



HOUSING BENEFIT AND COUNCIL TAX BENEFIT CLAIM FORM

Midlothian Council, Buccleuch House, P.O. Box 12956, Dalkeith, Midlothian EH22 1YB



! You must return this form to us as soon as possible even if you are waiting for proof of your income, rent or any other details. If you do not you may lose some benefit.

Before filling in this form you must read the instructions in the enclosed booklet

When you have read them please fill in this form with **black** ink.

FOR OFFICIAL USE ONLY:	
Date of first contact:	
Date of issue:	
To be returned by:	
Benefit Reference:	

(Please tick one box)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Council Tenant	Registered Social Landlord/ Housing Association Tenant	Private Tenant	Homeless	Owner Occupier	Second Adult Rebate

Please tick all the boxes that apply to you or your partner

Aged under 60	<input type="checkbox"/>	Change of address	<input type="checkbox"/>	Student	<input type="checkbox"/>
Aged 60 & over	<input type="checkbox"/>	Income Support/Guarantee Credit	<input type="checkbox"/>	Self employed	<input type="checkbox"/>
New Claim	<input type="checkbox"/>	Income-based JSA or Income-related ESA	<input type="checkbox"/>	Joint Tenant	<input type="checkbox"/>

Part 1 About you and your partner

Do you have a partner who normally lives with you? No Yes

By partner, we mean someone you are married to or live with as if you are married, or a civil partner or a person you live with as if you are civil partners. If you have a partner, you must answer all the questions about them, as well as yourself.

	You	Your Partner
Surname or family name	<input type="text"/>	<input type="text"/>
Other names	<input type="text"/>	<input type="text"/>
Any other names you have used	<input type="text"/>	<input type="text"/>
Title (Mr, Mrs, Ms, other)	<input type="text"/>	<input type="text"/>
Address, including room number if you have one Do not tell us your partner's address if it is the same as yours.	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Postcode	Postcode
What date did you move to this address?	<input type="text"/>	<input type="text"/>
Your daytime phone number	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>	<input type="text"/>
National Insurance (NI) number	Letters <input type="text"/> <input type="text"/> Numbers <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 <input type="text"/>	Letters <input type="text"/> <input type="text"/> Numbers <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 <input type="text"/>
	If you do not have a National Insurance number, tick this box <input type="checkbox"/>	If your partner does not have a National Insurance number, tick this box <input type="checkbox"/>





Part 1 About you and your partner - continued

⚠ Proof: National Insurance number and identity

We need to see proof of National Insurance number and identity **for both you and your partner**.
 Please provide one **original document** for National Insurance number and one **original document** for identity from the list below. These must not be photocopies.
 Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

National Insurance number

- P45
- P60
- Award letters from the Department for Works and Pensions
- National Insurance number card
- Pay Slips
- Tax Credit Award letters

Identity

- Current Passport
- European Member State Identity Card
- Home Office letter
- Birth Certificate
- Driving Licence
- Marriage Certificate
- Divorce or Annulment papers
- Medical Card
- Current bank statements
- Recent Gas, Electricity, Water or Telephone Bill (not mobile telephone) paid in your or your partner's name
- Life assurance or insurance policies
- Letter from a Solicitor, Social Worker or Probation Officer
- Certificate of Employment in HM Forces or Merchant Navy

You

Your Partner

If you or your partner have moved home in the last 12 months, tell us your last address if it is different from overleaf.

Postcode

Postcode

Tell us whether you were the home owner, a private tenant, a council tenant or a lodger at this address.

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

No
Yes Please tell us about it below.

No
Yes Please tell us about it below.

When did your last claim end?

/ /

/ /

Which council did you claim from?

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What name did you use for the claim?

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--

What address did you claim from?

Postcode

Postcode

If you moved from this address, have you told the council you claimed from?

No
Yes

No
Yes

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.

What is your nationality?

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If your nationality is not British, on what date did you last enter and apply to stay in the UK?

/ /

/ /

The UK is England, Northern Ireland, Scotland and Wales.



Part 1 About you and your partner - continued

You

Your Partner

Are you or your partner in hospital at the moment?

No
Yes Please tell us about it below.

No
Yes Please tell us about it below.

When did you go in?

When will you come out, if you know this?

Do you or your partner get, or have recently applied for Disability Living Allowance?

No **Applied**
Yes

No **Applied**
Yes

Do you or your partner have a vehicle from a Motability Scheme?

No
Yes

No
Yes

Do you or your partner get, or have recently applied for Attendance Allowance?

No **Applied**
Yes

No **Applied**
Yes

Does anyone get Carer's Allowance for looking after you or your partner?

No
Yes

No
Yes

If Yes, what is the name and address of your carer and your partner's carer?

Postcode

Postcode

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

No
Yes How much do you pay and how often?

No
Yes How much do you pay and how often?

Are you or your partner a student?

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

No
Yes Tell us if this is full or part time.

No
Yes Tell us if this is full or part time.

Full time Part time

Full time Part time

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

Please tick if you or your partner consider that you are

- an apprentice
- on youth training
- in legal custody
- severely mentally impaired
- registered blind
- long-term sick or disabled

-
-
-
-
-
-

Part 2 About children

We need to know about any children in your household who you or your partner receive Child Benefit for and who are:

- under 16,
- aged 16 or 17 and registered for work or youth training, or
- aged under 20 and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ (advanced).

Are there any children in your household as described above? **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 and send it with the form.

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" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
The child's relationship to you	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child's 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"/>
Child Benefit number	<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"/>
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 your child get Disability Living Allowance (DLA)?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
	Care <input type="text" value="£"/>	Care <input type="text" value="£"/>	Care <input type="text" value="£"/>
	Mobility <input type="text" value="£"/>	Mobility <input type="text" value="£"/>	Mobility <input type="text" value="£"/>
Do you or your partner pay any childminding costs for this child to a registered childminder, a nursery or an after-school club?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Tell us the name and registration number of the minder.	<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

Proof: Child Benefit, DLA and Child Care Costs

We need to see proof that you or your partner are getting Child Benefit or any DLA for children that you have told us about. This proof could be the latest Child Benefit or any DLA award letter or bank statements showing payment. Please provide **original documents** only. These must not be photocopies. Do not send valuable documents through the post. These can be taken to Buccleuch House, where they will be photocopied and returned to you immediately.

We need to see proof of your Child Care Costs. Please provide

- Contract of Child Care
- Receipts for payments made
- Child Minder / Nursery Care Commission Registration number
- If you do not have these, contact Revenues Unit and we will send you a Child Care Expenses Form.

Part 3 About other people who live with you

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

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

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.

Do any adults usually live with you and your partner? **No** Go to **Part 4**.

Yes Fill in this section.
By adults we mean people over 16 who nobody gets Child Benefit for.

	First Person	Second Person	Third Person
Last name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other names	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Date of birth	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>
National Insurance (NI) number	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>	Letters <input type="text"/> <input type="text"/> Numbers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Letter <input type="text"/>
Their relationship to you or your partner	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

For example, family member, relative, friend, joint tenant, joint owner. This list is not complete.

Do they get Income Support, income-based Jobseeker's Allowance, Pension Credit (Guarantee Credit) or income-related Employment & Support 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 they get Disability Living Allowance or Attendance Allowance?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input style="width: 100%;" type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input style="width: 100%;" type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input style="width: 100%;" type="text"/> a week
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"/> Tell us which? <input style="width: 100%;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which? <input style="width: 100%;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Tell us which? <input style="width: 100%;" type="text"/>
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input style="width: 100%;" type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input style="width: 100%;" type="text"/> a week	No <input type="checkbox"/> Yes <input type="checkbox"/> How much? £ <input style="width: 100%;" type="text"/> a week
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"/> When are they expected to come out? <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
When did they go in?	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>
When will they come out (if you know)?	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>	<input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/> / <input style="width: 33%; text-align: center;" type="text"/>

Part 3 About other people who live with you - continued

	First Person	Second Person	Third Person
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Tell us about their earnings before any deductions. We need to see proof of their earnings.	£ Every	£ Every	£ Every
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Do they have any other income?	No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about it below	Yes <input type="checkbox"/> Tell us about it below	Yes <input type="checkbox"/> Tell us about it below

Make sure they tell us about all other income they have. This includes any benefits or allowances you have told us about on this form and interest from savings and investments.

1. Where does this income come from?			
How much is it before deductions?	£ Every	£ Every	£ Every

2. Where does this income come from?			
How much is it before deductions?	£ Every	£ Every	£ Every

3. Where does this income come from?			
How much is it before deductions?	£ Every	£ Every	£ Every
	We need to see proof of all their income.	We need to see proof of all their income.	We need to see proof of all their income.

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? We call these people partners.	No <input type="checkbox"/>		
	Yes <input type="checkbox"/> Tell us their names below		
		is the partner of	
		is the partner of	

Proof: Income of other people who live with you

Deductions may be made from your benefit because of other people who live with you. The level of any deduction made will depend on their income and circumstances. Please provide proof of all their income. If working we need to see their most recent pay slip. You do not have to provide this proof, but without it we will take the maximum deduction from your benefit.

Please provide **original documents** only. These must not be photocopies. Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

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

	You		Your Partner	
Are you or your partner getting Income Support, income-based Jobseeker's Allowance or income-related Employment and Support Allowance at the moment?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

If 'No', answer the following question, and then go to Part 5.

If 'Yes', when did you start getting it, and then go to Part 11.

/	/
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/	/
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Are you or your partner still waiting to hear about a claim for Income Support, income-based Jobseeker's Allowance or income-related Employment and Support Allowance?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
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If 'Yes', when did you claim?

/	/
---	---

/	/
---	---

Part 5 About Pension Credit

	You		Your Partner	
Are you or your partner getting Pension Credit?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

If 'No', go to part 6.

If 'Yes', answer the questions in this part, then go to part 11.

If 'Yes', which of the following do you get?

The Guaranteed part of Pension Credit	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
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The Guaranteed and Savings part of Pension Credit	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
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The Savings part of Pension Credit	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>
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If you do not know what type of Pension Credit you receive, your pension award letter from the Pension Service will tell you.

Part 6 About being Self-employed

	You		Your Partner	
Are you or your partner Self-employed?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>

If 'No', go to part 7.

If 'Yes', please provide your trading accounts as stated below.

Proof: Self-employed earnings

We need to see proof of Self-employed earnings for you and your partner.

These must be **original documents** and not photocopies.

Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

- Please provide your trading accounts audited or otherwise for the last financial period.
- If you do not have your accounts available, please contact the Revenues Unit.
- Please provide any Partnership Agreement, Business Start-up Allowance award letter and also details of any payment you make towards a Private Pension Scheme.

Part 7 About working for an employer

Do you or your partner work for an employer?

No Go to **Part 8**.

