



# Argyll and Bute Council

## Housing Benefit and Council Tax Reduction Scheme

Change of circumstances

Date of issue:

### WHAT ARE YOU REPORTING?

<p><u>Have you started work?</u></p> <p>If you have started work or changed employment or hours please complete pages 1 and 2 and sign the declaration on page 7 .</p>	<p><u>Have you changed address?</u></p> <p>If you have changed address please complete pages 1, 3-5 and sign the declaration on page 7.</p>	<p><u>Any other changes?</u></p> <p>If you have any other change in your circumstances please complete page 1 and sign the declaration on page 7.</p>
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Full name:

Address  
*(Old and new if appropriate)*

<u>Old</u>	<u>New</u>
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Telephone number

Benefits claim number

National insurance number

**Please tell us about your change including the date it took place and any other relevant information:**

## Tell us about work

Have you or your partner started work, changed employer and/or hours? Please provide details below.

	YOU	YOUR PARTNER
How many jobs do you have?		
What date did you start work/change your hours/employer?		
What is your occupation?		
What is your employer's name and address?		
How many hours, on average, do you work per week?		

How often are you paid?    Weekly        Monthly        Fortnightly    (please circle)  
 How are you paid?        Cash        Cheque        Direct to bank    (please circle)

*We require five weekly, two monthly or three fortnightly payslips however if you do not have the required number of payslips available please provide what you can and the remainder can be submitted as you receive them.*

Please supply your payroll number		
Have you applied for tax credits? <i>(Please supply the amount you receive weekly)</i>		
If you pay a registered child minder, please supply their registration number and the amount you pay weekly <i>(we will need confirmation of these payments)</i>		

Are you self employed? *(if you are we will contact you for further information)*

Yes:

No:

## Change of address

Your new landlord's name and address:

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Your landlord's telephone number:

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Date you moved in to your new home:

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Start date of your new tenancy:

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Date you left your previous home:

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End date of your previous tenancy:

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What type of property do you live in? *(please tick)*

Flat	Maisonette	Bungalow	House
Bedsit	Room	Other – please state:	

Is the property: *(please tick)*

Terraced	Semi-detached	Detached	Static caravan
Touring caravan			

How many floors are in the building?

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Does your home have central heating?

YES	NO
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Do you have a garage?

YES	NO
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Is your landlord responsible for decorating inside your home?

YES	NO
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Is your home furnished by your landlord?

NO	FULLY	PARTLY
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Please complete the table indicating the number of rooms in your home:

	Living room	Bed-room	Kitchen	Bathroom	Toilet	Bedsit	Other
Number of rooms used by you and your family							
Number of rooms you share with other tenants							
Number of other tenants you share rooms with							
Total number of rooms in property							

**Rent**

How much is your rent?

£

How often do you pay rent?    Weekly    Four weekly    Monthly    (please circle)

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

YES

NO

If yes when are these weeks?

If you are a Housing Association tenant, do you want your benefit paid to your landlord?

YES

NO

**What is included in your rent?** (please provide proof)

Some charges for services such as heating, hot water and meals will not qualify for housing benefit. They must be deducted from your rent if it includes them. If you cannot tell us how much they are we will deduct the standard amounts. Please tick which of these are included in your rent. (next page)

Included in your rent?	If YES please tick	How much do you pay for this service?
Meals		
Heating		
Lighting		
Hot water		
Cooking		
Gas or electricity for cooking		
Cleaning		
Laundry		
Personal care		
General care		

If you receive meals please circle: Breakfast only      Half board      Full board

We may be able to pay benefit for two homes for up to a maximum of four weeks.

If you have been 'HELD TO NOTICE' at your previous address and have to pay rent for both properties you may be entitled to claim benefit.

**Held to Notice:** this section should be completed if you require overlap of housing benefit for your previous address

*Please give reasons and supply proof to support your claim*

If there has been a delay in moving due to adaptations to the property due to adaptations to the property due to disability and you are liable for the rent on both properties or you are waiting for a social fund loan to assist with the removal you may be entitled to claim benefit.

**Prior to moving in:** this section should be completed if there was a delay in moving in to your new home.

*Please give reasons and supply proof to support your claim*

If you have had to move through 'fear of violence' and you intend to return to the property you have left you may be entitled to benefit for both properties.

**Two homes:** this section should be completed if you have had to move through fear of violence.

*Please give reasons and supply proof to support your claim*

## **Declaration**

*(Please read this declaration carefully)*

**This is a change connected to my claim for housing benefit and/or council tax reduction scheme with Argyll and Bute Council. I confirm that as far as I am aware the information I have given on this form is accurate and complete.**

**I give Argyll and Bute Council permission to make any necessary enquiries to check the information on this form. I understand that if I give information that is not correct or complete, or I do not tell the council benefit section about any changes that may affect my benefit then my payments of benefit may be suspended and I may be liable to prosecution.**

**The council is under an obligation to manage public funds properly; accordingly information that you provide will be used to ensure appropriate payment of housing benefit and council tax reduction scheme. The information may be shared with other authorised bodies in order to prevent and detect fraud.**

**This authority operates within Government guidelines of best practice, which means you will in the lifetime of your claim receive a visit or visits from council benefit officers who will wish to verify that the details we hold for your claim are still current and remain unchanged.**

**The officer will formally identify him/herself and will fully explain the procedure to you. Failure to cooperate with this procedure could result in suspension or cancellation of any benefit in payment.**

Your signature

Date:

Your partner's signature:

Date:

## **Housing Benefit and Council Tax Reduction Scheme**

Changes of Circumstances – Guidance notes

### **Page 1 – Complete in full**

**Date of Issue** – to be completed and initialled by member of staff.

Please complete in full:

**Name**

**Old address** - *if you are not reporting a change of address, please complete with your current address.*

**New address** – *to be completed if you are reporting a change of address.*

**Telephone number**

**Benefit claim number** – *this can be found on all correspondence regarding your Housing/Council Tax Benefit.*

**National Insurance number**

**The change I want to tell you about** - *please include the date of change and a detailed description*

### **Page 2 – Complete if your change is work related, otherwise please go to page 3**

Please complete in full:

**How many jobs do you have?**

**What date did you start work / change hours / employer?** – *please circle appropriate change and complete date of change*

**Occupation**

**Employers name & address**

**Usual weekly hours**

**How often are you paid** – *please circle relevant frequency*

**How are you paid** – *please circle relevant method of payment*

**Payroll Number** – *this can be found on your contract/wage slips*

**Tax credits?** - *if yes please confirm how much you receive*

**Child care** – *please provide the child minder's registration number and the amount that you pay*

**Self employed** – *select yes or no*

### **Page 3, 4, 5 & 6 –Complete if you have changed address, otherwise please go to page 7**

#### **Page 3**

Please complete in full:

**New landlords name & address**

**New landlords telephone number**

**Date moved in**

**Tenancy start date** – *as detailed on your new tenancy/lease agreement*



**Date left previous home**

**Tenancy end date** – *for your old address*

**Property type** – *please select from choices available*

**Number of floors**

**Does your new home have central heating** – *select yes or no*

**Do you have a garage?** – *select yes or no.*

**Is your landlord responsible for decorating the inside of your new home?** – *select yes or no*

**Is your home furnished by your landlord?** – *select yes or no*

Page 4

Please complete in full:

**Complete the table indicating the number of rooms in your new home**

**How much is your rent?** – *as detailed on your new tenancy/lease agreement*

**How often do you pay rent?** – *please circle relevant frequency as detailed on your new tenancy/lease agreement*

**Rent free weeks** – *select yes or no, if yes confirm dates*

**Payment to Housing Association** – *select yes or no*

**Services included in rent** – *please select any services that are included within your rent*

Page 5

Please complete in full:

**Meals** – *Please circle any meals that are included in your rent*

**Benefit for two homes**

**Held to notice** – *complete this section if you have moved to your new address and are still being charged rent for your old address (held to notice). Please provide evidence of your tenancy end date from your old landlord*

**Prior to moving in** – *complete this section if there was a delay in moving to your new address. Please provide evidence to confirm why you did not move in to your new home sooner*

Page 6

Please complete in full:

**Fear of violence** – *complete this section if you have had to leave your home due to fear of violence. Please provide evidence to support your reasons*

Page 7 – Declaration

**Please read the declaration carefully and sign and date the form**