

A claim for Housing Benefit and Council Tax Support

Stour Valley and Poole Partnership...

Christchurch, East Dorset, North Dorset and Poole Councils' working together

Name
Address

For office use only	
Reference number:	<input type="text"/>
Date issued:	<input type="text"/> / <input type="text"/> / <input type="text"/>
Date received:	<input type="text"/>



If you don't have all the documents you need to support your claim we can give you time to get those. It is important that you return your claim form quickly or you may lose Housing Benefit or Council Tax Support.

- You can apply straight away online on your Councils website.
- Before you fill-in this form, please read the notes over the page.
- You must answer all the questions on this form. Please use black ink.
- You can bring your filled-in form and proof to the Benefits Office. We will check and copy your documents before returning them to you.
- We recommend you do not send valuable documents such as bank books or passports through the post.

We will usually only talk to you or your partner about your claim. If you want us to talk to someone else, like a friend, relative, carer, social worker, support worker or landlord, please give his or her details here.

Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	Postcode	<input type="text"/>	
Relationship to you	<input type="text"/>	Phone number	<input type="text"/>

Your daytime phone numbers and email address

You do not have to give these but they will help us to deal with your claim more quickly.

Home phone number	<input type="text"/>	Mobile number	<input type="text"/>
Email address	<input type="text"/>		

You can return the information to:

Stour Valley and Poole Partnership, PO Box 722, Poole, BH15 2YE

Or bring the information to:

Christchurch Council Civic Offices, Bridge Street, Christchurch, BH23 1AZ

East Dorset Council Offices, Furzehill, Wimborne, BH21 4HN

North Dorset Council Offices, Nordon, Salisbury Road, Blandford Forum, DT11 7LL

Borough of Poole, Civic Centre, Poole, Dorset, BH15 2RU

Email: svpp@poole.gov.uk

Phone: 0345 034 4569



Fraud Free phone confidential Hotline 0800 096 3596

Part 1 About you and your partner (including civil partners)

Do you have a partner who normally lives with you?

No

A partner means a person you are married to or have a civil partnership with, or a person you live with as if you were their husband, wife or civil partner. (A civil partnership is a formal arrangement that gives same-sex partners the same legal rights as a married couple.)

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

	You	Your partner
Last name or family name	<input type="text"/>	<input type="text"/>
First name and middle names	<input type="text"/>	<input type="text"/>
Any other names you have used (for example, your maiden name)	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs, Ms, Miss and so on)	<input type="text"/>	<input type="text"/>
Address you are claiming for	<input type="text"/>	<input type="text"/>
Do not tell us your partner's address if it is the same as yours.	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>

Date of birth

When did you move to this address?

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

National Insurance (NI) number

Letters Numbers Letter

Letters Numbers Letter

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

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

You can find your National Insurance number on payslips or letters from the Department for Work and Pensions or HM Revenue & Customs. We cannot normally make a decision about your claim if we do not have your NI number.

We need to see proof of your identity and NI number. See the checklist in part 16.

If you or your partner have moved home in the last 12 months, tell us your last address.

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Postcode	Postcode

Tell us whether you were the homeowner or a tenant at this address?

Homeowner Tenant

Homeowner Tenant

Have you or your partner claimed Housing Benefit or Council Tax Support (Benefit) before?

No

Yes When did you last claim?

No

Yes When did you last claim?

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

Yes We will write to you about this.

No

Yes We will write to you about this.

Notes for filling in the form

Please tear off these notes and keep them, you may need to read them again in the future. You should use the 'Change of circumstances form' over the page if, in the future, your circumstances change from the details you have included on this form.

Filling in the form

Please fill in this form in black ink. 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. Do not put a cross in any boxes. If you answer a question with a cross, we may have to send the form back to you, and this will delay your claim.

If someone else fills in the form for you, they must also sign the form. There is a special space for them to sign.

Proof

We need to see proof of some of the things you write about on the form. Please make sure that all the proof you provide to support this application are original documents. There is a checklist in part 16 of the form to help you. If you are not sure if we need to see proof of something, get in touch with us and we will tell you what we need to see. We cannot make a decision on your claim until we have seen the proof we need.

If you need help to fill in your form

If you need any help, contact the Benefits Service by phone or visit us at the council's offices. If you have difficulty filling in the form and you cannot come into the offices, we may be able to arrange for someone to visit you in your home. Please phone us to arrange a visit. Or, you could get in touch with an organisation such as Citizens Advice.

