council Tax Reduction at this address for the first time, please send us some original personal identification (for example, a driving licence, marriage certificate, passport or wage slips). If you are from abroad, please give us your passport and your Home Office letters. We can only accept original documents. We will return valuable documents to you immediately by registered post.

### **Civil partnerships**

A civil partnership is a formal agreement that gives same-sex partners the same legal status as a married couple. If you currently live with a civil partner, we will need to see proof of your partner's identity and National Insurance number.

### **Income Support, Employment and Support Allowance and other benefits**

If you, your partner or anyone living with you gets state benefits, we need to see proof (for example, original Department for Work and Pensions letters). We also need to see proof of your Child Benefit.

### **Wages**

If you, your partner, or anyone living with you works, we need to see proof (for example, five wage slips if paid weekly, two wage slips if paid monthly and three slips if paid fortnightly). If you don't get wage slips, please get a letter from your employer outlining your wages for the last five weeks or ask your employer to fill in and return the enclosed pay form. We must see evidence of your National Insurance number.

### **Employment**

If you or your partner or anyone living with you have started work please provide the contract of employment with details of your annual salary and regular hours of work.

### **Savings, investments and property**

If you have any savings or investments, we need to see proof (for example, bank statements, building society books, original share certificates, legal documents or mortgage statement and valuation of property).

### **Rent**

If you are a private tenant, you need to provide a tenancy agreement or a rent book or a letter from your landlord confirming how much rent you pay and what is included in the rent.

### **Backdating**

If you have asked backdating, please provide any documents to support your request (for example, sickness certificates, flight tickets, and so on).

### **Childcare costs**

If you pay childcare costs, we require a letter from the registered scheme or a letter from the registered childminder

**If you feel that you need a home visit, please contact our  
Customer Services Team for advice on 020 8489 1000.**

## Part 19 Anything else to tell us

If there is anything else you would like to tell us, please do so in the box below.

## Part 19a Permission for another person to act on your behalf

**Advice/Support Worker's or member of your family.**

*I give permission to the person mentioned below to act on my behalf.*

Full name	<input type="text"/>	Relationship to you	<input type="text"/>
Advice/Support Worker's company name	<input type="text"/>		
Full address	<input type="text"/>		
Contact number	<input type="text"/>		
Your signature	<input type="text"/>		
Full name	<input type="text"/>	Date	<input type="text"/>

## Part 20 How we collect and use information

### Data Protection Act 2018 Right to be Informed - Privacy Notice

Haringey Council needs the information we collect on this form and from supporting evidence to process your claim for Housing Benefit and application for Council Tax Reduction. Our Data Protection Act 2018 basis for processing the information is that it is necessary for the compliance with a legal obligation. The legal obligation is the Local Government Finance Act 1992. If you do not provide the information we require, we will not be able to assess or process your claim.

We may check the information you provide, or the information about you which somebody else provides, with other information we hold. We may also receive information from other people or organisations, or give information to them to check the accuracy of information, to prevent or detect crime, or to protect public funds in other ways, if the law allows us.

We will retain a record of your claim for 6 years from the date the claim ends.

Haringey Council's Record of Processing Activities sets out full details of why and how we use personal information. You have a right to access the information that we hold and have inaccurate information corrected. Please see the information on the Data Protection section of our website for details of our processing activities, your legal rights relating to how we use your personal data and how to exercise those rights.

## Part 21 Equal Opportunities

The Public Sector Equality Duty does not expressly require the council to collect equality information. However, collecting, analysing and using the information helps us to see how our policies and activities are affecting various sections of our communities. In employment and service provision, it helps us to identify any existing inequalities and where new inequalities may be developing and take action to tackle them.

In addition to the nine "protected characteristics" (Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Sex [formerly Gender], Race, Religion or Belief and Sexual Orientation) identified in the Equality Act 2010, we have added categories of Refugees and Asylum Seekers and Language in order to reflect the full diversity of Haringey.

We will be grateful if you could take a little time to complete and return this form. Please go through it and tick all the categories that most accurately describe you.

The information you provide on this form will be held in the strictest confidence and only be used for the purposes stated above.

### Disability

Under the Equality Act 2010, a person is considered to have a disability if she/he has a physical or mental impairment which has a substantial and long-term adverse effect on her/his ability to carry out normal day-to-day activities. Haringey Council accepts the social model of disability. However, in order to be able to identify and respond to your specific needs, it is important that we know what kind of disability you have.

