

Claim Form for Housing Benefit and Council Tax Benefit



For office use only

Tick (✓) as appropriate	New claim	<input type="checkbox"/>	Postal review	<input type="checkbox"/>	Change of address	<input type="checkbox"/>
Please return this form by			/	/	Claim Number	

We require these details as soon as possible in order to make a payment of Housing Benefit and or Council Tax Benefit

Section 1. About you and your partner

	You	Your partner
Name		
Any other last names you have used		
Address Do not tell us your partner's address if it is the same as yours		
What date were you offered the tenancy?	/ /	/ /
What is the date your tenancy commenced?	/ /	/ /
What date did you move to this address?	/ /	/ /
Date of birth	/ /	/ /
National Insurance number		
Your daytime phone number		
Your mobile phone number		
Your e-mail address		
If you have moved home in the last 12 months, tell us your last address		
Have you or your partner claimed Housing Benefit or Council Tax Benefit before?	Yes <input type="checkbox"/> No <input type="checkbox"/> When did you last claim? <input style="width: 100px;" type="text"/> / / What address did you claim for? <input style="width: 200px; height: 40px;" type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> When did you last claim? <input style="width: 100px;" type="text"/> / / What address did you claim for? <input style="width: 200px; height: 40px;" type="text"/>
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 2 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
What is your nationality?		
If your nationality is not British, on what date did you last enter the UK?	/ /	/ /
Is anyone receiving Carer's Allowance for looking after you or your partner?	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please state their name <input style="width: 200px;" type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', please state their name <input style="width: 200px;" type="text"/>

Section 2. About other people that live in your home

Please list the names of everybody who normally lives with you. This includes dependant children and any older children or relatives who live with you. If no-one lives with you, please write 'none'.

Name	Relationship to you e.g. son etc.	Date of birth	Income if any e.g. gross gross earnings / pension etc.	Weekly amount
		/ /		£
		/ /		£
		/ /		£
		/ /		£

Section 3. About benefits and state pensions received

Please give details of all benefits and pensions received for yourself and your partner, if you have one. (e.g. Child Benefit, Income Support, Jobseekers Allowance, Tax Credits, Incapacity Benefit, Employment and Support Allowance, Disability Living Allowance, Carer's Allowance, State Retirement Pension, Pension Credit etc.) If none please write "none".

The name of the benefit or pension	You	Your Partner
	Amount £ every	Amount £ every
	Amount £ every	Amount £ every
	Amount £ every	Amount £ every
	Amount £ every	Amount £ every
Are you or your partner waiting to hear about a claim for benefit?	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', which Benefit(s)? <input type="text"/> And the date you claimed <input type="text"/> / <input type="text"/> / <input type="text"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> If 'Yes', which Benefit(s)? <input type="text"/> And the date you claimed <input type="text"/> / <input type="text"/> / <input type="text"/>

Section 4. About your earnings

Please give details of your earnings and how often it is received. Also give these details for your partner, if you have one. If none please write "none".

	You	Your Partner
Name and address of employer		
How much do you get paid before tax and National Insurance are taken off?	£	£
How often do you get paid?	Every	Every
How many hours a week do you usually work?		
Are you self-employed? if 'Yes', we will write to you for more details	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Section 5. About other income

Please give details of all other income received (e.g. private pensions, student loan/bursary and maintenance) and how often it is received (e.g. weekly, four weekly, monthly etc). Also give these details for your partner, if you have one. If none please write "none".

Type of income e.g. private pension	You	Your Partner
	£ every	£ every
	£ every	£ every
	£ every	£ every

Section 6. About savings, investments and property

Please give details of your savings and, investments This includes money held in bank/building society accounts, premium bonds, stocks and shares, and property other than that you occupy as your own home. Also give these details for your partner, if you have one. If none please write "none".

Type of capital held, e.g. bank/ building society/ shares etc.	Total Capital
	£
	£
	£
	£

Section 7. About your childcare expenses

Please give details of any childcare costs you pay to registered childminder, nursery or after school club etc. If you do not pay childcare costs please write "none". We need to see proof of any childminding costs you pay.

Please tell us the name of person, organisation looking after your child.			
Childminder Registration Number		Child costs paid	£ Every

Section 8. Private tenants - About the rent you pay

Only complete this section if you pay rent to a private landlord- This includes Housing Association Tenants

How much is the total rent?	£ _____ Weekly / 4 weekly/ Monthly * delete as appropriate Please specify if other frequency _____
Type of tenancy (if known) please tick ✓	Assured Shorthold <input type="checkbox"/> Verbal <input type="checkbox"/> Other <input type="checkbox"/> please specify _____
Will the tenancy be a joint tenancy with any other person(s) please tick ✓	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'YES', please give names of other joint tenants	

Section 9. About payment

Private Tenants renting from a private landlord	Housing Association Tenants	Monmouthshire Housing tenancies
Your benefit will normally be paid directly into your bank account. If you feel that this will cause you difficulty and would like us to pay your landlord direct, please ask us for a Direct Payment form .	You can have payments made to you or your landlord if you prefer.	Your benefit will normally be paid to Monmouthshire Housing.
Method of payment - Ideally all payments should be made directly into a bank account		
I want my benefit to go straight to my landlord please tick ✓ Note - If we pay your landlord he/she will need to complete a Landlord's Agreement form		<input type="checkbox"/>
I want my benefit to go straight into my bank or building society account please tick ✓		<input type="checkbox"/> Tell us the following details
Name of the account holder	Name Bank/Building Society	
Address of the branch		
Account number	Sort code	