What to do when you have filled in the form

When you have filled in the form, sign it and send it to us with the proof we need to see. You can bring the form and proof to your council's offices. We recommend that you do not send valuable items such as bank books or passports in the post. Bring them to the Benefits Service at your council's offices 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.

How we collect and use information

We will use the information you give in this form, and in any proof you send, to process your claim for Housing Benefit and Council Tax Support. We may also use it to account for and charge Council Tax.

We are under a duty to protect the public funds we manage, and we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations responsible for checking or managing public funds. These other organisations include government departments, such as the Department for Work and Pensions, other local authorities and organisations such as banks and building societies 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.

 We are the data controller for the purposes of the Data Protection Act.

If you want to know more about what information we have about you, or the way we use that information, please ask us.

Information available online

Further information regarding Housing Benefit and Council Tax Support is available on your council's websites.

- If you are a resident of Christchurch, East Dorset or North Dorset go to: www.dorsetforyou.com/benefits
- If you are a resident of Poole go to: www.poole.gov.uk/benefits-and-council-tax/benefits

Changes you must tell the Benefits Service about

Examples of changes you must tell the Benefits Service about include:

- a change in your tax-credit payments;
- if any of your children leave school or leave home;
- if anyone moves into or out of your home, including lodgers and subtenants;
- if your income (including benefits), or the income of anyone living with you, changes;
- if your Income Support, Jobseeker's Allowance, Employment Support Allowance or Universal Credit starts/stops;
- if your savings or investments change;
- if 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;
- if your rent changes;
- if you move home;
- if you or your partner are going to be away from home for 4 weeks or more;
- if you or anyone living with you starts work; or
- if anything you have told us about changes.

If you are not sure, ask the Benefits Service for advice.

If you do not tell us about these changes, you may lose money you are entitled to or you may get too much benefit.

It is a criminal offence not to tell us about any change of circumstances that may affect your benefit. We may take court action against you and if we pay you too much benefit, you will probably have to pay it back.

Please do not delay as you may have to pay a financial penalty if you do not tell us about a change that affects your Council Tax within 21 days of that change.

Name	<input type="text"/>
Reference number	<input type="text"/>
Phone number	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	Postcode
Date of change or move	<input type="text" value=" / /"/>
My circumstances have changed in the following ways.	
Signature	Date <input type="text" value=" / /"/>

Part 1 About you and your partner continued

	You	Your partner
What is your nationality?	<input type="text"/>	<input type="text"/>
On what date did you last enter or apply to stay in the UK?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
The UK is England, Northern Ireland, Scotland and Wales.		
Are you or your partner in hospital or residential care at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Please tell us about it below.
When did you go in?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
When will you come out, if you know this?	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Do you or your partner get Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? We need to see proof of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? We need to see proof of this.
	Care <input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
	Mobility <input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
Do you or your partner get Personal Independence Payment?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? We need to see proof of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? We need to see proof of this.
	Daily living <input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
	Mobility <input type="text"/> £ <input type="text"/>	<input type="text"/> £ <input type="text"/>
Do you or your partner get Attendance Allowance?	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.
Does anyone get Carer's Allowance or Universal Credit carer element for looking after you or your partner?	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.
Please tick 'Yes', if you have been told that you are entitled to Carer's Allowance, but cannot receive it because you are getting another benefit instead.		
Please tick if you or your partner are:		
an apprentice	<input type="checkbox"/> We need to see proof of this.	<input type="checkbox"/> We need to see proof of this.
on youth training	<input type="checkbox"/> We need to see proof of this.	<input type="checkbox"/> We need to see proof of this.
in legal custody	<input type="checkbox"/> We need to see proof of this.	<input type="checkbox"/> We need to see proof of this.
registered blind	<input type="checkbox"/> We need to see proof of this.	<input type="checkbox"/> We need to see proof of this.
long-term sick or disabled	<input type="checkbox"/> We need to see proof of this.	<input type="checkbox"/> We need to see proof of this.
Do you or your partner have a severe learning disability, mental illness or form of dementia?	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.
Do you or your partner have a vehicle from a mobility scheme?	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.
Do you or your partner pay towards the upkeep of a student?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much do you pay and how often?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much do you pay and how often?
	£ <input type="text"/> every <input type="text"/>	£ <input type="text"/> every <input type="text"/>
Are you or your partner a student?	No <input type="checkbox"/> Go to part 2. Yes <input type="checkbox"/> Tell us if this is full-or part-time.	No <input type="checkbox"/> Go to part 2. Yes <input type="checkbox"/> Tell us if this is full-or part-time.
By student we mean anyone who is carrying out a course of study at an educational establishment.	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>

Please provide proof of your term-time dates of study and proof of any student grants, loans or other funding you receive.

