



Email: benefits@clacks.gov.uk
Telephone: 01259 450000

FOR OFFICE USE ONLY

Council Tenant / Housing Association Trust / Private
Tenant / Owner Occupier

Benefit Ref No

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Issued

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Received

Council Tax Reduction Form

Please complete this form and return it immediately to the address above or to your nearest local office.

Data Protection Statement

In line with Data Protection legislation and as the data controller Clackmannanshire Council will process your personal information for the purposes of collecting any Council Tax you owe us as per Local Government Finance legislation. The Council has a duty to manage public funds properly. As a result, we will use the information you provide to make sure all amounts we are owed are paid on time (for example by identifying people who have not yet paid their Council Tax and claim benefit they are not entitled to). Revenue Service will also use personal data held for Housing Benefit and Council Tax Reduction purposes to assist in the processing of all claims made for Welfare Benefits and the Scottish Welfare Fund. In addition to the stated purposes, we are also legally obliged to share certain data with other public bodies such as DWP and will do so where the law requires this; we will also generally comply with requests for specific information from other regulatory and law enforcement bodies where this is necessary and proportionate. We may also check your details with other organisations for the purposes of confirming who is living at a particular address. We may also use your information to create management information, including statistical analysis to help combat fraudulent claims and improve customer service and satisfaction. The council maintains a records retention and disposal schedule which sets out how long we hold different types of information for.

You have the following rights:

- To be informed- this right requires us to provide you with certain information when we receive personal data from you.
 - To have access to your personal data
 - To ask us to rectify any inaccurate personal data about you
 - To exercise a limited right to ask that we erase personal data that we use about you
 - To ask us to restrict our use of your personal data until such time as a dispute about accuracy or the Council's use of your personal data can be established
 - To make an objection to us about our use of your personal information based upon your particular circumstances
- If you wish to exercise any of your rights, you should contact the Council's Data Protection Officer on 01259 450000 or email: dpo@clacks.gov.uk

Complaints

If you are dissatisfied about the way we have used or are using or intend to use, your personal data, including where you believe we have not complied with your rights under data protection laws. The commissioner will investigate any complaints and will inform you of progress and the outcome of your complaint

Section 3 - Children who live in your home aged 16 or under

Please list the names of dependant children living with you.

Child 1

Forename

Surname

Date of Birth

 / /

Male/Female

Relationship to you

Child benefit received Yes No

Child 2

Forename

Surname

Date of Birth

 / /

Male/Female

Relationship to you

Child benefit received Yes No

Child 3

Forename

Surname

Date of Birth

 / /

Male/Female

Relationship to you

Child benefit received Yes No

Child 4

Forename

Surname

Date of Birth

 / /

Male/Female

Relationship to you

Child benefit received Yes No

Child 5

Forename

Surname

Date of Birth

 / /

Male/Female

Relationship to you

Child benefit received Yes No

Child 6

Forename

Surname

Date of Birth

 / /

Male/Female

Relationship to you

Child benefit received Yes No

Section 5 - Earnings

Are you working? Yes No

Is your partner working? Yes No

Please give details of all earnings received and how often it is paid. (eg weekly, four weekly, monthly etc)

YOU	
Name and Address of Employer	Name of Employer <input type="text"/> Address <input type="text"/> Town <input type="text"/> Postcode <input type="text"/> <input type="text"/>
Gross 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"/>
Hours Worked	<input type="text"/> <input type="text"/> <input type="text"/>
When paid	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

YOUR PARTNER	
Name and Address of Employer	Name of Employer <input type="text"/> Address <input type="text"/> Town <input type="text"/> Postcode <input type="text"/> <input type="text"/>
Gross 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"/>
Hours Worked	<input type="text"/> <input type="text"/> <input type="text"/>
When paid	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Do You Pay Childminding Costs Yes No

Name of Childminder/Nursery

Address of Childminder Nursery

Town

Postcode

Registration No

How much do you pay?

£

Every

Section 6 - What income do you and your partner have?

Please give details of all unearned income including benefits, pensions and allowances received.
 Details of any benefits, pensions, claimed but not received yet.

	CLAIMANT	PARTNER
Type of Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Amount	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>
How Often	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Type of Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Amount	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>
How Often	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Type of Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Amount	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>
How Often	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Type of Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Amount	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>
How Often	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Type of Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Amount	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>
How Often	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Type of Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Amount	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>	£ <input style="width: 80%;" type="text"/> . <input style="width: 20%;" type="text"/>
How Often	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
How is it paid?	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Your Home

Please tick the box which best describes your home

If it is a **House**, is it Detached Semi-detached Terraced Room(s) in house

If it is a **Bungalow**, is it Detached Semi-detached Terraced Room(s) in bungalow

If it is a **Caravan**, is it Static Tourer Connected to mains services

If it is a **Flat**, is it In a house Over Shop In a block Bedsit Room(s) in hotel or hostel

If you have a bedsit, flat, room(s) in a hotel or hostel, please tick to state where in the property they are:

Front Centre Back Room Number

How many floors are there in the whole building? Floors

What floor(s) are you on? Floors

About Your Home

Please state the total number of rooms in your home. Also state the number of rooms you and your family have to yourselves and the number you share with other tenants and/or your landlord.