**Do you have any of the following conditions which have lasted or are expected to last for at least 12 months?**

- |  |   |
|--|---|
| <input type="checkbox"/> Deafness or partial loss of hearing | <input type="checkbox"/> Long term illness or condition |
| <input type="checkbox"/> Blindness or partial loss of sight  | <input type="checkbox"/> Physical disability            |
| <input type="checkbox"/> Learning disability                 | <input type="checkbox"/> Other disabilities             |
| <input type="checkbox"/> Developmental disorder              | <input type="checkbox"/> No disabilities                |
| <input type="checkbox"/> Mental ill health                   |   |

### Ethnicity

Please tick the box that best describes your ethnic group

#### White

- British  
 Irish

#### White Other

- |  |  |
|--|--|
| <input type="checkbox"/> Greek/Greek Cypriot         | <input type="checkbox"/> Turkish/Cypriot |
| <input type="checkbox"/> Turkish                     | <input type="checkbox"/> Kurdish         |
| <input type="checkbox"/> Gypsy/Roma                  | <input type="checkbox"/> Irish Traveller |
| <input type="checkbox"/> Other, please specify _____ |  |

#### Mixed

- White and Black African  
 White and Black Caribbean  
 White and Asian  
 Other, please specify \_\_\_\_\_

#### Asian or Asian British

- Indian  
 Bangladeshi  
 Pakistani  
 East African Asian  
 Other, please specify \_\_\_\_\_

### Black or Black British

- African
- Caribbean
- Other please specify \_\_\_\_\_

### Chinese or other ethnic group

- Chinese
- Any other ethnic background \_\_\_\_\_

### Gender reassignment

Does your gender differ from your birth sex?

- Yes
- No
- Prefer not to say

### Religion

Please tick as appropriate

- Christian
- Hindu
- Muslim
- Sikh
- Prefer not to say
- Jewish
- Rastafarian
- Buddhist
- No Religion
- Other (please specify) \_\_\_\_\_

### Sexual orientation

Please tick the box that best describes your sexual orientation

- Heterosexual
- Bisexual
- Gay
- Lesbian
- Prefer not to say

### Pregnancy and maternity

Please tick one box

Are you pregnant?

- Yes
- No

Have you had a baby in the last 12 months?

- Yes
- No

### Relationship status

Please tick one box

- Single
- Married
- Co-habiting
- In a same sex civil partnership
- Separated
- Divorced
- Widowed

### Refugees and Asylum Seekers

Are you?

- A Refugee
- An Asylum Seeker

What country or region are you a refugee/asylum seeker from?

### Language

Please tick the box that best describes your language

- Albanian
- Arabic
- English
- French
- Lingala
- Somali
- Turkish

Other (please specify) \_\_\_\_\_

## Part 22 Your declaration

**Please read this declaration carefully before you sign and date it.**

If I give information that is incorrect or incomplete, you may take action against me. This may include court action.

- ♦ I know I must let you know about any changes in my circumstances which affect my claim for Housing Benefit, application for Council Tax Reduction, or both. See Part 17 for guidance.

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

Signature of the person claiming for Housing Benefit, application for Council Tax Reduction, or both.

Date

Partner's signature

Date

## Filling in the form for someone else

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

Name of the person filling in this form

Signature of the person claiming for Housing Benefit, application for Council Tax Reduction, or both.

Date

**For guidance with the completion of the form please visit one of our Customer Service Centres.**

**Shqip**

Për udhëzime në plotësimin e formularit, ju lutem vizitoni një nga Qendrat tona të Shërbimit të Klientëve.

**Polski**

Pomoc w wypełnieniu formularza można uzyskać w każdym Centrum Obsługi Mieszkańców.

**Français**

Pour obtenir de l'aide pour compléter ce formulaire veuillez visiter l'un de nos Centres de Service Client.

**Soomaali**

Si aad u hesho tilmaamo ku saabsan buuxinta foomka, fadlan booqo mid ka mida xarumaha Adeegga macmiisha.

**Türkçe**

Bu formun doldurulması konusunda tavsiye için lütfen bir Müşteri Hizmetleri Merkezimizi ziyaret eden.

**Kurdî Kurmancî**

Ji bo rêberîya tijekirina formê, ji kerema xwe biçin yek ji Navendên me yên Xizmeta Mîşterî.

**Where to send this form**

**Please make sure that you have filled in Part 1 on the front page.** We will work out your benefit from what you have told us. If you cannot send us the proof we need right away, **send in the form now and send the proof as soon as you can.** But remember, we can't pay your Housing Benefit or Council Tax Reduction until we have all the proof we need. Please make sure that your address is on all proof you send us. **We will write to you as soon as possible to tell you how much Housing Benefit or Council Tax Reduction you will get, and when it will start. You must tell us right away about anything that could change your Housing Benefit or Council Tax Reduction.**

Please send this form and any proof to:

**Benefits Service  
Haringey Council  
PO Box 10505  
Wood Green  
London N22 7WJ**