



Housing Benefit Section

(01978) 292033

Visit the council's website www.wrexham.gov.uk

FOR OFFICIAL USE ONLY	
Receipt Number	
Date Issued	
Date Received	

Name:	
Address:	
	Postcode:

About your home	
Are you:	
Renting from Wrexham County Borough Council?	<input type="checkbox"/>
Renting from a housing association?	<input type="checkbox"/>
Renting from a private landlord?	<input type="checkbox"/>
An owner-occupier?	<input type="checkbox"/>

Have you or your partner made a claim for Universal Credit or are you or your partner already receiving Universal Credit?

No

Yes

PLEASE NOTE

If your housing costs are paid with your Universal Credit, you will not be able to claim Housing Benefit. **However you can use this form to make a claim for Council Tax Reduction.**

HOUSING BENEFIT

Available to any COUNCIL TENANT/PRIVATE TENANT who has to pay rent on the home that he/she occupies. (Please complete Parts 1-17.)

COUNCIL TAX REDUCTION SCHEME

Available to any person who is liable for Council Tax. (Please complete Parts 1-10, 12 and 15-17.)

FREE SCHOOL MEALS

We will use this claim form to give free school meals to your children if you are their parent or guardian and:

- You get Income Support, Income based Jobseekers Allowance or Income Based Employment Support Allowance; or
- You get Child Tax Credit (but not working tax credit) and your gross income (before deductions) for the year is not more than the annual limit.

Use **black ink** to fill in this form and send it back to us as soon as you can.

Even if you do not have the proof we need at the moment, send this form back to us. If you wait **you could lose benefit**. You can send us the proof or information later, but please make sure you send **original documents** and put your name and address on everything you send.

Filling in the form

Use black ink to fill in the form. Do not use pencil. If you make a mistake, just cross it out and put the right answer next to it. Do not use correction fluid or tape.

Answer **No** or **Yes** questions by putting a **tick** in the relevant box. If you are picking an answer from a list of answers, tick the appropriate box again. Do not put a cross in any boxes. If you answer a question with a cross, we may have to send the form back, and this will delay the claim.

If someone else fills in the form for you, there is a special space for them to sign on page 23.

About this form

We have designed this claim form to be easy to fill in. It may look rather long, but we need to ask enough questions to make sure that everyone who claims gets the right amount of benefit.

You may not have to fill in all parts of the form (for example, a few questions would not apply to most pensioners) but you must fill in any part that is relevant to you. Every part starts with a question to help you decide if you need to fill in that part.

About Housing Benefit and Council Tax Reduction Scheme

Housing Benefit can pay all or part of your rent. It may also give you some extra money towards things you have to pay for, like children's play areas and cleaning shared areas. It cannot help with water charges. Council Tax Reduction can pay all or part of your Council Tax.

Proof

We will need to see proof of some of the things you write about on the form. There is a checklist at Page 22 of the form to help you. If you are not sure if we need to see proof of something, get in touch with us. We will tell you what we need to see. We cannot pay you benefit until we have seen the proof we need.

If you need help to fill in the form

If you need help to fill in this form, you can call into the Revenues and Benefits reception at Contact Wrexham, 16 Lord Street, Wrexham or you can also visit your local estate office. We are open from 9.00am to 4.30pm Monday, Tuesday, Wednesday and Friday and 10.30 am to 5.30 pm on Thursday.

You can also get help and advice by phoning 01978 292033 between 8.30am to 5.30pm Monday - Friday. You can write to us at the address shown below.

Wrexham County Borough Council
Housing Benefits Section
Lampit Street Offices
Wrexham
LL11 1AR

Should you wish to return the completed form (along with evidence) please send to the address shown on left.

E-mail: housingbenefits@wrexham.gov.uk

What to do next

When you have filled in the form sign it and send it to us with the proof we need to see.

Or you can take the form and proof to our Contact Centre at 16 Lord Street, Wrexham. Do not send valuable items such as bank books or passports in the post. Take them to our contact centre and we will get the information we need and give them back to you.

If you cannot get the proof we need straight away, do not worry. Send the form to us with the proof you do have and let us know that you will be sending some proof later. If you do not send the form to us straight away, you might lose money.

Changes you must tell us about

If any of the details you have told us about on this form change, you must tell the Benefit section immediately in writing – a phone call is not enough. Here are some examples of changes you must report.

- Any of your children leave school or leave home.
- Anyone moves into or out of your home, including lodgers and subtenants.
- Your income or the income of anyone living with you, including benefits, changes.
- Your capital or savings change.
- You or anyone living with you becomes a student, goes on a Youth Training Scheme, goes into hospital or a nursing home, goes into prison, or changes or leaves a job.
- Your rent changes.
- You move.
- You or your partner are going to be away from home for more than a month.
- You or anyone living with you starts work.
- You receive any decision from the Home Office.
- You or anyone living with you starts to receive Universal Credit.
- Anything you have told us about changes.