Section 10. About your landlord

Landlord's / Agent's Name			
Landlord's/Agent's Address	Telephone Number		
Is your landlord or agent or your landlord or agent's partner either: Your former partner, your partner's former partner, related to you or your partner, related to your children or your partner's children? (Related means related through marriage or civil partnership even it has ended e.g. ex-wife, ex-husband, aunt, brother, daughter)		Yes <input type="checkbox"/> No <input type="checkbox"/>	
		If YES What is the relationship?	<input type="text"/>
		Is my landlord's or Agent's	<input type="text"/>

Section 11. About your accommodation please tick ✓

Detached house	<input type="checkbox"/>	Semi-detached house	<input type="checkbox"/>	Terraced house	<input type="checkbox"/>	Room(s)	<input type="checkbox"/>	Other please specify	<input type="checkbox"/>
Detached bungalow	<input type="checkbox"/>	Semi-detached bungalow	<input type="checkbox"/>	Terraced bungalow	<input type="checkbox"/>	Maisonette	<input type="checkbox"/>		
Flat in block	<input type="checkbox"/>	Flat over shop	<input type="checkbox"/>	Flat in house	<input type="checkbox"/>	Hostel	<input type="checkbox"/>		
Please state number of rooms: <input type="text"/>									
	In whole house or flat etc.	For you/your family's sole use	Shared with others						
Living rooms									
Bedrooms									
Bed-sitting rooms									
Kitchens									
Bathrooms									
Toilets									
Other rooms									
Total Rooms									

Section 11. About your accommodation - continued

If room(s) state location please tick ✓		Front <input type="checkbox"/>	Centre <input type="checkbox"/>	Rear <input type="checkbox"/>		
Is it located in or on please tick ✓	Basement? <input type="checkbox"/>	Ground? <input type="checkbox"/>	First? <input type="checkbox"/>	Second? <input type="checkbox"/>		
Other? please specify <input type="text"/>						
About The Services included in the rent – please ✓ if the following services are included in the rent						
Council tax	<input type="checkbox"/>	Gas/Electricity for cooking	<input type="checkbox"/>	Gardening	<input type="checkbox"/>	
Water rates	<input type="checkbox"/>	Nursing medical care	<input type="checkbox"/>	TV licence	<input type="checkbox"/>	
Heating	<input type="checkbox"/>	Cleaning of common areas	<input type="checkbox"/>	Telephone rental	<input type="checkbox"/>	
Hot water	<input type="checkbox"/>	Lighting of common areas	<input type="checkbox"/>	Counselling and support	<input type="checkbox"/>	
Other services please specify <input type="checkbox"/>						
Are meals included in the rent? please tick ✓	Yes <input type="checkbox"/>	If 'Yes', please tick ✓ if: Breakfast <input type="checkbox"/>			Lunch <input type="checkbox"/>	Evening Meal <input type="checkbox"/>
	No <input type="checkbox"/>					
Is the property furnished?	Yes <input type="checkbox"/>	Does the property have central heating?	Yes <input type="checkbox"/>	Does the rent include the use of a garage?	Yes <input type="checkbox"/>	
	No <input type="checkbox"/>		No <input type="checkbox"/>		No <input type="checkbox"/>	

Section 12. Anything else you need to tell us

Use this box to tell us anything you think we should know about. Use a separate sheet of paper and attach to this form if you need to.

Your declaration

Please read this declaration carefully before you sign and date it. I understand the following:

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit, or both. You may check some of the information with other sources within the council, rent offices, and other councils.
- You may use any information I have provided in connection with this and any other claim for Social Security benefits that I have made or may make. You may give some information to other government organisations, if law allows this.

I know I **must let the Council know about any changes in my circumstances or the circumstances of anyone living with me**, which might affect my claim.

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

Signature of Person claiming	<input type="text"/>	Date	/ /
Partner's Signature	<input type="text"/>	Date	/ /
Name of person completing the form on behalf of the claimant	<input type="text"/>	Date	/ /
Relationship to Person claiming	<input type="text"/>		

Proof required

Please attach proof of income. We can only accept original documents not photocopies. Bring them to one of our customer centres. We will get the information we need and give the documents back to you. Please ensure that you ask for a receipt.

If you are a private tenant (this includes Housing Association Tenancies) we will also need to see

- Proof of rent payment (e.g. a rent book or rent statement)
- Your current tenancy agreement (all pages)

If you do not have a formal tenancy agreement or proof of rent paid, your landlord can complete a proof of rent and tenancy form. This can be obtained from our customer centres.

Note: We do not need to see a tenancy agreement or proof of rent paid if you are a Monmouthshire Housing tenant.

This form should be returned to Monmouthshire County Council The Revenues Section. County Hall, Cwmbran NP44 2XH	Alternatively it can be handed into one of our One Stop Shops in Chepstow, Caldicot, Monmouth or Abergavenny.	For further information please contact our Benefits team on 01633 644650 or 01633 644655
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