Part 2 About children

We need to know about any children you are responsible for and live with you:

- under 16;
- aged 16 or 17 and registered for work or youth training; or
- aged 16, 17, 18 or 19 and in education doing a course not higher than A level or GNVQ (advanced).

Sometimes a child spends time in more than one household. If this is the case, use part 14 to explain this.

Are there any children in your household who fit the description above?

No Go to part 3.

Yes Fill in this section.

If there are more than three children, use a separate sheet of paper to tell us all the information we ask for on this page and send it with the form.

Tick this box if you are sending a separate sheet of paper.

	First child	Second child	Third child
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First name and middle 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 or your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them?	<input type="text"/>	<input type="text"/>	<input type="text"/>
	We need to see proof of this.	We need to see proof of this.	We need to see proof of this.
Is the child 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.
Does the child get Disability Living Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? Care <input type="text"/> £ <input type="text"/> Mobility <input type="text"/> £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? Care <input type="text"/> £ <input type="text"/> Mobility <input type="text"/> £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? Care <input type="text"/> £ <input type="text"/> Mobility <input type="text"/> £ <input type="text"/>
Does the child get Personal Independence Payment?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? Daily living <input type="text"/> £ <input type="text"/> Mobility <input type="text"/> £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? Daily living <input type="text"/> £ <input type="text"/> Mobility <input type="text"/> £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? Daily living <input type="text"/> £ <input type="text"/> Mobility <input type="text"/> £ <input type="text"/>

If you or your partner pay any childminding costs for these children to a registered childminder, a nursery or an after-school club please provide the following details.

Name of childminder	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address where the child is cared for	<input type="text"/>	<input type="text"/>	<input type="text"/>
Registration number	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do you pay a week?	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
How many weeks in the year do you pay childminding costs?	<input type="text"/> weeks	<input type="text"/> weeks	<input type="text"/> weeks
Give the date you started paying?	<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 related to the childminder or the person providing care at the nursery or after school club?

No

Yes

Please provide proof of the childminding costs you pay. See the checklist in part 16.

Part 3 About other people who live with you

Now tell us about all the other people who usually live with you and your partner.

Do not tell us about your landlord or people who just share a hall, bathroom or toilet with you.

Do any adults usually live with you and your partner?
(By adults we mean people over 16 who nobody gets
Child Benefit for.)

No Go to part 4.

Yes Fill in this section.

If there are more than three people, use a separate sheet of paper to tell us all
the information we ask for on this page and send it with the form.

Tick this box if you are sending a separate sheet of paper.

	First person	Second person	Third person
Last name	<input type="text"/>	<input type="text"/>	<input type="text"/>
First name and middle names	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text" value=" / /"/>	<input type="text" value=" / /"/>	<input type="text" value=" / /"/>
Their relationship to you or your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Some examples are aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner, subtenant, lodger, boarder or friend.		
National Insurance (NI) number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they get Income Support or income-based Jobseeker's Allowance, income-related Employment and Support Allowance or Pension Credit?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> We need to see proof of this.	Yes <input type="checkbox"/> We need to see proof of this.	Yes <input type="checkbox"/> We need to see proof of this.
Do they get Disability Living Allowance, Attendance Allowance, or Personal Independence Payment?	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?
	<input type="text" value="£"/> a week	<input type="text" value="£"/> a week	<input type="text" value="£"/> a week
Are they registered blind?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> We need to see proof of this.	Yes <input type="checkbox"/> We need to see proof of this.	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"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us which. We need to see proof of this.	Yes <input type="checkbox"/> Tell us which. We need to see proof of this.	Yes <input type="checkbox"/> Tell us which. We need to see proof of this.
	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are any of the people who normally live with you married to each other, civil partners, or living together as if they were married or civil partners?

The partner of

Part 3 About other people who live with you continued

	First person	Second person	Third person
Do they pay rent or money to live with you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
How much?	£ <input type="text"/> a week	£ <input type="text"/> a week	£ <input type="text"/> a week
Does this include money for food?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
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.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us their earnings before any deductions.
We need to see proof of their earnings.	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Do they have a severe learning disability, mental illness or form of dementia?	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 at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
When are they expected to come out?	<input type="text"/> / /	<input type="text"/> / /	<input type="text"/> / /
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
When did they go in?	<input type="text"/> / /	<input type="text"/> / /	<input type="text"/> / /
When are they due to come out (if you know)?	<input type="text"/> / /	<input type="text"/> / /	<input type="text"/> / /
Do they have any other income at all? Make sure you tell us about all other income they have. This includes any benefits, credits or allowances you have not already told us about on this form, for example interest from savings and investments.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
	Where does the income come from? <input type="text"/>	Where does the income come from? <input type="text"/>	Where does the income come from? <input type="text"/>
	How much is it before deductions? £ <input type="text"/>	How much is it before deductions? £ <input type="text"/>	How much is it before deductions? £ <input type="text"/>
	Where does the income come from? <input type="text"/>	Where does the income come from? <input type="text"/>	Where does the income come from? <input type="text"/>
	How much is it before deductions? £ <input type="text"/>	How much is it before deductions? £ <input type="text"/>	How much is it before deductions? £ <input type="text"/>

Part 4 About Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance and Pension Credit

Are you or your partner getting or waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance or Pension Credit?

- No Go to part 5.
 Yes Please tell us about it below.

You	Your partner
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Are you or your partner **actually getting** Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance or Pension Credit (Guarantee Credit) at the moment?

- No
 Yes When did you start getting it?

- No
 Yes When did they start getting it?

____ / ____ / ____

Now go to part 11.

____ / ____ / ____

Now go to part 11.

Are you or your partner **actually getting** Pension Credit (Savings Credit) at the moment?

- No
 Yes When did you start getting it?

- No
 Yes When did they start getting it?

____ / ____ / ____

Now go to part 5.

____ / ____ / ____

Now go to part 5.

Are you or your partner **waiting** to hear about a claim for Income Support, income-based Jobseeker's Allowance, income-related Employment and Support Allowance or Pension Credit?

- No
 Yes When did you claim?

- No
 Yes When did they claim?

____ / ____ / ____

Now go to part 5.

____ / ____ / ____

Now go to part 5.

Don't delay returning this form even if you are waiting to hear about a claim for any of the above benefits.

Part 5 About current accounts, savings, investments and property

Do you or your partner have any bank accounts, savings, investments or property in the UK or abroad?

- No Go to part 6.
 Yes Answer the questions below and on the next page.

This includes cash, overdrawn accounts, internet accounts, current accounts and savings accounts with a bank or building society, post office accounts, Premium Bonds, National Savings Certificates, and stocks and shares.

	Number of accounts	Total amount	Name of the bank	Account number
Bank accounts	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
	(for example, 0,1,2,3)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>	<input type="text"/>

	Number of accounts	Total amount	Name of building society	Account number
Building society accounts	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
	(for example, 0,1,2,3)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
		£ <input type="text"/>	<input type="text"/>	<input type="text"/>

About current accounts, savings, investments and property continued over the page.

	Number of accounts	Total amount	Name of the post office account	Account number
Post office accounts	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
	(for example, 0,1,2,3)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>

How many bonds? Total amount £

Premium Bonds

	Number of accounts	Total amount	Name	Account number
Unit trusts, ISAs, PEPs, TESSAs or other investments	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
	(for example, 0,1,2,3)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>

	Number of bonds	Total amount	Name	Bond number
Income bonds or capital bonds	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
	(for example, 0,1,2,3)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>

Money or property held in trust

Approximate value £ We will write to you about this.

	Approximate value	Name of the company these are held in	Number held
Stocks and shares	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
If there are more than three, tell us about the others on a separate sheet of paper and send it with this form.	£ <input type="text"/>	<input type="text"/>	<input type="text"/>
	£ <input type="text"/>	<input type="text"/>	<input type="text"/>

Tick this box if you are sending a separate sheet of paper.

Do you or your partner have any National Savings Certificates? No Yes We need to see the original certificates as proof.

Do any of your savings or investments include: No Yes We will write to you about it.

- money from the sale of a house; or
- money from a charity?

Apart from your home, do you or your partner own, or partly own, any other property, land or timeshare in this country or abroad? No Yes We will write to you about it.

If you have a mortgage or a loan for this, still tick 'Yes'.

Have you or your partner delayed receiving your State Pension and have now received a lump-sum payment? No Yes Please tell us the total amount you have received, before tax or other deductions. £ We need to see proof of this.

Have you or your partner received: No Yes We will need to see proof of this.

- a Far Eastern Prisoner of War Compensation payment;
- a compensation payment made to victims of atrocities that happened during the Second World War; or
- a payment from the vCJD (Creutzfeldt-Jakob Disease) Trust?

Tell us about any other savings or investments you and your partner have.

£ <input type="text"/>	Type of savings or investment	<input type="text"/>
£ <input type="text"/>	Type of savings or investment	<input type="text"/>

We must see proof of any savings, investments or property before we can decide how much benefit you can get. Read the checklist in part 16 to see what you can use as proof.

Part 6 About working for an employer

Do you or your partner work for an employer?

No Go to part 7.

Yes Answer the questions on this page.

If you work for more than one employer, tell us about all the other employers on a separate sheet of paper and send it with this form.

Tick this box if you are sending a separate sheet of paper.

	You	Your partner
What is your job title?	<input type="text"/>	<input type="text"/>
What is your employer's name and address?	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
	Postcode <input type="text"/>	Postcode <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 length of time?	No <input type="checkbox"/> Yes <input type="checkbox"/> When do you finish? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When do you finish? <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 paid before tax and National Insurance are taken off?	£ <input type="text"/>	£ <input type="text"/>
How are you paid?	<input type="text"/>	<input type="text"/>
Are you paid a bonus?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes tell us about this in part 14	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes tell us about this in part 14
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"/>

If you are getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment, tell us how much in part 9.

Are you getting any non-statutory company sick pay (also called contractual or occupational sick pay) or maternity pay from your employer at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? We need to see proof of this. £ <input type="text"/> every <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? We need to see proof of this. £ <input type="text"/> every <input type="text"/>
Do you pay into a private or company pension scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? We need to see proof of this. £ <input type="text"/> every <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> How much and how often? We need to see proof of this. £ <input type="text"/> every <input type="text"/>

We must see proof of any earnings before we can decide how much benefit you can get. If you get tips or bonuses, tell us about these in part 14. Read the checklist in part 16 to see what you can use as proof or you may use the 'Certificate of earnings' on page 25 of this form.

Part 7 About being self-employed

Are you or your partner self-employed?

No Go to part 8.

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 proof of your income. Read the checklist in part 16 to see what you can use as proof. Please contact us for a self-employed assessment form.

What kind of work do you do?

You	Your partner

Are you a director of the business?

No

Yes If yes, provide proof of your earnings.

No

Yes If yes, provide proof of your earnings.

When did the business start?

 / /
 / /

What is the business address?

Postcode	Postcode

How many hours a week do you usually work?

Do you get a Business Start-up Allowance?

No

Yes How much and how often?

£ every

No

Yes How much and how often?

£ every

Do you pay into a private pension scheme?

No

Yes How much and how often?

£ every

No

Yes How much and how often?

£ every

We must see evidence of your earnings before we can decide how much benefit you can get. Read the checklist in part 16 to see what you can use as evidence.

Part 8 About any other work

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

No Go to part 9.

Yes Answer the questions below.

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

What other work do you do?

You	Your partner

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

Postcode	Postcode

Part 9 About benefits and pensions

Have you or your partner delayed receiving State Pension?

No

Yes When will the State Pension and any related lump sum be paid?

/ /

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

No Go to part 10.

Yes Answer the questions on this page.

Tell us the full amount of the benefits before any deductions.

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

- Adoption Pay
- Armed Forces Independence Payment
- Attendance Allowance
- Bereavement Allowance
- Better off in Work Credit (BWC)
- Carer's Allowance
- Child Benefit
- Child Tax Credit
- Contribution-based Jobseeker's Allowance
- Contributions-based Employment and Support Allowance
- Employment Credit
- Financial Assistance Scheme
- Fostering Allowance
- Guardian's Allowance
- Incapacity Benefit
- Industrial Death Benefit
- Industrial Injuries Disablement Benefit
- Maternity Allowance
- New Enterprise Allowance
- Pension Credit (including Savings Credit)
- Return to Work Credit
- Severe Disablement Allowance
- State Pension
- Statutory Maternity Pay
- Statutory Paternity Pay
- Statutory Sick Pay
- Universal Credit
- War Disablement Benefit, War Pension or War Widow's Pension
- Widowed Parent's Allowance
- Widow's or Widower's Benefit
- Working Tax Credit

If you are getting or have claimed any benefit that is not listed, tell us about it on a separate sheet of paper and send it with the form.

Tick this box if you are sending a separate sheet of paper.

	You	Your partner
The name of the benefit or pension	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Tick here if you are waiting to hear whether you can claim this.

Date you applied

Date you applied

Tick here if you are getting it now.

How much and how often?
£ every

How much and how often?
£ every

The name of the benefit or pension

<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
--	--

Tick here if you are waiting to hear whether you can claim this.

Date you applied

Date you applied

Tick here if you are getting it now.

How much and how often?
£ every

How much and how often?
£ every

The name of the benefit or pension

<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
--	--

Tick here if you are waiting to hear whether you can claim this.

Date you applied

Date you applied

Tick here if you are getting it now.

How much and how often?
£ every

How much and how often?
£ every

Don't delay returning this form even if you are waiting to hear about a claim for any of the above benefits.

Part 10 About other money coming in

Do you or your partner have any money coming in (or expect to have some money coming in) that you have not already told us about on this form?

No Go to part 11.

Yes Answer the questions on this page.

You do not need to tell us about payments from the Independent Living Fund, the Eileen Trust or the MacFarlane Trust.

This includes the following.

- Company pensions
- Work pensions and private pensions
- Annuities (a fixed amount of money paid every year from an insurance agreement.)
- Any cash payments
- Any money you get from boarders, lodgers or subtenants
- Equity release schemes
- Home income plans
- Income from students living in your home
- Training allowances
- Money from a trust fund
- Student grant or loan
- Maintenance or child support for you, your partner or any child

	Other money 1	Other money 2	Other money 3
What is the money for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets it?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much do they get?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
How often?	<input type="text" value="every"/>	<input type="text" value="every"/>	<input type="text" value="every"/>
How is it paid?	<input type="text"/>	<input type="text"/>	<input type="text"/>
When did they start getting this income?	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
When is the income likely to go up?	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
Does anyone owe money to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us about it below.
What for?	<input type="text"/>	<input type="text"/>	<input type="text"/>
How much?	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Who is it owed to?	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you or your partner expecting to get any money in the next 12 months?
 No
 Yes Tell us about it below.

For example, a redundancy payment or a payment instead of notice or holiday.

What for?

How much? £

We must see proof of any money coming in before we can decide how much benefit you can get. Read the checklist in part 16 to see what you can use as proof.

Part 11 About where you live

Do you jointly own your home?

No

Yes Who with?

Go to part 12 on page 14.

Do you own this home or have a mortgage?

No

Yes Go to part 12 on page 14.

What sort of building do you live in?

Tick one box only.

Detached house

Flat in a house

Caravan, mobile home or houseboat

Semi-detached house

Flat in a block

Board and lodgings

Terraced house

Flat over a shop

Hotel or guest house

Maisonette

Bedsit or rooms or a studio flat

Residential care nursing home

Detached bungalow

Hostel

Semi-detached bungalow

Other, give details

Does your home have central heating?

No

Yes

Does your home have a garage?

No

Yes

Does your home have a parking space?

No

Yes

How many floors are there?

If you and your household live in only part of the building, where in the building do you live?

At the front

In the middle

At the back

Which floor do you live on?

For example, ground floor, first floor.

How many rooms are there in the building?

In the whole building

Just for you and your household

That you share with other people

Living rooms

Bedrooms

Bathrooms or shower rooms

Toilets

Kitchens

Bedsits

Other rooms

Do you use your home for business?

No

Yes

Do you have a main home somewhere else?

No

Yes Tell us about it below. If your main home is somewhere else in the UK or abroad, tick 'Yes', even if you do not pay rent for it.

What is the address?

Postcode

Do you pay rent on the address above?

No

Yes How much and how often? We need to see proof of this. £ every

Do you or your partner have a carer who does not live in the property but stays overnight to provide care?

No

Yes We may write to you.

Part 12 About rent

Do you pay rent or a site fee for your home?

No Go to part 14.

Yes Fill in the section below.

If you pay a site fee is this a single or a double pitch?

What is your landlord's full name and business 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 the agent's full name and address.

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

 Postcode

Is your landlord or the agent, or your landlord's or the agent's partner, either:

No

Yes What is the relationship?

- an ex-partner;
- your partner's ex-partner;
- related to you or your partner;
- related to your children; or
- related to your partner's children?

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

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 let us know when you have actually moved in.

What sort of tenancy do you have? For example, you may have a 'six month assured shorthold' or a 'statutory assured shorthold'.

What period does the tenancy cover?

From / / to / /

Do you rent this property from a trustee of a trust which you, your partner or any of your children are a trustee or beneficiary of?

No

Yes

Do you rent this property from a company which you or your partner is a director or an employee of?

No

Yes

Does this property come with your job?

No

Yes

We must see proof of your rent and tenancy before we can decide how much benefit you can get. Read the checklist in part 16 to see what you can use as proof or you can use the 'Certificate of rent' on page 23 of this form.

Part 12 About rent continued

Is the property furnished by your landlord?

- Furnished
Partly furnished
Unfurnished

Tick the box that applies.

Furnished with large appliances (fridge, cooker, washer and so on) only

How much is your rent before any Housing Benefit you receive, and how often should it be paid?

£ every

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

Does anyone else share the rent with you and your partner?

- No
Yes Tell us the details below.

Tell us their names and their relationship to you and your partner.

Name
Relationship

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

£ every

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

Has your rent changed in the last 12 months?

- No
Yes Send us proof of the date it changed and how much it changed by.

When is the next rent increase due?

/ /

Has your rent been registered as a fair rent by a rent officer?

- No
Yes Please send us the notice of registration form RO5.

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

- No
Yes How many in a year?

Are you behind with your rent?

- No
Yes By how many weeks?

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

- You or your partner
Your landlord
Someone else Tell us who it is.

Tick the box that applies.

Does your rent include money for the following?

Meals

- No
Yes How much? £ every

For which meals?

- Breakfast
Lunch
Evening meal

Water authority charges

- No
Yes How much? £ every

Fuel for cooking

- No
Yes How much? £ every

Part 12 About rent continued

Does your rent include money for the following (continued)?

Heating	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
Lighting	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
Hot water	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
Laundry	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
Cleaning rooms or windows	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
Gardening	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
Garage or parking space	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>

Do you have to rent the garage as part of the tenancy agreement? No
Yes

Personal care and general counselling and support	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
---	-----------------------------	--

Do you pay any service charges separate from your rent?	No <input type="checkbox"/>	Yes <input type="checkbox"/> How much? £ <input type="text"/> every <input type="text"/>
---	-----------------------------	--

For example, for cleaning or lighting shared areas, an alarm system, a warden, general counselling or support, meals, or lift maintenance?

What for?

Part 12a About rent

Are you living away from home at the moment? No

Yes Tell us about it below.

Why are you not living at home?

When did you last live at home?

 / /

When do you expect to go back home?

 / /

What is the address of where you are living at the moment?

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Have you sublet your home? No

Yes Who lives there now?

Part 14 Anything else you need to tell us

Please use this space to tell us anything else you think we should know about.
Use a separate sheet of paper and attach it to this form if you need to.

If you are sending any separate sheets of paper with this form tell us how many sheets.

Part 15 Backdating

We can usually pay benefit from the Monday after the day we receive your claim. Sometimes we can pay benefit from an earlier date if you have a good reason for not claiming earlier. If you want us to consider paying your benefit from an earlier date, tell us when you want benefit from and why you did not claim earlier.

The date you want to claim from?

For this earlier period, were your
circumstances the same as on this form?

No

Yes

Tell us why you have not claimed before.

Part 16 Checklist

Please tick to say what proof you are sending with this form. We must see original documents, not copies. Please do not send valuable items such as bank books and passports through the post. If you can, bring them to the Benefit Office. We will make a note of the details we need and give you the documents back straight away. If you cannot get into the office, we suggest sending them by recorded or special delivery. If you are unable to do this, contact us.

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

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

Proof of identity

Such as a birth certificate, marriage certificate, passport, medical card, driving licence, UK residence permit or EEC identity card. We need to see at least two kinds of identification for each person.

Proof of your address

Such as a TV licence or a gas or electricity bill you have recently paid.

Proof of National Insurance number

Such as a National Insurance number card, payslips or letters from the Department for Work and Pensions (DWP) or HM Revenue & Customs (HMRC).

Proof of savings and investments

Usually if the total value of your savings and investments is less than £6,000, you will not need to provide proof. However, if the total value is more than £6,000 we will need proof, for example your building society book, bank books, bank statements and so on. The proof you send must cover the two months before this claim and show transactions for that time. If you bank online, we can accept printed statements (not cash machine printouts) showing transactions for the last two months. If you open a new account you must tell us.

Proof of earnings

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. You can use the Employer's Certificate at the end of this form to provide proof of your earnings. We may need to contact your employer if you do not provide this information.

We also need this for any other adults who are part of your household.

Proof of self-employed earnings

If you or your partner are self-employed, we need to see your accounts for the last financial year or, if you have been trading for less than six months, details of your trading records so far. Or, you can fill in a self-employed assessment form on your council's website.

Proof of other income

Such as pension slips from a former employer or a letter from the court showing how much maintenance you are getting. We need to see evidence of any money people pay you for board and lodgings.

We also need this for other adults who are part of your household.

Proof of benefits, allowances or pensions

Such as current award notices or letters from the Department for Work and Pensions (DWP) or HM Revenue & Customs (HMRC) confirming how much you get. Don't delay returning this form even if you are waiting to hear about a claim or you may lose benefit.

We also need this for other adults who are part of your household.

Proof of private rent and tenancy

Such as a tenancy agreement, rent book, rent receipts, or a letter from your landlord. Or, ask your landlord to fill in the 'Certificate of rent' on page 23 of this form. If you are a council tenant you do not need to provide proof of rent and tenancy.

Proof of other money paid out

Such as letters about student grants or maintenance agreements.

Proof of childcare costs

Such as receipts for the childcare costs you pay. They must show the costs, times and the name of the person providing the care. If you are related to the childcare provider, please provide the address where the childcare is provided.

Proof of student status

If you or your partner are a student we need to see proof of your term-time dates of study and proof of any student grants or loans or other funding you receive.

Make sure you read and sign the declaration on page 20.

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, getting them to sign this form should allow us to process your claim more quickly, but they do not have to sign.

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

- The information I have given on this form is true and complete.
- I understand that if I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- I agree that you will use the information I have provided to process my claim for Housing Benefit or Council Tax Support, (Council Tax Benefit if before 1 April 2013) or both. You may check some of the information with other organisations as allowed by the law.
- I understand you are under a duty to protect the public funds you manage, and may use the information I have provided on this form to prevent and detect fraud. You may also share this information, for the same purposes, with other bodies responsible for checking or managing public funds. These other bodies include government departments, like the Department for Work and Pensions, other local authorities and organisations such as banks and organisations that lend me money.
- I know that I must let you know in writing about any change in my circumstances which might affect my claim.

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.

I have checked with the person claiming that the answers I have written on this form are correct.

Name of the
person who filled
in the form

Signature

Relationship to the
person claiming

Date

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 check 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.

Under the Data Protection Act 1998 we need your permission to discuss anything else.

If you give us permission, we would be able to tell your landlord whether:

- you have claimed or renewed your claim for 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 permission to share information about the progress of my Housing Benefit claim with my landlord or their representative.

Signature

Full name
(in CAPITAL LETTERS)

Address

Postcode

Date

To the tenant

Please hand this form to your landlord and ask them to fill it in and return it to you. You should then send the filled-in form to us as soon as possible.

To the landlord

Please help your tenant by filling in this form and returning it to the tenant as soon as possible.

Name of tenant

Address of tenancy

 Postcode

What date did the tenancy start? / /

How much and how often does the tenant have to pay? £ every

Is this a joint tenancy? No
 Yes

If yes, how many joint tenants are there?

Does the tenant have any rent-free weeks? No
 Yes If 'Yes', how many?

Is the rent up to date? No If 'No', give details.
 Yes

Does your tenant have a rent book? No
 Yes

Does your tenant have a written tenancy agreement? No
 Yes

Do you own the property? No
 Yes

If 'No', are you a licensed tenant? No
 Yes

Are you related to anyone in the household? No
 Yes Who?

Related includes related through marriage or civil partnership, even if the marriage or civil partnership has ended. Some examples are ex-wife, ex-husband, aunt, brother, daughter, father, grandson, grandmother, son-in-law or stepdaughter.
 What is your relationship with them?

Is the accommodation furnished? No
 Yes

How much notice does the tenant have to give?

Note to the person claiming

You should only use this form if you are unable to provide payslips as proof of your employment. Please fill in your name and address and then give the form to your employer to fill in your details. Please return the form as soon as possible to the benefits service.

Your name

Address

Postcode

Note to employer

Please fill in the boxes below and sign the declaration. Please give details of your employee's pay for the last five weeks, three fortnights or two months. If they have just started their employment please give their expected earnings for a similar period. Please then return the form to the employee.

National Insurance (NI) number Letters Numbers Letters

Payroll number

Start date / / End date / /

Date of their next pay rise / /

Wage details for the last five weeks, three fortnights or two months

Date	Gross pay	Income tax	National Insurance	Pension contribution	Tax credits	Take-home pay
<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"/>	£ <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"/>	£ <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"/>
<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"/>
Totals so far this year	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>
How are they paid (for example cash, cheque, BACS)?	<input type="text"/>		How often are they paid (for example every week, every month)?	<input type="text"/>		

This information is true and complete. I am aware that if I give incorrect information I may be prosecuted.

Signature

Full name (in CAPITAL LETTERS)

Your job title

Address

Postcode

Date / /

Company stamp