This is not a full list. If you are not sure, ask us for advice. If you do not tell us about any change, you may lose money you are entitled to or you may get too much benefit and you will probably have to pay it back. It is an offence not to tell us about any changes that may affect your benefit and we may take court action against you.

How we collect and use information

We will use the information you give in this form, and in any supporting evidence you send, to process your claim for Housing Benefit and Council Tax Reduction Scheme.

We may pass the information to other agencies or organisations such as the Department for Work and Pensions and HM Revenue and Customs, as allowed by law.

We may check information you have provided, or information about you that someone else has provided, with other information we hold. We may also get information about you from certain third parties, or give information to them to:

- make sure the information is accurate;
- prevent or detect crime; and
- protect public funds.

These third parties include government departments, other local authorities and private-sector organisations such as banks and organisations that may lend you money.

We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows this.

Part 1 About you and your partner

Do you have a partner who normally lives with you?

No

Yes

By partner we mean:

- A person you are married to or live with as if you are married to them;
- A civil partner or a person you live with as if you are civil partners

If you have a partner, you must answer all the questions about them, as well as yourself.

You

Your partner

Surname

Other names

Any other surnames you have used
(e.g. your maiden name.)

Title (e.g. Mr, Mrs, Ms)

Address

Do not tell us your partner's address if it is the same as yours.

Postcode

Postcode

 / /
 / /

When did you move in?

Yes No

Yes No

Are you currently living there?

 / /
 / /

Date of birth

National Insurance Number

You can find this on payslips or letters from social security or the tax office. We cannot decide your claim if we do not have your National Insurance number.

Letters		Numbers				Letter	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you do not have a National Insurance number, or cannot find it, tick this box.

Letters		Numbers				Letter	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If your partner does not have a National Insurance number, or cannot find it, tick this box.

Your daytime telephone number

Mobile phone number

Email address

What would you say is the best way to contact you?

Daytime phone number Mobile number Email

Have you or your partner claimed Housing Benefit or claimed a reduction in your Council Tax before?

No
 Yes When did you claim?

No
 Yes When did they claim?

 / /
 / /

Which council did you claim from?

Which council did they claim from?

What name did you claim in?

What name did they claim in?

What address did you claim for?

What address did they claim for?

Postcode

Postcode

Part 1 About you and your partner - continued

	You	Your partner
If you have moved home in the last 12 months, tell us your last address.	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>
Were you the home owner, a private tenant, a housing association tenant or a boarder at this address?	<input type="text"/>	<input type="text"/>
If you were a home owner, have you sold your previous property?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you told the council that paid your benefit that you have moved?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
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?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
What is your nationality?	<input type="text"/>	<input type="text"/>
On what date did you last enter the UK? The UK is England, Northern Ireland, Scotland and Wales.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Are you or your partner in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out? (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out? (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>
Do you or your partner get Disability Living Allowance or Personal Independence Payment	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> Care: £ <input type="text"/> Mobility: £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/> Care: £ <input type="text"/> Mobility: £ <input type="text"/>
Do you or your partner get Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does anyone get Carer's Allowance for looking after you or your partner? If 'Yes', please give their full name and home address.	No <input type="checkbox"/> Yes <input type="checkbox"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>

Part 1 About you and your partner - continued

Have you or your partner been told that you are entitled to Carer's Allowance even if you do not receive it, because you are getting another benefit instead?

You
 No
 Yes

Your partner
 No
 Yes

Do you or your partner have a vehicle from a Mobility scheme?

No
 Yes

No
 Yes

Are you or your partner registered blind?

No
 Yes We need to see proof of this.

No
 Yes We need to see proof of this.

Please tick if you or your partner are:

- an apprentice
- on youth training
- in legal custody
- severely mentally impaired

Do you or your partner pay towards the upkeep of a student?

No
 Yes How much do you pay?

No
 Yes How much do they pay?

£

£

How often?

How often?

Every

Every

Are you or your partner a student?

By student we mean anyone who is attending a course of study at an education establishment.

No
 Yes

No
 Yes

Do you study full time or part time?

Do they study full time or part time?

Full time Part time

Full time Part time

How much of your income is taken into account when working out your grant?

How much of their income is taken into account when working out your grant?

£ a year

£ a year

What course of study are you following?

(further education course, such as HND, BSc, MSc)

Which college or university do you go to?

When does the current academic year start?

 /
 /

When does the current academic year end?

