

# Benefit Review Form



Please could you complete all the sections below

## To be completed by the Local Authority

First Names:

Surname:

Address:   
  
  
 Post Code

NINO:

Ben. ref.

Telephone number:

## To be completed by the claimant

If any of the above details are incorrect then please complete the section below with the correct details

First Names:

Surname:

Address:   
  
 Post Code

NINO:

Ben. ref.

What date did you move to this address?  /  /

What date did your tenancy end at your previous address?  /  /

Do you?

Own your home or pay a mortgage

Pay rent to a housing association

Pay rent to a private landlord

## Section 1 - Household Composition

Please list the names of everybody who normally lives with you. If none, please write "none".

Name	Relationship to you	Date of Birth	Income/Amount
<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"/>

If anyone has moved in or out of your household or there has been any change in their income, please tell us the date of the change  /  /

Do you or your partner pay any childminding costs for a child/children? Yes  No

If **yes** please advise us of the name and registration number of the minder.

How much do you pay per week (we need to see proof of this) £

## Section 2 - Benefit

Please give details of all benefits received and how often it is received (eg weekly, four weekly, monthly etc). If none please write "none".

Type	Amount	How Often
<input type="text"/>	£ <input type="text"/>	<input type="text" value="every"/>
<input type="text"/>	£ <input type="text"/>	<input type="text" value="every"/>
<input type="text"/>	£ <input type="text"/>	<input type="text" value="every"/>
<input type="text"/>	£ <input type="text"/>	<input type="text" value="every"/>
<input type="text"/>	£ <input type="text"/>	<input type="text" value="every"/>

If your benefit(s) have changed please tell us the date the change(s) happened

## Section 3 - Earnings

Please give details of all earnings received and how often it is received (eg weekly, four weekly, monthly etc). If none please write "none".

Name of employer	Address of employer	Amount	How Often
<input type="text"/>	<input type="text" value="Post Code"/>	£ <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="Post Code"/>	£ <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="Post Code"/>	£ <input type="text"/>	<input type="text"/>

If you have recently started work or your earnings have changed please tell us the date the change happened

If you have started self-employment please tick the box below and tell us the date you started work. We will contact you about this separately.

Date:

## Section 4 - Other Income

Please give details of all income received and how often it is received (eg weekly, four weekly, monthly etc). Income includes things like Tax Credits, maintenance, private pensions, student grants etc. If none please write "none".

Type Of Income	Amount	How Often
<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"/>

If your income(s) have changed please tell us the date the change(s) happened

## Section 5 - Savings / Capital

Please give details of all bank accounts, building society accounts, investments, shares, property, land etc. If none please write "none". In the case of bank, building society or Post Office accounts, please supply statements for the past two months (this applies even if the account is empty or if the amounts held vary).

Type	Details of account(s) / address of property or land	Amount
<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"/>

If your savings have changed please tell us the date the change(s) happened  /  /

If you need to tell us about other savings, use a separate sheet of paper. **If you are sending a separate sheet of paper, tick this box**

## Section 6 - Rent

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)

  
  
  
 Post Code

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)

  
  
  
 Post Code

Are you, your partner, or any of your partner's children related to your landlord or agent, or the agent's partner? (*Related* includes related through marriage, even if the marriage has ended)

Yes  No

What is the relationship:

is my landlord's or agent's

When did you start renting your home?  /  /

When did you move to this address?  /  /

What sort of tenancy do you have? (for example, shorthold, assured tied rent)

How long is the tenancy for?  to

What is the property let as?   
 Furnished  Partly furnished   
 Hardly any furniture  Unfurnished

How do you pay your rent? eg D/D; cash; cheque:   
 standing order

## Section 6 - Rent (continued)

How much rent do you pay and how often?

£  every

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

Yes

No

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

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

£  every

Has your rent changed in the last 12 months? Yes

If yes, please send proof

No

When is the next rent increase due?

/  /

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

Yes

Please let us see the notice registration form **RO5**

No

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

Yes

No

How many in a year?

Are you behind with your rent?

Yes

No

By how many weeks?

Does the rent include any of the following? Please tick yes or no. Enter the amount if yes.

**Please enter the exact amount if applicable**

	Yes	No	£		Yes	No	£
Council Tax	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Laundry service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Water charges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Laundry facilities for your tenants use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Alarm System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Heating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Medical Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Hot water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Lift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Warden service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Please say what services the Warden provides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Cleaning of areas other than your rooms (such as communal lounge)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Other services (for example gardening). Please say what they are.	<input type="text"/>		
Lighting of areas other than your tenants rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Supporting People Charge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Does your rent include meals?

Yes

No

If **Yes**, which meals and how much do you pay for these meals in your rent?

Breakfast

£

Lunch

£

Evening Meal

£

## Section 6 - Rent (continued)

Are you living away from home at the moment? **Yes**  Tell us about it below **No**

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?

Have you sublet your home?

**Yes**

**No**

If yes who lives there now?