	Living Rooms	Bedrooms	Bedsits	Kitchens	Bathrooms	Toilets	Other Rooms
Total number in your home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number used by you and your family	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number you share with other tenants and/or your landlord	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Is your home furnished by your landlord? Fully Partly Not at all

Does your home have central heating? Yes No

Who pays for decorating the inside of your home? You Landlord

Do you have a garage? Yes No

Do you have a garden? Yes No

Do you or your family use any room for business? Yes No

Do you (and your partner) sub-let any rooms? Yes No

If you live in a bedsit do you have cooking facilities and a shower in your room?

Yes No

Your home

How much rent do you (and your partner) pay?

£

How often do you pay this?

EACH

Who do you pay rent to?

Has your rent been registered with the rent officer?

Yes No Don't know

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

Yes No

If yes, please say when:

from / / to / /

What your rent includes

Are any of the following services included in your rent?

If you get a separate bill or the service is not provided tick **No**.

If **Yes**, please also say **how much** it costs (if you know)

	Included	Yes	No	How Much?
Heating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Electricity or Gas for Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Hot Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Council Tax	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cleaning of Rooms and Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Emergency Alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
General Counselling and Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Personal Care and Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Warden	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cleaning of Shared Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Heating of Shared Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Lighting of Shared Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Meals

Are meals included in your rent? Yes No

If **Yes**, how many meals do you get each day? (tick the box which applies)

breakfast only 2 meals each day 3 meals each day

Social Sector Size Criteria

You may be affected if you are deemed to have one or more spare bedrooms. This is known as the "bedroom tax" or under-occupation charge. The reduction will be a fixed percentage of 14% for 1 room and 25% for 2 or more extra bedrooms.

The following will be expected to share:

- every adult couple (married or unmarried)
- any two children of the same sex aged under 16
- any two children aged under 10
- any other child (other than a foster child or child whose main home is elsewhere)

The following can have their own bedroom:

- a single adult (16 or over)
- a child that would normally share but shared bedrooms are already taken, for example you have 3 children and 2 already share
- a child who is disabled and unable to share.
- a carer, who does not live with you, but provides you or your partner with regular overnight care.
- a member of a couple who is prevented from sharing due to a disability.

Discretionary Housing Payments

If you are affected by the size criteria and in receipt of Housing Benefit or Universal Credit (Housing Element), please sign the declaration below in order to apply.

Signature

Date / /

Section 10 - Sharing Information with your Landlord

Sometimes, sharing information with your Landlord helps us to deal with your claim quickly and reduces the risk of you falling behind with your rent because of your claim being delayed. Under the Data Protection Act we need your permission to share information. If you give us permission, we would be able to tell your landlord:

- whether or not you had claimed or renewed your claim for Housing Benefit and, if so, whether we have made a decision on your claim or not; and
- whether we need further information to make a decision on your claim, and if so what information this is.

There may be other information about your claim that we need to check with your Landlord, such as the date your tenancy started, before we can make a decision on your claim. If this is the case, we have to ask your landlord even if you have not given us permission to discuss your claim with them. But unless you have given us permission by signing this form, we will not discuss anything else with your landlord.

We will NOT give your landlord any information about:

- **your personal or household circumstances or your financial circumstances**

If you do not give us permission to discuss your claim with your landlord, it will not affect your claim. If you give us permission but then change your mind, we will follow your wishes. Just contact us to let us know.

If you want to give us permission to discuss your claim with your landlord, please sign below.

I give Clackmannanshire Council permission to share my information about the progress of any Housing Benefit claim with my landlord or their representative.

Signature

Date / /

Section 11 - Declaration

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

- I have read and understood the information Clackmannanshire Council have provided in this form.
- The information I have given in this form is true and complete.
- I understand that Clackmannanshire Council may use the information I have given to prevent fraud and detect crime.
- I understand that I must tell Clackmannanshire Council about any changes in my circumstances or the circumstances of my partner, my children and anyone living with me.
- I will tell you if any details in the letter you send me are incorrect.
- I understand, that under the Data Protection Act, Clackmannanshire Council can give information about my claim to organisations that are listed in the Council's data protection registration. These include government agencies, council departments, HM Revenues and Customs, The Rent Service, other councils and fraud officers.
- I understand that if I do not tell you about any changes, I may have to repay any overpayment and I may also be prosecuted, have to pay a fine or other action be taken against me.

Signature of Claimant

Date / /

Signature of Partner

Date / /

If you are completing this form on behalf of the claimant you must complete the following section -

Name of person completing the form

Title

Forename

Surname

Signature of the person

Relationship to Claimant

Why are you completing this form?

If there are any **other** circumstances which you believe may assist your claim please complete on a separate sheet.

Benefit fraud is a criminal offence that costs the average family unnecessary taxes.

YOU can make a difference. **PLEASE RING THE HOTLINE ON 0800 854 440** to make an anonymous allegation or to report your suspicions about suspected fraud.

You can also report fraud on line at www.gov.uk/benefit-fraud

Clackmannanshire Council is a Data Controller for the purposes of the Data Protection Act 1998. If you want to know more about what information we have about you, or the way we use your information, you can ask at Revenue & Payments Services, contact details on front page.