 /
 /

How many years does the course cover?

years

years

What is your current year of study?

1st 2nd 3rd 4th

1st 2nd 3rd 4th

Part 2 About children

You may be able to get more benefit if there are children in your household and they are:

- under 16;
- aged 16 or 17 and registered for work or youth training; or
- aged 16, 17 or 18 and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ (advanced).
- under 20 and in full time non advanced education, or approved training that commenced before their 19th birthday.

Are there any children in your household?

No Go to **Part 3**.

Yes How many?

If you need to tell us about more than 3 children, ask us for an 'additional children' form.

	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 the child's sex?	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
The child's relationship to your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
Usual address if different to yours	<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"/>	<input type="text"/>	<input type="text"/>
Are you receiving Child Benefit for this child?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	If you answered 'Yes,' we need to see proof of this	If you answered 'Yes,' we need to see proof of this	If you answered 'Yes,' we need to see proof of this
Which School does the child attend?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the child registered blind?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
	We need to see proof of this	We need to see proof of this	We need to see proof of this
Does the child get Disability Living Allowance?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?	Yes <input type="checkbox"/> How much?
	Care: £ <input type="text"/>	Care: £ <input type="text"/>	Care: £ <input type="text"/>
	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>	Mobility: £ <input type="text"/>

Part 2 About children - continued

Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?

First child

No
Yes

Tell us the name and registration number of the minder.

How much do you pay a week?

We need to see proof of this

Second child

No
Yes

Tell us the name and registration number of the minder.

How much do you pay a week?

We need to see proof of this

Third child

No
Yes

Tell us the name and registration number of the minder.

How much do you pay a week?

We need to see proof of this

Part 3 About other people who live with you

Apart from you, your partner and any children you receive Child Benefit for, does anyone else live in your home?

No Go to **Part 4**.
Yes How many?

Tell us about everyone in your home who you have not mentioned before on this form, including other children, relatives, friends and joint owners, joint tenants, and everyone else who lives with you.

If you need to tell us about more than 3 people, ask for an additional 'about other people' form.

First person

Second person

Third person

Surname

Other names

National Insurance number

Date of birth

 / /
 / /
 / /

When did they move in?

 / /
 / /
 / /

Their relationship to you or your partner

Some examples are aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner, subtenant, lodger or friend.

Do they get Income Support, Job Seeker's Allowance, Employment Support Allowance or Guaranteed Pension Credit?

No
Yes

No
Yes

No
Yes

Do they get Disability Living Allowance, Personal Independence Payment or Attendance Allowance?

No
Yes How much?

No
Yes How much?

No
Yes How much?

£ a week

£ a week

£ a week

Part 3 About other people who live with you - continued

	First child	Second child	Third child
Are they registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/> We need to see proof of this	No <input type="checkbox"/> Yes <input type="checkbox"/> We need to see proof of this	No <input type="checkbox"/> Yes <input type="checkbox"/> We need to see proof of this
Are they a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which <input type="text"/>
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? <input type="text"/>
Are they severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in legal custody?	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they go in? <input type="text"/> / <input type="text"/>
	When will they come out (if you know this)? <input type="text"/> / <input type="text"/>	When will they come out (if you know this)? <input type="text"/> / <input type="text"/>	When will they come out (if you know this)? <input type="text"/> / <input type="text"/>
Are any of the people who normally live with you married to each other or living together as if they were married, civil partners or living together as if they were civil partners?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their names <input type="text"/> is the partner of <input type="text"/> And <input type="text"/> is the partner of <input type="text"/>		<input type="text"/>
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. <input type="text"/> £	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. <input type="text"/> £	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions. <input type="text"/> £
	We need to see proof of their earnings (for example, their last 5 weekly or 2 monthly payslips)	We need to see proof of their earnings (for example, their last 5 weekly or 2 monthly payslips)	We need to see proof of their earnings (for example, their last 5 weekly or 2 monthly payslips)

Part 3 About other people who live with you

Do they have any other income at all?

This includes any benefits or allowances you have not told us about on this form and interest from savings and investments.

First person	Second person	Third person
No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Name of first income <input type="text"/>	Name of first income <input type="text"/>	Name of first income <input type="text"/>
How much is it before deductions? £ <input type="text"/> a week	How much is it before deductions? £ <input type="text"/> a week	How much is it before deductions? £ <input type="text"/> a week
Name of second other income <input type="text"/>	Name of second other income <input type="text"/>	Name of second other income <input type="text"/>
How much is it before deductions? £ <input type="text"/> a week	How much is it before deductions? £ <input type="text"/> a week	How much is it before deductions? £ <input type="text"/> a week
Name of third other income £ <input type="text"/> a week	Name of third other income £ <input type="text"/> a week	Name of third other income £ <input type="text"/> a week
How much is it before deductions? £ <input type="text"/> a week	How much is it before deductions? £ <input type="text"/> a week	How much is it before deductions? £ <input type="text"/> a week

We need to see proof of other incomes. We need to see proof of other incomes. We need to see proof of other incomes.