Do you have a tenancy agreement? **Yes**

Please have your current tenancy agreement ready (a copy will not be accepted)

**No**

You and your landlord must complete a Private tenants Proof of Rent form.

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

What is your Council Tax reference number?

## Section 7 - About where you live

What sort of building do you live in? (Tick one box only)

Detached house

Semi-detached house

Terrace house

Maisonette

Detached bungalow

Semi-detached bungalow

Flat in a house

Flat in a block

Flat over a shop

Bedsit or rooms or a studio flat

Chalet

Hostel

Caravan, mobile home or houseboat

Board and lodgings

Residential care/ nursing home

Hotel

Please give details of other

Does your home have central heating? **Yes**  **No**

Does your home have a garden? **Yes**  **No**

Does your home have a garage? **Yes**  **No**

Does your home have parking space? **Yes**  **No**

How many floors are there?

Do you and your household occupy only part of the building you have ticked?

**Yes**

**No**

Where in the building do you live?

Front

Middle

Back

Which floors do you live on?

For example, ground floor, first floor

## Section 7 - About where you live (continued)

How many rooms are there in the building?

	In the whole building	Just for you and your household	That you share
Living rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bedrooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bed-sitting rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Kitchens	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms or shower rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
Separate toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other rooms	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you use your home for business? **Yes**  **No**

Do you have a main home somewhere else? **Yes**  Tell us about it below **No**   
 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?

<input type="text"/>
Postcode

Do you pay rent on this home? **Yes**  **No**  If yes, how much? £

## Section 8 - Payment of Housing Benefit

If your landlord is a Registered Social Landlord (Housing Association) please complete **section 9**. **You do not need to complete section 10.**

If you are making a new claim or you have moved address and will therefore fall under Local Housing Allowance go to **section 10**. **You do not need to complete section 9.**

## Section 9 - Payment of Housing Benefit (existing claims)

If you are entitled to Housing Benefit, there are 2 ways in which the Council can pay benefit to you. Please tick which way you would like your benefit paid.

1. Straight into **your** bank or building society account (payment by BACS)  Fill in your details (**number 1**) in **section 11**.
2. Straight into your **Landlord's** bank or building society account (payment by BACS)  Fill in your Landlord's details (**number 2**) in **section 11**

If you want the Council to pay your Housing Benefit direct to your landlord, please enter your name and address on Section A of the separate Paying Benefit to your Landlord form and then pass this form to your landlord to complete Section B. This form must then be returned to the Council. Please note that we will not be able to pay your landlord until this form has been returned.

## Section 10 - Payment of Housing Benefit (Local Housing Allowance)

If you are in receipt of Housing Benefit (LHA) then payments will be made directly into your bank/building society account (by Bacs). Please fill in the Tenant bank/building society details (**number 1**) in section 11.

Under Local Housing Allowance you cannot choose to have your payments sent directly to your landlord, but the Council does have the discretion to do this where certain criteria are met. In general, direct payments will only be made to landlords where the tenant is deemed to be vulnerable.

If you consider yourself a vulnerable tenant then please tick the box (a vulnerability application form will be sent to you on receipt of this claim)

Payments can be made to your landlord (by Bacs) while your vulnerability application is being considered therefore please complete the Landlord bank/building society details (**number 2**) in section 11. You will also need to enter your name and address on a separate Paying Benefit to your Landlord form and then pass this form to your landlord to complete Section B. This must then be returned to the Council. We will not be able to pay your landlord until this form has been returned.

Please note that you still have to complete the Tenant bank/building society details (**number 1**) in section 11 as we will need this if your vulnerability application is unsuccessful.

**For further information on Local Housing Allowance please see the enclosed leaflet.**

## Section 11 - Housing Benefit payment details

### 1. Tenant bank/building society details

What name or names is the account in?

Name and address of Bank or Building Society

Sort code

 --  -- 

Account number

Type of account – for example, current, deposit.

### 2. Landlord bank/building society details

What name or names is the account in?

Name and address of Bank or Building Society

Sort code

 --  -- 

Account number

Type of account – for example, current, deposit.

**If you have any problems with this, please contact the Benefits Team.**

## Sharing information with your landlord

Sharing information with your private landlord could help us deal with your claim more quickly and reduce the risk of you falling behind with your rent because of your claim being delayed.

We may need to confirm information with your landlord before we can make a decision on your claim, for example, the start date of your tenancy. In these circumstances, we can contact your landlord without your permission.

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, or
- 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.

## Sharing information with your landlord (continued)

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 Eden District Council 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

Date

Post Code

## Other Information

Please tell us about any other changes that have happened since the date of your last claim. (This date is shown in Section 1 on the front of this form).

This form was wholly / partly completed by:

Date:

## Your Declaration

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

**I understand the following:**

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

I know I must let the Council know about any changes in my circumstances, which might affect my claim.

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

Signature of person claiming:

Date:

Signature of partner:

Date: