



Housing Benefits Office
Municipal Buildings
West Street
Boston

Lincolnshire PE21 8QR

Phone: 01205 314202

Fax: 01205 364604

E-mail: housing.benefits@boston.gov.uk

Web-site: www.mybostonuk.com

Housing Benefit claim form and Council Tax Support application form

Please return this form as soon as possible or within one month of registering your intention to claim/apply.

Name and address:

Postcode:

Ref:

Self employed form issued	
Child care costs form	
Land and property form	
Landlord enquiry form	
Certificate of earnings form	
Estimated earning form	
Direct debit form	

Please use the online editable form and return this application to BBCRevs.Bens@Ppspl.co.uk.

If you have any enquires please contact 01205 314202.

What would you like to claim for?

Housing Benefit to help pay rent

Council Tax Support to help pay Council Tax

Second Adult Rebate to help pay Council Tax because you are a pensioner and have other people on a low income living in your property (if you would like to know more about this, please ask us).

If you only want to claim Second Adult Rebate, fill in parts 1, 3, 14 and 16).

Office use only

New claim form issued	Date	
Appointment made	Date	Time
Council Tax Reference		
HB start date		
Council Tax Support start date		

Privacy Notice

Council Tax, Council Tax Support and Housing Benefit

Your privacy is very important to Boston Borough Council. We are the Data Controller responsible for looking after the information you provide. Further information regarding Data Protection including who to contact and our retention periods can be found on our website at www.mybostonuk.com

How we will use your information

The council uses your personal information in order to administer and enforce council tax under the Local Government Finance Act 1992 and its associated regulations.

The council uses your personal information in order to administer its council tax support scheme under S13A and Schedule 1a of the Local Government Finance Act 1992 and its associated Regulations.

The council uses your personal information in order to administer the Housing Benefit scheme under the Social Security Administration Act 1992 and the Welfare Reform Act (WRA) 2012.

The council has a duty to protect public funds it administers and may use information held about you for all lawful purposes, including but not limited to the

- prevention and detection of fraud,
- matching council tax data with electoral registration records and
- protecting public funds in investigating misuse of public money

This council is required by law to participate in the National Fraud Initiative (NFI) data matching exercises. Housing benefit, council tax and council tax support information may be provided to the Cabinet Office for NFI purposes and will be used for cross-system and cross-authority comparison for the prevention and detection of fraud.

We may pass the information to other agencies or organisations such as the Department of Work and Pensions and HM Revenues 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 them information to ensure the information is accurate and to prevent/detect crime and protect public funds.

The council may also use the service of approved companies/organisations to check and process claims and applications.

The council will share information with pension providers, landlords and any other organisation where it is in the interest of the customer.

A list of organisations, companies and 3rd parties we work with can be found on our website at www.boston.gov.uk.

This council will also use the information for the purpose of performing any of its statutory enforcement duties. The council may also share this information with other bodies responsible for detecting and preventing fraud or auditing and administering public funds where required to by law.

We will not disclose your personal information to third parties for marketing purposes and we will not use your personal data in a way which may cause you harm.

If you have any concerns regarding the use of your information you can contact the Councils Data Protection Officer on 01205 314368, if you are not then satisfied then you have a right to contact the Information Commissionaires Office whose details are at www.ico.org.uk.

Notes for filling in the claim form

About this form

The Housing Benefit and Council Tax Support application form has been specially designed to be easy to fill in. It is long, but we have to ask a lot of 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, 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 it in.

Second Adult Rebate for pension age customers

Second Adult Rebate is Council Tax Support you can get if you share your home with someone who is not your partner, is on a low income, is 18 or over, and does not pay you rent. You can only claim this if the charge payer is of pension age.

If you are claiming Second Adult Rebate, only fill in parts 1, 3 and 14 to 16.

Evidence

We need to see evidence of some of the things you tell us about. If you are not sure if we need to see evidence 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 evidence we have asked for.

If we award benefit or Council Tax Support

If we decide to pay benefit, we will review your claim regularly. This may involve an unannounced visit to your home by our Visiting Officer. We may also post you a form that you should complete and return to us with all relevant supporting evidence.

Part 1 About you and your partner

What date did you move in to your current home?

If you have not moved in yet, when do you expect to move in?

Do you have a partner who normally lives with you?

No

Yes

A partner is someone (of the same or opposite sex) you live with as part of a couple, as if you were married or civil partners. If you are married, in a civil partnership or have a partner, you must put their details on this form.

	You	Your Partner																																				
Last name	<input type="text"/>	<input type="text"/>																																				
First names	<input type="text"/>	<input type="text"/>																																				
Any other last names you may have used	<input type="text"/>	<input type="text"/>																																				
Title (Mr, Mrs, Ms, Miss, Dr, Rev)	<input type="text"/>	<input type="text"/>																																				
Date of birth	<input type="text"/>	<input type="text"/>																																				
National Insurance number	<table border="1"> <tr> <td>Letter</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Letter</td> </tr> <tr> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> </tr> </table>	Letter	Number	Number	Number	Number	Number	Number	Number	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"/>	<input type="text"/>	<table border="1"> <tr> <td>Letter</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Number</td><td>Letter</td> </tr> <tr> <td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td> </tr> </table>	Letter	Number	Number	Number	Number	Number	Number	Number	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"/>	<input type="text"/>
Letter	Number	Number	Number	Number	Number	Number	Number	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"/>	<input type="text"/>																														
Letter	Number	Number	Number	Number	Number	Number	Number	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"/>	<input type="text"/>																														
You can find this on payslips or letters from the DWP or the tax office. We cannot normally decide your claim if we do not have your National Insurance number.																																						
If you do not have a National Insurance number, tick this box	<input type="checkbox"/>	If you do not have a National Insurance number, tick this box <input type="checkbox"/>																																				
If you are waiting to be allocated a National Insurance number, tick this box	<input type="checkbox"/>	If you are waiting to be allocated a National Insurance number, tick this box <input type="checkbox"/>																																				
Male <input type="checkbox"/> Female <input type="checkbox"/>		Male <input type="checkbox"/> Female <input type="checkbox"/>																																				
Your daytime telephone number	<input type="text"/>	<input type="text"/>																																				
Email	<input type="text"/>	<input type="text"/>																																				
Preferred method of contact	<input type="text"/>	<input type="text"/>																																				
If you have moved home in the last 12 months, tell us your last address	<input type="text"/>	<input type="text"/>																																				
	Postcode	Postcode																																				

We need to see at least two original documents as proof of your identity and your partner's identity (if you have one). We will accept documents such as:

- a passport;
- a driving licence;
- a letter from Jobcentre Plus;
- a letter from the Department for Work and Pensions;
- a letter from your social worker or doctor;
- a P45 or P60;
- a birth certificate;
- a marriage certificate;
- two recent bank or building society statements;
- a gas, electricity or water bill;
- a letter from HM Revenue and Customs;
- a letter from The Pension Service; or
- a letter from your solicitor.

We need to see one original document as proof of National Insurance number for you and your partner (if you have one). We will accept documents such as:

- a National Insurance number card (RD3);
- a letter from the Department for Work and Pensions;
- a P45 or P60;
- payslips or salary slips;
- a letter from HM Revenue and Customs; or
- a letter from The Pension Service.

Part 1 About you and your partner (continued)

	You	Your partner
Have you or your partner claimed Housing Benefit or Council Tax Support before?	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you last claim? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did they last claim? <input type="text"/>
	What address did you claim for? <input type="text"/> Postcode	What address did they claim for? <input type="text"/>
Have you or your partner come to live in England, Northern Ireland, Scotland, Wales, the Republic of Ireland, the Channel Islands or the Isle of Man?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when? <input type="text"/>
From what date?	<input type="text"/>	<input type="text"/>
What nationality are you and your partner?	<input type="text"/>	<input type="text"/>
If you or your partner's nationality is not British, on what date did you or your partner last enter and apply to stay in the UK?	<input type="text"/>	<input type="text"/>
Are you or your partner an EEA national?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you or your partner applied to the European Settlement Scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, have you been granted Settled Status or Pre-settled status? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, have they been granted Settled Status or Pre-settled status? <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"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When did you go in? <input type="text"/>
	When will you come out (if you know this)? <input type="text"/>	When will they come out (if they know this)? <input type="text"/>
Does anyone get Carer's Allowance for looking after you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Have you or your partner ever claimed Carer's Allowance? <small>Still tick Yes if you have claimed but were not paid any money.</small>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Do you or your partner have a vehicle from a mobility scheme?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Part 1 About you and your partner (continued)