If you need to provide further information please add this in part 12.

Part 4 About Income Support, Income-based Jobseeker's Allowance (Guaranteed) Pension Credit, Income Related Employment and Support Allowance (ESA) and Universal Credit

Are you or your partner getting Income Support, Income-Based Jobseeker's Allowance, (Guaranteed) Pension Credit or Income related Employment and Support Allowance at the moment?

If 'Yes', go to Part 11.

No

Yes When did you start getting it?
 /

No

Yes When did they start getting it?
 /

Are you or your partner getting Universal Credit?

No

Yes When did you start getting it?
 /

No

Yes When did they start getting it?
 /

Are you or your partner still waiting to hear about a claim for any of these?

No

Yes When did you claim?
 /

No

Yes When did they claim?
 /

Part 5 About working for an employer

Do you or your partner work for an employer?

No Go to **Part 6**.

Yes Answer the questions on this page. If you work for more than one employer, tell us about all the employers in **Part 7** on page 13 of this form.

How many jobs do you have?

Tell us about your other employers in **Part 7** on page 13.

What kind of work do you do?

You	Your partner
<input type="text"/>	<input type="text"/>

Part 5 About working for an employer

	You	Your partner
What is your employer's name and address?	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>
Payroll office phone number	<input type="text"/>	<input type="text"/>
When did you start this job?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
What is your payroll, employee or staff number?	<input type="text"/>	<input type="text"/>
Are you employed for a limited period?	No <input type="checkbox"/> Yes <input type="checkbox"/> When will you finish?	No <input type="checkbox"/> Yes <input type="checkbox"/> When will they finish?
	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
How often do you get paid?	Every <input type="text"/>	Every <input type="text"/>
How much do you get before tax and National Insurance are taken off?	£ <input type="text"/>	£ <input type="text"/>
How are you paid? For example, in cash, by cheque or straight into a bank or building society account.	<input type="text"/>	<input type="text"/>
When was your last pay rise?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When will your next pay rise be?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
How many hours a week do you usually work?	<input type="text"/>	<input type="text"/>
Give details of any regular overtime, bonuses or commission.	<input type="text"/>	<input type="text"/>
Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you getting any other sick pay or maternity pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much?
	£ <input type="text"/>	£ <input type="text"/>
	How often?	How often?
	Every <input type="text"/>	Every <input type="text"/>

We must see proof of any earnings /private pension before we can decide how much benefit you can get.
Read the checklist at Page 22 to see what you can use as proof.

Part 6 About being self employed

Are you or your partner self-employed?

No Go to **Part 7**.

Yes Answer the questions on this page.
You must send us your trading accounts for the last financial year. If you have only recently set up the business and do not have a full year's accounts, we will need to see some other evidence of your income. We will write to you about this.

You

Your partner

What sort of work do you do?

When did the business start?

 / /
 / /

What is the business address?

 Postcode

 Postcode

Are there any other partners in the business?

No
 Yes Tell us their name and address

No
 Yes Tell us their name and address

 Postcode

 Postcode

How many hours a week do you usually work?

Do you get a Business Start-up Allowance?

No
 Yes How much?

No
 Yes How much?

 £

 £

How often?

How often?

 Every

 Every

Do you pay into a private pension scheme?

No
 Yes How much?

No
 Yes How much?

 £

 £

How often?

How often?

 Every

 Every

We must see proof of any earnings before we can decide how much benefit you can get.
 Read the checklist at Page 22 to see what you can use as proof.

Part 7 About any other work

Do you or your partner do any other work at all?

This could be voluntary, therapeutic or permitted work or any other work, even if it is not paid work.

What other work do you do?

No Go to **Part 8**.

Yes Answer the questions on this page.

You

Your partner

What is the name and address of the person you do this work for?

When did you start this work?

 / /
 / /

How many hours a week do you usually work?

Do you get paid?

If you only get expenses or tips, still tick 'Yes', and give details.

No
 Yes How much do you get before any deductions?

 £

How often?

 Every

No
 Yes How much do they get before any deductions?

 £

How often?

 Every

**We must see proof of any earnings before we can decide how much benefit you can get.
 Read the checklist at Page 22 to see what you can use as proof.**

Part 8 About benefits and pensions

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

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

- Attendance Allowance
- Bereavement Allowance
- Carer's Allowance (previously known as Invalid Care Allowance)
- Child Benefit
- Child tax credit
- Contribution-based Jobseeker's Allowance
- Contribution-based Employment and Support Allowance
- Fostering Allowance
- Guardian's Allowance
- Incapacity Benefit
- Income - Based Jobseeker's Allowance
- Industrial Injuries Disablement Benefit
- Industrial Death Benefit
- Pension Credit (Savings)
- Retirement Pension
- Return to Work Credit
- Severe Disablement Allowance
- Statutory Maternity Pay or Statutory Paternity Pay
- Statutory Sick Pay
- Universal Credit
- War Disablement Benefit, War Pension or War Widow's Pension
- Widow's or Widower's Benefits
- Working Tax Credit

No Go to **Part 9**

Yes Tell us about the benefits on the next page. Tell us the full rate of the benefits before any deductions.

If you are getting or have claimed any benefit that is not listed, tell us about it in **Part 9**.

Part 10 About bank accounts, savings, investments and property

Please answer every question - indicate 'Yes' or 'No' in the relevant boxes. Please provide documentary proof of all savings and capital e.g. bank statements, building society books. Please refer to the checklist on page 22 which gives further information regarding the proof required.

CAPITAL / BANK / BUILDING SOCIETY ACCOUNTS

Do you and/or your partner have a Bank/Building Society account?

No

If 'Yes', please supply details below and amount(s) in box(es) below, even if the balance is nil or overdrawn

Yes

BANK and/or BUILDING SOCIETY ACCOUNTS (CURRENT/DEPOSIT/OTHER)
(Please give names and branches)

	You £	Your Partner £

SAVINGS / INVESTMENTS / CAPITAL

Do you and/or your partner have savings, investments or capital?

No

If 'Yes', please show capital details and amount.

Yes

	You £	Your Partner £
POST OFFICE		
PREMIUM BONDS		
SAVINGS HELD IN CASH		

NATIONAL SAVINGS CERTIFICATES (Please give details in the boxes below)

YOU				YOUR PARTNER			
Date Purchased	Issue Number	No. of Units	Purchase Price	Date Purchased	Issue Number	No. of Units	Purchase Price

SHARES AND UNIT TRUSTS (Please give details in the boxes below)

YOU				YOUR PARTNER			
Date Purchased	Issue Number	No. of Units	Purchase Price	Date Purchased	Issue Number	No. of Units	Purchase Price

If you have any other information to add, please include this in **Part 14**.

Part 10 About bank accounts, savings, investments and property - continued

Do any of your savings or investments include:

Money from the sale of a house? No
 Yes

Money from a charity? No
 Yes We may need to contact you about this

Have you or your partner received a payment for industrial injuries or compensation? No
 Yes We need to know this to make sure we do not count it as part of your savings.

If **'Yes'**, please provide details in the box below.

Have you or your partner received any of the following? No
 Yes

What payment did you receive?

- A Far Eastern Prisoner of War Compensation payment
- A compensation payment made to victims of atrocities that happened during the Second World War
- A one-off lump sum from the Pension Service because you delayed claiming your State Pension

Who received the payment? You Your partner

Have you or your partner received a payment from the vCJD Trust? No
 Yes If **'Yes'**, we will write to you about this.

We must see evidence of savings, investments and property before we can decide how much benefit you can get.
 Read the checklist at Page 22 to see what you can use as proof.

PROPERTY - Other than your current house

Do you own or partly own any other type of assets? No
 (e.g. property, land, caravan, holiday homes, property outside the UK etc.) Yes

If **'Yes'**, please state what the property is and at what address

Postcode

Is this property up for sale? No
 Yes

If **'Yes'**, proof must be provided. If the answer is **'No'** and you have an outstanding mortgage, proof must be provided.

Is this property a new home which you intend to move into the near future? No
 Yes

Is this property occupied by an elderly or disabled relative? No
 Yes

If you are separated

(a) Is the other property occupied by a former partner? No
 Yes

(b) How long have you been separated?

(c) Is your former partner a lone parent? No
 Yes

Please disclose on a separate sheet any other properties held.

IF YOU RENT YOUR HOME (COUNCIL TENANTS GO TO SECTION 13)

ONLY COMPLETE THIS SECTION IF YOU ARE A PRIVATE TENANT

(THIS INCLUDES SUB-TENANTS, BOARDERS, HOUSING ASSOCIATION TENANTS OR HOSTEL DWELLERS).

Part 11 About rent

What is your landlord's full name and address?

By landlord we mean the person or organisation who owns the property you live in.

Postcode

If your landlord has an agent, tell us their full name and address.

By agent we mean the person or organisation you actually pay your rent to.