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

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

	You	Your Partner
What kind of work do you do?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
What is your employer's name and address?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	Postcode	Postcode
When did you start this job?	<input style="width: 100%;" type="text" value=" / /"/>	<input style="width: 100%;" type="text" value=" / /"/>
What is your payroll, employee or staff number?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Are you employed for a limited period?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> When will you finish?	Yes <input type="checkbox"/> When will you finish?
	<input style="width: 100%;" type="text" value=" / /"/>	<input style="width: 100%;" type="text" value=" / /"/>
Are you getting Statutory Sick Pay (SSP), Statutory Paternity Pay (SPP), Adoption Pay or Statutory Maternity Pay (SMP) from your employer at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Date this started	Yes <input type="checkbox"/> Date this started
	<input style="width: 100%;" type="text" value=" / /"/>	<input style="width: 100%;" type="text" value=" / /"/>
Are you getting any other sick pay or maternity pay from your employer at the moment?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Date this started	Yes <input type="checkbox"/> Date this started
	<input style="width: 100%;" type="text" value=" / /"/>	<input style="width: 100%;" type="text" value=" / /"/>
How often do you get paid?	<input style="width: 100%;" type="text" value="Every"/>	<input style="width: 100%;" type="text" value="Every"/>
How much do you get paid before tax and National Insurance are taken off?	£ <input style="width: 100%;" type="text"/>	£ <input style="width: 100%;" type="text"/>
How are you paid, for example, in cash, by cheque or straight into a bank or building society account?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How many hours a week do you usually work?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
When was your last pay rise?	<input style="width: 100%;" type="text" value=" / /"/>	<input style="width: 100%;" type="text" value=" / /"/>
When will your next pay rise be?	<input style="width: 100%;" type="text" value=" / /"/>	<input style="width: 100%;" type="text" value=" / /"/>



Part 7 About working for an employer - continued

	You	Your Partner
Do you pay into a private or company pension scheme?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> How much and how often?	Yes <input type="checkbox"/> How much and how often?
	£ every	£ every
Do you get tips or bonuses?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Proof: Earnings

We need to see proof of your and your partner's earnings. These must be **original documents** and not photocopies. Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

- Please provide the last **5** pay slips if paid **weekly**, **3** pay slips if paid **fortnightly** or **2** pay slips if paid **four weekly** or **monthly**.
- If you cannot give us your pay slips you can ask your employer to fill in a Certificate of Earnings Form, included with this form.

Part 8 About any other work

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

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

No Go to **Part 9**.

Yes Answer the questions on this page.

	You	Your Partner
What other work do you do?		
What is the name and address of the person you do this work for?		
	Postcode	Postcode
When did you start this work?	/ /	/ /
How many hours a week do you usually work?		
Do you get paid? If you only get expenses or tips, still tick Yes and give details.	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/> Tell us about it below.	Yes <input type="checkbox"/> Tell us about it below.
	£	£
How often do you get paid?	Every	Every

Proof: Other Work

We need to see proof of any other work you and your partner do. These must be **original documents** and not photocopies. Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

- Please provide the last **5** pay slips if paid **weekly**, **3** pay slips if paid **fortnightly** or **2** pay slips if paid **four weekly** or **monthly**.
- If you do not get paid and your work is voluntary, please provide a letter from your employer to confirm this.
- If you are paid expenses only, please provide proof of this.



Part 9 About Benefits and Pensions

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

No Go to **Part 10**.

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

If you have just applied for any of these benefits and are still waiting to hear, write 'Applied' and the date you applied.

	You			Your Partner		
	How much do you get?	How often is it paid?	How is it paid?	How much do you get?	How often is it paid?	How is it paid?
Adoption Pay						
Armed Forces Compensation Scheme (AFCS)						
Bereavement Allowance						
Carer's Allowance						
Child Benefit						
Child Tax Credit						
Working Tax Credit						
Contribution-based Employment and Support Allowance						
Contribution-based Jobseeker's Allowance						
Fostering Allowance						
Guardian's Allowance						
Incapacity Benefit						
Industrial Injuries Disablement Benefit						
Industrial Death Benefit						
Maternity Allowance						
Severe Disablement Allowance						
State Retirement Pension						
Widowed Parent Allowance						
Widow's Pension						
War Widow's Pension						
War Disablement Benefit						
Any other Social Security Benefits or Pensions						

Proof: Benefits and Pensions

We need to see proof of any benefits and pensions that you and your partner get. Please provide **original documents** only. These must not be photocopies.

- All pages of your latest benefit awards letters.
- Bank statement showing the last 2 payments if paid into bank.

Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

Part 10 About other money coming in

Do you or your partner, or any children you are claiming for, 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 the payments from the Independent Living Fund, the Eileen Trust, the MacFarlane Trust or the Skipton Fund.

This includes:

- Occupational, Works and Private Pensions (**e.g. Mineworker's Pension**)
- Maintenance or Child Support payments for you or any member of your family
- Money from a Trust Fund
- Training allowance
- Student Grant or Loan
- Money you get from people living in your house as Boarders, Lodgers or Subtenants
- Any cash payments
- Annuities

	Other money 1	Other money 2	Other money 3
What is the money for?	<input style="width: 100%; height: 40px;" type="text"/>	<input style="width: 100%; height: 40px;" type="text"/>	<input style="width: 100%; height: 40px;" type="text"/>
Who gets it?	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
How much do they get?	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>
How often?	Every <input style="width: 90%; height: 25px;" type="text"/>	Every <input style="width: 90%; height: 25px;" type="text"/>	Every <input style="width: 90%; height: 25px;" type="text"/>
When did they start getting this income?	<input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/>	<input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/>	<input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/>
When is the income likely to go up?	<input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/>	<input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/>	<input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/> / <input style="width: 30%; height: 25px;" type="text"/>
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 style="width: 100%; height: 40px;" type="text"/>	<input style="width: 100%; height: 40px;" type="text"/>	<input style="width: 100%; height: 40px;" type="text"/>
How much?	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>
Are you or your partner expecting to get any money in the next 12 months. <small>For example, a redundancy payment or a payment instead of notice or holiday.</small>	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 style="width: 100%; height: 40px;" type="text"/>	<input style="width: 100%; height: 40px;" type="text"/>	<input style="width: 100%; height: 40px;" type="text"/>
How much?	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>	£ <input style="width: 90%; height: 25px;" type="text"/>



Proof: Other Money Coming In

We need to see proof of any other money that you and your partner have coming in.

Please provide **original documents** only. These must not be photocopies. The type of proof we need includes

- | | |
|---|---|
| <ul style="list-style-type: none"> • Bank statement showing the last 2 payments if paid into bank. • Student award notice • Court Order • Pension statements from former employer | <ul style="list-style-type: none"> • Child Support Agency letter • Letter from former partner stating maintenance payments • Rental income from other properties |
|---|---|

Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

Part 11 About where you live

Do you own your home, have a mortgage or are you a Council tenant? **No** Go to the next question. **Yes** Go to **Part 13**.

Owners of residential caravans who pay site rent should complete Parts 11 and 12.

Are you a Housing Association tenant? **No** Fill in this section. **Yes** Go to **Part 12**.

Do you live in a caravan, mobile home or houseboat? **No** **Yes**

Do you or your partner have a carer that lives somewhere else, but provides care overnight in your home? **No** **Yes**

We will write for further information if you have ticked yes.

How many floors are there?

Do you and your household occupy only part of the building? **No** **Yes** Where in the building do you live?
 At the front In the middle At the back

Which floors do you live on?
 For example, ground floor, first floor.

How many rooms are there in the building?	In the whole property	Just for you and your household	That you share with other people
Living rooms	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Bedsitting rooms	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Bedrooms	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Bathrooms or shower rooms	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Toilets	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Kitchens	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other rooms	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

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

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

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

Do you have a main home somewhere else? **No** **Yes**

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 style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>
Postcode

Do you pay rent on this other home? **No** **Yes** How much? How often?
 £ Every

P12

Part 12 About rent

Do you pay rent for your home?
 Tick **Yes** if you would pay rent if you did not get Housing Benefit.

No Go to **Part 13**.

Yes You will need to complete this part if you pay rent to a private landlord or Housing Association.

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 their full name and address.
 By agent we mean the person or organisation you actually pay your rent to.

Postcode

Are you or any member of your household or family (including children) related or have previously been related to your landlord or agent or any member of your landlord's or agent's family?

No

Yes If yes, please state what the relationship is or was, and who it is or was between.

For example, wife, husband, aunt, brother, daughter, father, ex-wife, ex-husband, grandson, grandmother, son-in-law or stepdaughter.

--

Are you or any member of your household or family (including children) in a relationship or have been in a relationship with your landlord or agent or any member of your landlord's or agent's family?

No

Yes If yes, please state what the relationship is or was, and who it is or was between. (for example, partner, ex-partner)

--

When did you start renting your home?

/ /

When did you move into this address?

/ /

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

/ /

What sort of tenancy do you have?
 For example, shorthold, assured tied rent, Scottish Secured Tenancy or Regulated.

--

How long is the tenancy for?

/ /

to

/ /

What is the property let as?
 Tick the box that applies.

Furnished **Partly furnished** **Hardly any furniture** **Unfurnished**

How much rent do you pay and how often?

£ every

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

Part 12 About rent - continued

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.

Has your rent changed in the last 12 months?

No

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

When is the next rent increase due?

 / /

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

No **Yes**

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?

Tick the box that applies.

You or your partner

Your landlord

Someone else Tell us who it is

Does your rent include money for the following?

Meals

No **Yes**

How much?

 £ every

For which meals?

Please tick Breakfast

Lunch

Evening meal

Heating

No **Yes**

How much?

 £ every

Lighting

No **Yes**

How much?

 £ every

Hot water

No **Yes**

How much?

 £ every

Fuel for cooking

No **Yes**

How much?

 £ every

Part 12 About rent - continued

Laundry **No** **Yes**
 How much? £ every

Cleaning rooms or windows **No** **Yes**
 How much? £ every

Gardening **No** **Yes**
 How much? £ every

Garage or parking space **No** **Yes**
 How much? £ every

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

Personal care and support **No** **Yes**
 How much? £ every

Do you pay any service charges, for example, for cleaning or lighting in shared areas, an alarm system, a warden, general counselling or support, meals, or lift maintenance? **No** **Yes**
 How much? £ every

What for?

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

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?

 Postcode

Have you sublet your home? **No** **Yes**
 Who lives there now?

Proof: That you rent your home and the amount of rent that you pay

We need to see proof that you rent your home and proof of the amount of rent that you pay.

Please provide **original documents** only. These must not be photocopies.

Proof that you rent your home and the amount of rent paid.

- Your Tenancy Agreement
- Your Rent Book
- Your Licence to occupy your home
- Your Rent Receipts

Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

Part 13 About Bank Accounts, Savings, Investments and Property - continued

Do any of your or your partner's savings or investments include money from the sale of a house or from a charity?

No Yes We will write to you about it.

Apart from your home, do you or your partner own any property or land in this country or abroad?

No Yes We will write to you about it.

If it is on a mortgage or a loan, still tick 'Yes'.



Proof: Bank Accounts, Savings, Investments and Property

We need to see proof of any bank accounts, savings, investments and property that you and your partner have.

Please provide **original documents** only. These must not be photocopies.

These must show the **up to date balance** including interest.

- Bank/Building Society/Post Office books covering **last 2 months**
- Bank/Building Society statements covering **last 2 months**
(Not mini-bank/cash machine statements)
- Letter from Bank/Building Society
- Share Certificates
- Unit Trust Certificate
- National Savings Certificate
- Premium Bonds
- Income Bonds

Do not send valuable documents through the post. These can be taken to Buccleuch House where they will be photocopied and returned to you immediately.

Part 14 How you will be paid

- If you are a **Council tenant**, we will pay any Housing Benefit you are awarded into your rent account. Now Go to **Part 15**.
- If you are awarded **Council Tax Benefit**, we will pay this into your Council Tax account. Now Go to **Part 15**.
- If you rent from a **private landlord** and are making a new claim or you move home after 7 April 2008, we will pay any Housing Benefit you are awarded directly to you under Local Housing Allowance. We may make the first payment of benefit to your landlord if rent arrears have arisen, after that we will pay your benefit to you directly. Complete details of your **bank or building society account** below and then Go to **Part 15**.
- If you rent from a **Housing Association** we can arrange to have any Housing Benefit awarded paid directly to you by completing details of your bank or building society account below and then Go to **Part 15**.

Or, if you would like to have your Housing Benefit paid directly to your landlord please tick this box.

Now fill in the **"Paying benefit to your landlord"** form enclosed with this form and then Go to **Part 15**.

Please note we cannot make payment to Post Office Accounts.

Name of bank or building society:									
Address of bank or building society:									
Name of account holder:									
Your account number:						Your bank's sort code			

Part 17 Checklist/Proof

Your claim will **NOT** be put into payment unless you provide **ALL** the information that we need to work out how much benefit you can be paid.

Please complete the following checklist by ticking the appropriate boxes.

If you have ticked 'To follow' you must provide the documents within one month.

Have you answered all the questions you need to?	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>		
Have you and your partner (if you have one) signed the declaration form? (page 20)	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>		
Proof of Identity (page 2)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of National Insurance Number (page 2)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of Child Benefit and DLA you receive for children (page 4)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of Child Care costs you have (page 4)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of Income for other people who live with you (page 6)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of Self-employed earnings (page 7)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of earnings (page 9)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of any other work (page 9)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of Benefits or Pensions (page 10)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of any Private Pensions and any other money coming in (page 11)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of Rent you pay (Private Tenants) (page 15)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of all Bank, Building Society and Post Office Accounts (page 17)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Proof of any Savings, Investments or Property (page 17)	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>
Are you enclosing Pay Direct to Landlord Form?	Enclosed	<input type="checkbox"/>	To follow	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>

If you are claiming benefit for a new address, have you told Jobcentre Plus or Pension Service that you have moved?

Part 18 Declaration

Data Protection

Midlothian Council will store and use the information about you (and anyone else) which you provide on this form and in any supporting correspondence or documents which you send or give to us ("your information") strictly in accordance with the Data Protection Act 1998.

Midlothian Council will:

- use your information for the specific purpose of processing claims for Housing and Council Tax Benefit and, if otherwise then only to the extent necessary for carrying out any of our statutory functions as a local authority (the "**Permitted Purpose**");
- pass your information to those of our departments that need to know it for the Permitted Purpose. This means that although you send or give this form to one department of the Council, some or all of your information may be passed on to other departments of the Council; and
- pass your information to other organisations outside the Council, if and to the extent that we require to do so for the Permitted Purpose. These other organisations include anyone providing services to the Council in connection with the Permitted Purpose, and any other organisation with which the Council is required to work or co-operate in connection with the Permitted Purpose. Where appropriate these other organisations are named elsewhere on this form.

Unless required or permitted to do so by law, Midlothian Council will not use or disclose your information for any purpose or to any organisation other than those described here, without telling you first.

You can find more information on the Data Protection Act and the rights which you have under that Act on the web site of the Office of the Information Commissioner at www.ico.gov.uk.

Declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a partner, they must sign this declaration too.

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

- **I have read the Data Protection statement above.**
- **I declare that the information I have given on this form is correct 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 know that I must tell you in writing about any changes in my circumstances which might affect my claim.**

Signature of person claiming

Date

 / /

Partner's Signature

Date

 / /

Part 19 Form completed by someone other than the person applying for benefit

If you are filling this form in on behalf of the person applying for benefit, please tell us why.

I **declare** that as far as possible, I have confirmed 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 of the person who filled in the form

Relationship to the person claiming

(e.g friend/relative/agent/advisor)

Date

 / /