	You		Your partner	
Are you or your partner a student?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Do you/they study full time or part time?	Full <input type="checkbox"/>	Part <input type="checkbox"/>	Full <input type="checkbox"/>	Part <input type="checkbox"/>
Tick if you or your partner are:				
• an apprentice	<input type="checkbox"/>		<input type="checkbox"/>	
• on youth training	<input type="checkbox"/>		<input type="checkbox"/>	
• in legal custody	<input type="checkbox"/>		<input type="checkbox"/>	
• severely mentally impaired	<input type="checkbox"/>		<input type="checkbox"/>	
• registered blind	<input type="checkbox"/>		<input type="checkbox"/>	
• long-term sick or disabled	<input type="checkbox"/>		<input type="checkbox"/>	

Part 2 About children

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

- under 16; or
- aged 16 to 20 and in full-time further education or approved training.

Are there any children in your household? No Go to Part 3 Yes

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.

If you are sending a separate sheet of paper, tick this box.

	First child	Second child	Third child
Last name	<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"/>
What is the child's sex?	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
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 from 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"/>

Part 2 About children (continued)

Child Benefit number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Who gets the Child Benefit for them? We need proof of this.	<input type="text"/>	<input type="text"/>	<input type="text"/>
Is the child registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Does the child get Disability Living Allowance?	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 you pay a registered childminder, nursery or after-school club any childminding costs for this child? You will need to fill in a child care cost form.	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please tell us the name and registration number of the childcare provider.	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please tell us the name and registration number of the childcare provider.	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please tell us the name and registration number of the childcare provider.
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	How much do you pay a week?	How much do you pay a week?	How much do you pay a week?
	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

Part 3 About other people who live with you

Do any adults usually live with you and any partner you have? No Go to Part 4 Yes Answer all questions in this section.

By adults we mean people over 16 who nobody gets Child Benefit for.

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

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

If you want to tell us about more than three people, use a separate sheet of paper.

If you are sending a separate sheet of paper, tick this box.

	First person	Second person	Third person
Last name	<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"/>
National Insurance Number	Letter <input type="text"/> Number <input type="text"/> Letter <input type="text"/>	Letter <input type="text"/> Number <input type="text"/> Letter <input type="text"/>	Letter <input type="text"/> Number <input type="text"/> Letter <input type="text"/>
Their relationship to you or your partner	<input type="text"/>	<input type="text"/>	<input type="text"/>
When did they move in? Some examples are aunt, brother, daughter, father, grandson, grandmother, stepdaughter, joint tenant, joint owner, subtenant, lodger or friend.	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do they get Income Support, income-based Jobseeker's Allowance, Pension Credit, Employment and Support Allowance (income-related) or Universal Credit?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

Part 3 About other people who live with you (continued)

	First person	Second person	Third person
Do they get Disability Living Allowance, Attendance Allowance or Personal Independence Payment?	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 registered blind?	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 a full-time student, a student nurse, a care worker, an apprentice or on youth training?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, tell us which. <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, 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"/> If yes, how much and how often? £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, how much and how often? £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, how much and how often? £ <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 at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when are they expected to be released? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when are they expected to be released? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when are they expected to be released? <input type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when did they go in? <input type="text"/> When will they come out (if you know this)? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when did they go in? <input type="text"/> When will they come out (if you know this)? <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, when did they go in? <input type="text"/> When will they come out (if you know this)? <input type="text"/>
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, tell us their earnings before any deductions. £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, tell us their earnings before any deductions. £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, tell us their earnings before any deductions. £ <input type="text"/>
Do they have any other income? This includes any benefits, allowances, tax or pension credits you have not told us about on this form and interest from savings and investments.	No <input type="checkbox"/> Yes <input type="checkbox"/> First other type of income <input type="text"/> How much is it before deductions and how often? £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> First other type of income <input type="text"/> How much is it before deductions and how often? £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> First other type of income <input type="text"/> How much is it before deductions and how often? £ <input type="text"/>

Part 3 About other people who live with you (continued)

First person

Second other type of income

How much is it before deductions and how often?

£

Third other type of income

How much is it before deductions and how often?

£

Second person

Second other type of income

How much is it before deductions and how often?

£

Third other type of income

How much is it before deductions and how often?

£

Third person

Second other type of income

How much is it before deductions and how often?

£

Third other type of income

How much is it before deductions and how often?

£

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

No Yes

If yes, tell us their names

is the partner of

And

is the partner of

We must see evidence of all income and interest from savings for the people shown above.

Part 4 Your circumstances

Do any of the following circumstances apply to you or your partner?

Description of event or change	Tick box that applies		You Please tell us the date it happened or started	Your partner
	No	Yes		
• Retired				
• Unemployed or made redundant				
• Sick and not able to work				
• Lone parent				
• Widowed				
• Separated				
• Divorced				
• Registered fully blind				
• In a residential home or nursing home				
• Severely mentally impaired				
• Getting married				
• Increased wages				
• Reduced wages				
• Living together with partner				
• New baby or child				
• In prison				
• Expecting a baby			Date due	Date due
• In NHS hospital as an inpatient			Date first admitted	Date first admitted

Part 4 Your circumstances (continued)

Use the space below to explain any changes that have happened in the last 18 months and to describe the effect they have had on the level of income and savings for you and your family.

Example one	I was made redundant in January with £3,000 redundancy money, which I have been using to pay off my debts while I have been signing on unemployed. My partner has gone back to work after having the baby so we are getting tax credit now.
Example two	Since I retired in November I have had my state pension. I got £5,000 lump sum from my work pension, which we are using to buy double-glazing, to change our car and to go on holiday. My wife is going to keep working to bring in extra spending money.

Part 5 About benefits, tax credits and state pensions

Have you or your partner deferred (put off) receiving a pension? No Yes If yes, please give details

	You		Your partner	
Are you or your partner getting:- Income Support, Income-based Jobseeker's Allowance, Pension Credit (Guarantee Credit), Employment and Support Allowance (income related) or Universal Credit at the moment?	Waiting to hear <input type="checkbox"/>		Waiting to hear <input type="checkbox"/>	
	No <input type="checkbox"/>		No <input type="checkbox"/>	
	Yes <input type="checkbox"/> When did you start getting it?		Yes <input type="checkbox"/> When did you start getting it?	
	<input type="text"/>		<input type="text"/>	

	Yes	How much do you get?	How often is it paid?	Yes	How much do they get?	How often is it paid?
Pensions						
Former work's pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Ill health pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Industrial Injury / Disablement Pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Occupational pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Pension Credit (Savings Credit)	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
State retirement pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
War Disablement Pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
War Widow's or War Dependant's Pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Widowed Parent's Allowance or Widow's Pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Widow's Allowance or Bereavement Allowance	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Widow's pension	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Benefits and allowances						
Adoption Allowance	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>
Attendance Allowance	<input type="checkbox"/>	£	<input type="text"/>	<input type="checkbox"/>	£	<input type="text"/>

Part 5 About benefits, tax credits and state pensions (continued)

Carer's Allowance		£			£	
Child Benefit		£			£	
Child Tax Credit		£			£	
Working Tax Credit		£			£	
Disability Living Allowance						
Personal Independence payment:						
Mobility Component		£			£	
Care Component		£			£	
Disabled Persons Tax Credit		£			£	
Employment and Support Allowance - contribution based		£			£	
Exceptionally Severe Disablement Allowance		£			£	
Fostering Allowance		£			£	
Guardian's Allowance		£			£	
Jobseekers – contribution-based		£			£	
Maternity Allowance		£			£	
Severe Disablement Allowance		£			£	
Universal Credit		£			£	
Any other benefit, pension or money from the government		£			£	

Part 6 Income other than earnings

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 7

Yes Answer the questions on this page. Please put a line through any boxes that do not apply to you or your partner.

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

	You			Your partner		
	Yes	How much do you get?	How often is it paid?	Yes	How much do they get?	How often is it paid?
Private pension one paid by		£			£	
Private pension two paid by		£			£	
Maintenance for you		£			£	
Maintenance for your child – including CSA		£			£	
Maternity pay/paternity		£			£	
Payments from a charity						
Payments from boarders		£			£	
Pension Protection Fund Payments		£			£	
Student grant or loan		£			£	
Weekly amount from letting or sub-letting part of a property (lodger)		£			£	
Youth Training Scheme payment or Training Credits		£			£	
Any other income, for example, redundancy or Loan Protection Payments (please give name)		£			£	

We must see evidence of any money or pension coming in before we can decide how much benefit you can get.

Part 7 About working for an employer

You

Your partner

Do you or your partner work for an employer?

No Go to Part 8

Yes Answer the questions in this part.

No Go to Part 8

Yes Answer the questions in this part.

Do you work for more than one employer?

No

Yes

No

Yes

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

If you are sending a separate sheet of paper, tick this box.

What kind of work do you do?

What is your employer's name and address?

Postcode

Postcode

When did you start this job?

How much do you get paid before tax and National Insurance are taken off?

£

£

How often do you get paid?

Every

Every

How are you paid?

For example, in cash, by cheque or straight into a bank or building society account.

How many hours a week do you usually work?

Give details of any regular overtime, bonuses, commission or tips.

£

£

Are you getting Sick Pay, Maternity Pay, Paternity Pay or Adoption pay from your employer at the moment?

No Yes

No Yes

When did it start?

When do you return to work?

Do you pay into a private or company pension scheme?

No Yes

No Yes

If yes, how much?

If yes, how much?

£

£

How often?

How often?

Every

Every

Part 7 About working for an employer (continued)

IMPORTANT

Proof of pay we need to see

You need to provide proof of any pay or we cannot deal with your claim. We do not need this proof if you get Income Support or income-based Jobseeker's Allowance, Minimum Income Guarantee or Pension Credit (Guarantee Credit).

- If you are just starting work, please ask us for an estimated earning form.
- If you or your partner are from the UK and have been working for a while, we will need to see your:
 - last five wage slips if you are paid weekly;
 - last three wage slips if you are paid every two weeks;
 - last two wage slips if you are paid every four weeks; or
 - last two wage slips if you are paid monthly.
- If you do not have these wage slips please ask us for a certificate of earnings form.
- If you or your partner are from outside of the UK, we will need to see your wageslips that cover the last 13 weeks.

Part 8 About being self-employed

You

Your partner

Are you or your partner self-employed?

No

Go to Part 9

No

Go to Part 9

Yes

Answer the questions on this page and complete a self-employed income information form available from Boston Borough Council.

Yes

Answer the questions on this page.

- If you have been self-employed for at least 12 months, we will need to see the accounts for the last financial year. We will also need to see bank accounts, tax assessments, daybooks and any other evidence of trading activities.
- If you have been self-employed for less than 12 months, we will need to see estimates of the accounts with details of any trading which has taken place since you became self-employed. We have a self-employment form you must fill in. Please ask us for one.

What kind of work do you or your partner do?

When did the business start?

What is the name and business address?

Postcode

Postcode

Are you or your partner a Director of the business?

No

Yes

No

Yes

Are there any other partners in the business?

No

No

Yes

Tell us their name and address.

Yes

Tell us their name and address.

Postcode

Postcode

Part 8 About being self-employed (continued)

How many hours a week do you or your partner usually work?

Do you or your partner get a Business start-up allowance?

No Yes If yes, how much?

£

How often?

Every

No Yes If yes, how much?

£

How often?

Every

No Yes If yes, how much?

£

How often?

Every

No Yes If yes, how much?

£

How often?

Every

Part 9 About any other work

You

Your partner

Do you or your partner do any other work?

No Go to Part 10

No Go to Part 10

This could be voluntary work, therapeutic work or any other work.

Yes Answer the questions on this page.

Yes Answer the questions on this page.

What other work do you or your partner do?

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

Postcode

Postcode

When did you or your partner start this work?

How many hours a week do you or your partner usually work?

Do you or your partner get paid for this work?

No Yes If yes, how much?

No Yes If yes, how much?

£

£

How often?

How often?

Every

Every

We must see evidence of any earnings before we can decide how much benefit you can get.

Part 10 Capital

You must answer every question in this section unless you get Income Support, Jobseekers Allowance (income-based), Guarantee, Pension Credit (Guarantee Credit). If you get any of these, go to Part 11.

You must tell us about all bank and building society accounts (even if overdrawn), shares, investment trusts, unit trusts, land, property, investments and other assets.

Bank and building society accounts

Do you or your partner have any bank or building society accounts (even if overdrawn)?

No

Go to the next question below called 'Cash'.

Yes

Tell us about every account in the table. Read these notes first.

- You must tell us about the balance in all accounts (held by you and your partner).
- Make sure the account has been brought up to date with the latest interest.
- We must be able to see the account number, your name and address on the documents you provide

Name of the bank or building society	Account number	Balance in account £	Name of account holder

PLEASE ENSURE YOU HAVE PROVIDED THE LAST 2 MONTHS (8 WEEKS)
BANK STATEMENTS UP TO THE DATE YOU FIRST CONTACTED US

Cash

Do you or your partner keep any of your savings as cash?

No

Go to the next question below 'Premium Bonds'.

Yes

Tell us how much you and your partner have in cash savings.

You

Your Partner

Premium Bonds

Do you or your partner keep any Premium Bonds?

No

Go to the next question.

Yes

Tell us how many you and your partner have.

You

Your Partner

- You must give us proof of the number of Premium Bonds held. (You must send us each certificate, not just the bond holder number).

Part 10 Capital – continued

National Savings Certificates

Do you or your partner have any National Savings Certificates?

No Go to the next question below 'Shares, unit trusts, investments trust...'

Yes Tell us how much you and your partner have in National Savings Certificates here.

Certificate issue number	Number owned	Who do they belong to?	Have you provided the proof we need?
			<input type="checkbox"/> Yes <input type="checkbox"/> To follow
			<input type="checkbox"/> Yes <input type="checkbox"/> To follow
			<input type="checkbox"/> Yes <input type="checkbox"/> To follow

Shares, unit trusts, investment trusts, bonds, stocks, PEPs, ISAs

Do you or your partner have any shares, unit trusts, investment trusts, bonds, stocks, Personal Equity Plans (PEPs), Individual Savings Accounts (ISAs) or any bonds or stocks?

This can include free shares, windfalls, inherited investments and other investments.

No Go to the next question below 'property or land and other investments and assets'.

Yes Tell us about it here

- We need to see proof of your investments such as the latest statements, dividend mandates and certificates.
- Make sure the investment has been brought up to date with the latest interest credited to the account.
- We can only accept original documents, not copies.

Name of the company, trust, or investment	When were they bought or received	How many shares or units are owned	Whose name is the investment in? (Yours, your partner's both or any other names)	Have you provided the proof we need?
				<input type="checkbox"/> Yes <input type="checkbox"/> To follow
				<input type="checkbox"/> Yes <input type="checkbox"/> To follow
				<input type="checkbox"/> Yes <input type="checkbox"/> To follow
				<input type="checkbox"/> Yes <input type="checkbox"/> To follow

Property or land and other investments and assets

Do you or your partner own or have any property, land, timeshare or interest in any other investments or assets in this country or abroad?

(Do not count the home you are claiming for.) No Go to part 11.

Yes Tell us about it here and complete a land and property valuation form available from Boston Borough Council Revenues and Benefits department.

Part 11 About rent

Do you rent your home?

No Go to Part 12 Yes Answer all the questions in this section.

Do you pay rent to Lincolnshire Housing Partnership?

No Answer the questions below Yes Go to Part 12

How much is the rent for your home?

£

Every

For example, every week/fortnight/four weeks/month)

What date did your tenancy start?

What is your landlord's name and address?

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

Postcode Telephone no.

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 Telephone no.

Sharing details with your landlord or agent

Do you agree that we can share information about the progress of your claim, and the result, with your landlord or managing agent?

No If you decide later that you do agree, just tell us in writing

Yes Please sign below. This means we can tell your landlord or agent where your claim is up to. We will NOT give your landlord or agent any information about:

- your personal or household circumstances
- your financial circumstances

I agree that the benefits service can share information about the progress of my claim, and the result, with my landlord or managing agent.

Your signature

Are you, your partner, or any of you or your partner's children related to your landlord or agent, or to your landlord or agent's partner?

No Yes If yes, what is the relationship?

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.

is my landlord or agent's

What sort of tenancy do you have?

For example shorthold or assured tied rent.

How long is the tenancy for?

For example, life, six months, etc.

Are you living away from home at the moment?

No Yes Tell us why you are not living at home.

Part 11 About rent (continued)

When did you last live at home?

When do you expect to go back home?

Tell us the address of where you are living at the moment.

Postcode

If your home has been sublet, tell us who lives there now.

Are you or your partner a director, shareholder or employee of your landlord?

No Yes

Have you or your partner owned your current home in the last five years?

No Yes

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

No Yes If yes, tell us their names and their relationship to you and your partner.

How much of the rent do you pay?

£

Every

For example, every week/fortnight/four weeks/month)

Before we can decide how much benefit you can get we must see your tenancy agreement. If you do not have a tenancy agreement you can ask us for a Landlord enquiry form that your landlord will need to fill in.

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

No Yes

Are there any weeks when you do not have to pay rent?

No Yes If yes, how many in a year?

Are you behind with your rent?

No Yes If yes, by how many weeks?

Does your rent include money for the following?

No Yes

Meals

No Yes If yes, which meals are included? All Breakfast Evening

Water authority charges

No Yes

Heating

No Yes

Lighting

No Yes

Part 11 About rent (continued)

Hot water	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	
Fuel for cooking	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	
Is anything included or separate from your rent that you have not already told us about?	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	If yes, what is it?

Part 12 About where you live

What sort of building do you live in?

Tick **one** box only.

Detached house	<input type="checkbox"/>	Flat in a house	<input type="checkbox"/>	Caravan, mobile home or houseboat	<input type="checkbox"/>
Semi-detached house	<input type="checkbox"/>	Flat in a block	<input type="checkbox"/>	Board and lodgings	<input type="checkbox"/>
Terraced house	<input type="checkbox"/>	Flat over a shop	<input type="checkbox"/>	Hotel	<input type="checkbox"/>
Maisonette	<input type="checkbox"/>	Bedsit or rooms	<input type="checkbox"/>	Residential nursing home	<input type="checkbox"/>
Bungalow	<input type="checkbox"/>	Hostel	<input type="checkbox"/>	Residential care home	<input type="checkbox"/>
Detached bungalow	<input type="checkbox"/>				

Other (please specify what)

Has your home been built or adapted for people with disabilities? No Yes

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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedsitting room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathrooms or shower rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separate toilets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are these other rooms?

Part 12 About where you live (continued)

Do you have a bedroom which is used overnight by someone who cares for you or your partner but does not live at your address?

No

Yes

If yes, what is their name and address?

Postcode

Do you have a main home somewhere else?

No

Yes

If yes, what is the address?

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

Postcode

Do you use your home for business purposes?

No

Yes

Part 13 Anything else you need to tell us

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

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

Part 14 Backdating

We can usually award benefit from the Monday after the day we get 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 before. We are only able to backdate claims for up to one month for working age claimants, and up to three months for pensionable age claimants.

Tell us the date you want to claim benefit from.

Tell us all the reasons why you could not claim before today.

Part 15 How we will pay your Housing Benefit if you qualify

Paying you

The Local Housing Allowance (LHA) rules mean we must normally pay your benefit to you, not your landlord. You must make arrangements to pay your rent to your landlord yourself. We make payments in arrears (in other words, at the end of the period they are for). This will be every four weeks.

We will pay your benefit into **your bank or building society account**. This is the safest and easiest way to receive your benefit.

1. Please fill in your bank or building society details in the box below. We **can't** pay your benefit into a post office card account.

Your bank or building society details

Name of the bank: _____

Address of the branch: _____

Postcode: _____
Name account is in (as on your statement): _____

Roll number (if a building society): _____

Account number: _____
Branch sort code: _____

Please note:

We can't pay **you** if you owe your landlord at least eight weeks' rent. We must pay your landlord.

In some circumstances, we may decide to make the first payment to your landlord. We will also write to your landlord to tell them we are making the first payment to them. After this we will pay you.

If you do not already have a bank account, you will need to open one. We can give you advice about this. If you think you may need help managing your benefit and paying your rent to your landlord, we can give you details of where to get advice.

We can only pay your Housing Benefit straight to your landlord in the situations below. If any of these apply, please tick the box and give any details we ask for. We can only pay benefit straight to landlords every four weeks, not every two weeks.

- Your landlord is a **housing association** registered with the Homes and Communities Agency.
- You live in **board and lodging, hostel or supported accommodation**
- You have **difficulty managing your finances** or you are **unlikely to pay your rent**

If you will not be able to pay your rent to your landlord because you cannot manage your own money, we can decide to pay your landlord. We may do this if you have:

- a learning difference or a medical condition that affects how you manage your day-to-day affairs
- an addiction to drugs, alcohol or gambling
- any other problems that affect your ability to deal with your finances

Tick the box below and give the extra details to ask us to pay your landlord. You **must** tell us why you cannot deal with your finances. We **will not** pay your benefit to your landlord if your only reason is that you have no bank account.

Make sure you have given us your daytime phone number in **part 1** of the form on page 1 in case we need more information. If you have a support worker who helps you, please give us their details in the form as this may help us to deal with your claim more quickly.

Tick here if you want us to pay your landlord.
I have difficulty managing finances. I will not be able to pay my rent to my landlord because:

benefit straight to your landlord if so.

Tick if you owe more than eight weeks rent and say how much you owe.

£

Paying straight to your landlord instead

Part 16 Declaration

Even if someone else has partly or fully filled in this form for you, you **MUST** sign this declaration if you can. If you have a partner it would be helpful if they sign below to confirm that all the details about them are correct.

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

I understand the following

- If I give information that is incorrect you may take action against me. This may include court action.
- You will use the information I have provided to process my claim/application for Housing Benefit and/or Council Tax Support or to assess any discount or grant for council services. You may check the information with other sources as the law allows.
- You may use my information as detailed in the Privacy Notice on page one.

I must let the council's benefit section know immediately in writing about any change in my circumstances or the circumstances of anyone living with me which might affect my claim/application. If I do not you may take action against me. This may include court action.

For Housing Benefit I must notify the change of circumstances within 1 calendar month of the date the change occurred.

For Council Tax Support I must notify the change of circumstances within 21 days of the date the change occurred. Failure to do so may incur a penalty of £70 which may be added to my council tax account.

The change must be notified to the designated office, Boston Borough Council, Housing Benefit and Council Tax Support Office, Municipal Buildings, West Street, Boston, Lincolnshire, PE21 8QR.

I declare that this is my claim for Housing benefit and/or Council Tax Support and that the information I have given on this form is correct and complete to the best of my knowledge. I authorise the council to make any necessary enquiries to check that the information is true and correct.

I have read and understood this declaration and my responsibilities in reporting any changes in my circumstances to the council.

Signature of person making the claim/application

Date

Partner's signature

Date

If this form has been partly or fully filled in by someone who is not the person making the claim/application, please tell us why you are filling in this form for the person claiming/applying.

As far as possible, I have confirmed with the person making the application that the answers I have written on this form are correct. If I am making this claim/application on behalf of the above person, I understand that I am liable for what I have written on the form and accept that the declaration applies to me.

Name of the person who filled in the form

Signature of the person

Relationship to the person making the claim/
application

Date

Telephone

Change in circumstances

You need to report any changes in circumstances to us, these changes can include:

- Your Income Support, Jobseeker's or Universal Credit ending
- Starting or stopping work
- Increases or decreases in your regular earnings
- Tax Credits, stopping, starting, increasing or decreasing
- Other Social Security benefits stopping, starting, increasing or decreasing
- Changes in maintenance being received
- Inheriting or receiving any land, property, investments, assets or other capital (over £250)
- Winning the Lottery, the pools or other cash prizes (Over £250)
- Moving address
- A partner moving in or moving out
- A dependent child joining or leaving your household or a newborn child
- Increases or decreases in any unearned income
- Private tenants, boarders, lodgers and housing association tenants must notify changes to the rent (for example rent Increases or decreases)
- Dependent children leaving education to start work
- Pension payments starting, stopping, increasing or decreasing
- Death of claimant, partner or children included in the claim
- Other people living in your home who join, or leave your home
- Changes in the circumstances of other people (non-dependants) living in your home (including changes in their income).
- And any other change in your circumstance that is not mentioned above

Once you claim housing and council tax benefit you are responsible for notifying any change in circumstances that could affect the information originally provided on your claim form. It could affect the amount of benefit granted.

Reporting your change in circumstances

Customer details

Name

Address

Postcode

Telephone

Email

Date of change

What the change is

Customer signature

Date

Officers signature

Date