Postcode

Is anyone in the house related to your landlord or agent, or to your landlord's partner or the agent's partner?

Related includes related through marriage, even if the marriage has ended. Some examples are ex-wife, ex-husband, aunt, brother, daughter, father, grandson, grandmother, son-in-law or stepdaughter.

No

Yes Please state their name and relationship

--

Do you or your partner own, or have either of you owned, any part of the property you now occupy?

No

Yes

If your landlord is a previous partner, did you live at this address together?

No

Yes

When did you start renting your home?

/	/
---	---

When did you move to this address?

If you have not moved in yet, tell us when you expect to move in, then tell us when you have actually moved in.

/	/
---	---

What sort of tenancy do you have?

For example, shorthold, assured, tied rent or something like this.

--

How long is the tenancy for?

/	/	to	/	/
---	---	----	---	---

Do you or any member of your household get money from a trust that also owns your home?

No

Yes

How much is the rent and how often do you pay?

For example, every week, every fortnight, every four weeks or every month.

£	Every
---	-------

Are you a joint tenant?

If 'Yes', please give the full name(s) of the other tenant(s).

No

Yes

--

CARE ORDERS

Are you:

(a) Under 22 years of age?

No

Yes

(b) The subject of a care order which was made before or after your 16th birthday? If so you must provide written verification of the order with your application.

No

Yes

Part 11 About rent - continued

How much of the rent do you pay and how often?

For example, every week, every fortnight, every four weeks or every month.

£ every

Has your rent changed in the last 6 months?

No

Yes Send us proof of the date it changed and how much it changed

When is the next rent increase due?

/ /

Do you have any weeks when you do not have to pay rent?

No

Yes By how many weeks?

Are you behind with your rent?

No

Yes By how many weeks?

Does your rent include money for meals?

No

Yes £ every

For which meals? Breakfast
Please tick Lunch
Evening meal

Who has to pay the Council Tax bill for your home?

Tick the box that applies

You or your partner

Your landlord

Someone else Please indicate who in the box below

Do you or your partner have a carer who provides overnight care but who lives somewhere else?

If yes, please provide evidence from a doctor or medical professional that this is required on a regular basis.

No

Yes

We must see evidence of your rent and tenancy before we can decide how much benefit you can get.

Read the checklist at Page 22 to see what you can use as proof.

THE PROPERTY YOU LIVE IN

Is your home:

a house?

a flat in a block?

a room or rooms in a house?

a bungalow?

a flat in a house?

sheltered housing?
(where there is a resident warden)

a bedsit?

a flat over a shop?

supported housing?
(where counselling, support, emergency alarms and personal care are provided)

other?

Please say what it is.

Part 11 About rent - continued

How many rooms are there in the building?

How many in the whole building?

How many just for you and your household?

How many do you share with other people?

Living rooms

Bedsitting rooms

Bedrooms

Bathrooms or shower rooms

Toilets

Kitchens

Other rooms

If you rent a room, flat or bedsit, **you must fill in this section, or your claim could be delayed.**

Which floor is your home on?

Second floor	<input type="checkbox"/>
First floor	<input type="checkbox"/>
Ground floor	<input type="checkbox"/>
Basement	<input type="checkbox"/>

Other (please tell us)

Is your home:

at the front?

in the centre?

at the back?

How many flats or bedsits are there in your building

Has a fair rent been registered on your home?

No

Yes

If 'Yes', please provide the certificate of registration form R05

Part 12 How you will be paid and the choices you have

Private Tenants

Your Housing Benefit will be paid directly into your bank account, please give details below.

Housing Association

Payment can be made to you or the Housing Association, please indicate your preference.

Pay me

(please give account details)

Pay Housing Association

Bank account details

Payment into a bank account

What name or names is the account in?

Name of bank or building society

Account number

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

Sort code

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

Type of account - for example, a deposit or current account

If you are awarded Council Tax Reduction, we will credit this to your Council Tax account

Opening a bank account

Basic bank accounts are available to everyone from most banks. These types of bank accounts offer basic banking facilities that will allow you to receive and pay out money.

Part 12 How you will be paid and the choices you have - continued

Why open a bank account?

- You can have Housing Benefit paid straight into your account
- You may be able to pay your landlord by direct debit, or standing order.

How to open a bank account

- You need to contact a bank direct in order to open a bank account.
- All banks require proof of identity and residency as part of the application process

For further information on specific bank accounts ask for "How to open a bank account" leaflet.

If you are awarded Local Housing Allowance (LHA) - other private tenants

If you are awarded Local Housing Allowance (LHA) we will pay any LHA awarded straight to you.

We will arrange to pay your money straight into your bank or building society account. Therefore if you do not have a bank account, you must open one.

*The only exception to the above is if there is a reason as to why you cannot manage your own rent payments. If so, you will be required to complete the application form for direct payment to landlord to explain to the Council why you cannot receive this money.

We will send you an application form for direct payment to landlord if you complete and sign the section below. You will be required to provide supporting documentary evidence where necessary, for example, a letter from your Doctor, a Care Worker, Social Services or Probation Officer.

Paying benefit to your landlord

If you want us to pay your benefit straight to your landlord, you must read and sign this declaration. We will issue a form for your landlord to complete and return.

(However, the council will make the final decision whether or not LHA should be paid direct to your landlord based on the information provided by you with a completed application form for direct payment to landlord).

Please pay my benefit straight to my landlord.

Your signature

Date

Part 13 Sharing information with your landlord

Sharing information with your landlord could help us deal with your 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 with your landlord before we can make a decision on your claim, for example, the start date of your tenancy. In these circumstances, we can contact your landlord without your permission. We need your permission to discuss anything else.

If you do not give us permission by signing this form, we will only share information with your landlord if:

- you have agreed that your Housing Benefit can be paid direct to your landlord; or
- you are a council tenant.

If you give us permission, we would be able to tell your 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 what that information may be.

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, Wrexham County Borough Council, permission to share information about the progress of my Housing Benefit claim with my landlord or their representative.

Your signature

Date

Part 14 Anything else you need to tell us

Please use this space to tell us anything else you think we should know about, for example backdating.

Use a separate sheet of paper and attach it to the form if you need to.

Part 15 About equal opportunities

To ensure we are delivering services fairly, without bias or barriers, applicants are asked to provide the following additional information. This does not form part of the application and will be asked only for the purposes of improving the way council services are provided.

You do not have to fill in this section if you do not want to, but must continue to **Parts 16 and 17**.

I would describe myself and my partner as (please tick one box each):

Asian or Asian British	You	Your partner	Mixed	You	Your partner
Bangladeshi (A)	<input type="checkbox"/>	<input type="checkbox"/>	White and Asian (J)	<input type="checkbox"/>	<input type="checkbox"/>
Indian (B)	<input type="checkbox"/>	<input type="checkbox"/>	White and black African (K)	<input type="checkbox"/>	<input type="checkbox"/>
Kashmiri (C)	<input type="checkbox"/>	<input type="checkbox"/>	White and black Caribbean (L)	<input type="checkbox"/>	<input type="checkbox"/>
Pakistani (D)	<input type="checkbox"/>	<input type="checkbox"/>	Any other mixed background (M)	<input type="checkbox"/>	<input type="checkbox"/>
Any other Asian (E)	<input type="checkbox"/>	<input type="checkbox"/>			
Black or black British			White		
African (F)	<input type="checkbox"/>	<input type="checkbox"/>	English (N)	<input type="checkbox"/>	<input type="checkbox"/>
Caribbean (G)	<input type="checkbox"/>	<input type="checkbox"/>	Irish (O)	<input type="checkbox"/>	<input type="checkbox"/>
Any other black background (H)	<input type="checkbox"/>	<input type="checkbox"/>	Scottish (P)	<input type="checkbox"/>	<input type="checkbox"/>
Chinese			Welsh (Q)	<input type="checkbox"/>	<input type="checkbox"/>
Chinese (I)	<input type="checkbox"/>	<input type="checkbox"/>	Any other white background (R)	<input type="checkbox"/>	<input type="checkbox"/>
			Any other background group (S)	<input type="checkbox"/>	<input type="checkbox"/>
Gender			Please describe your nationality		
Male	<input type="checkbox"/>	<input type="checkbox"/>			
Female	<input type="checkbox"/>	<input type="checkbox"/>			

Do you consider yourself to have a disability as defined by the Disability Discrimination Act 1995?

No	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>

(According to the Disability Discrimination Act 1995 a person is disabled if he or she has a physical or mental impairment that has a substantial and adverse impact which limits a persons ability to carry out normal day to day activities and is likely to last more than a year).

Part 16 Checklist

Please tick to say what evidence you are sending with this form. We must see original documents, not copies. Please do not send valuable items through the post. If you can, take them to our Contact Centre at 16 Lord Street, Wrexham. We will take the details we need and give you the documents back straight away. If you cannot get into the office, phone us for more advice.

If you do not provide all the evidence we need, we might not be able to pay you any benefit. We need the same evidence for your partner, if you have one.

If you cannot provide the evidence we need at the moment, send the form back to us now and provide the evidence within 14 days. We can start to process your claim, **but we will not be able to pay you any benefit until we have all the evidence.**

	Enclosed	To follow
Evidence of identity	<input type="checkbox"/>	<input type="checkbox"/>
Such as a birth certificate, marriage certificate, passport, National Insurance number card, medical card, driving licence, UK residence permit, EEC identity card or recent gas or electricity bill. We may need to see several of these documents for each person.		
Evidence of your address	<input type="checkbox"/>	<input type="checkbox"/>
Such as a recent gas or electricity bill or a TV licence.		
Evidence of National Insurance number	<input type="checkbox"/>	<input type="checkbox"/>
Such as a National Insurance number card, payslips or letters from the Department of Work and Pensions, HMRC or the tax office.		
Evidence of capital, savings and investments	<input type="checkbox"/>	<input type="checkbox"/>
Such as all your bank, building society or post office books, full bank statements, or certificates for premium bonds, National Savings Certificates, ISAs, stocks, shares and unit trusts. We need to see evidence of any interest or dividends you get on investments and savings for your non-dependants. We need to see this evidence for children in your household as well. The evidence you send must show details for at least the last two months.		
Evidence of earnings	<input type="checkbox"/>	<input type="checkbox"/>
We also need this for any other adults living in your home. This means your last five payslips if you are paid every week, your last three payslips if you are paid every two weeks or your last two payslips if you are paid every month. If you do not have these payslips, please ask your employer to fill in one of the proof of earnings certificates. If you or your partner are self-employed, we need to see your accounts for the last financial year. If you have been trading for less than six months, we need to see a summary of your trading accounts so far.		
Evidence of other income	<input type="checkbox"/>	<input type="checkbox"/>
We also need this for any other adults living in your home. Such as pension slips from a former employer showing that you receive an occupational pension, or a letter from the court or from the Child Support Agency showing maintenance. If you are receiving any training allowances, student loans or grants, we will need the award letter or financial assessment form. We need to see evidence of any money people pay you for board and lodgings.		
Evidence of benefits, allowances or pensions	<input type="checkbox"/>	<input type="checkbox"/>
We also need this for any other adults living in your home. We also need this for any other adults living in your home Such as current award notices or letters from the Department of Work and Pensions, or HMRC confirming how much you get. If you do not have evidence, let us know straight away.		
Evidence of private rent and tenancy	<input type="checkbox"/>	<input type="checkbox"/>
Such as a tenancy agreement or a letter from your landlord or Rent Certificate.		
Evidence of other money paid out	<input type="checkbox"/>	<input type="checkbox"/>
Such as letters about student grants or maintenance, agreements or receipts from registered child carers, or proof of payments made into a pension scheme.		

Make sure you read and sign the declaration on Page 23. Make sure your name and address is on everything you send. If you are receiving benefits, pensions or allowances and are claiming for a new address, make sure you tell the Department for Work and Pensions, the Pension Service or Jobcentre Plus.

Part 17 Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can.

If you have a partner, they must sign below. In signing the form they are confirming that they have read the form and that all the details about them are correct.

By signing this declaration, you are agreeing that you have read and understood the following terms.

- I/We have declared **all** of **my/our income and capital**.
- I/We authorise the Council to make any enquiries to verify the information on this form and to cross check the information given with other sections within the Council, Benefit Authorities and the Home Office as allowed by law. Wrexham County Borough Council may be asked to provide, and **will share**, information to other organisations, such as government departments, local authorities and organisations that lend money, if the law allows this).
- I/We know that the award of Housing Benefit and/or Council Tax Reduction is based on the factual information regarding my/our circumstances that I/we have provided on this form.
- I/We know that I/we have a legal duty to promptly notify the Benefit Section in writing, of any changes in those circumstances because I/we know that the changes affect my/our entitlement to such a benefit or other payment or advantage.

Examples of changes in circumstances include:

- Changes to the types/amounts of money I/we receive;
- Changes to the amount of capital/savings and investments I/we have;
- Changes in rental liability including change of address;
- Other people joining/leaving the household, or changes to the amounts of income they receive.

These examples are not a complete list of changes in my/our circumstances that affect entitlement to my/our benefit or other payment or advantage and if I/we are unsure of whether a change in circumstances affects the benefit award or not, I/we will contact the Benefit Section to check, see the contact details on page 2.

If I/we give information that is incorrect or incomplete, or I/we fail to report a change in circumstances which affects the claim, I/we may be prosecuted under the Social Security Administration Act 1992 (as amended) or any other appropriate legislation.

I/We declare that the information given on this form is correct and complete.

Signature of person claiming

Date

Partner's signature

Date

If this form has been filled in by someone other than the person claiming, please tell us why you are filling in this form for the person claiming, and your relationship to that person.

Name of the person who filled in the form

Relationship to the person claiming

Signature

Date

Reason:

