Clackmannanshire Comhairle Siorrachd Council

Chlach Mhanann

www.clacks.gov.uk

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

Clackmannanshire Council **Revenues & Payments Services** Kilncraigs, Greenside Street Alloa FK10 1EB Tel No: 01259 450000

FOR OI Council Tenant / C	ena	nt /	'Ho	bus	ing			atio	on⁻	Frus	st /	Pri۱	vate	
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Benefit Ref No														
Issued Issued Received	k k		/											

Housing Benefit & 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 disatisfied about the way we have used or are using or intend to use, you 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

Please read the following before completing this form

- Complete all sections of the form
- You **MUST** provide original documents for evidence of income and savings
- Remember to **read the declaration** at the end before signing and returning the form.
- You **MUST** report all changes in circumstances in writing immediately

Section 1 - Please tick the box that applies to you

Please tick the box that applies to	you
a Council tenant	renting from a private landlord
a Housing Association tenant	own your home or paying a mortgage
a joint tenant	a joint owner
Date you moved into the property	

Section 2 - Personal Details

*Partner we mean your Husband / Wife or a civil partner or someone you live with as Husband / Wife or Civil Partner.

	CLAIMANT PARTNER	
Surname		
Forename		
Date of Birth		
N I Number		
Your Telephone Number		
Your Email		
Are you the only adult aged 18 or over i	in the house? Yes No	
If Yes, from what date?		
If someone has left the property, what i	is their name and new address?	
Forename Address	Surname	
Town	Postcode	

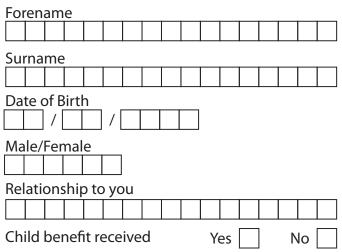
Section 3 - Children who live in your home aged 16 or under

Please list the names of dependant children living with you.

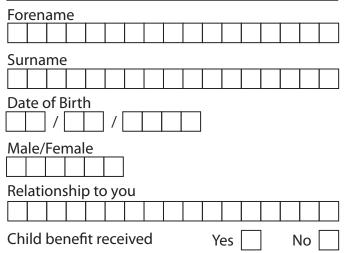
Child 1

Forename
Surname
Date of Birth
Male/Female
Relationship to you
Child benefit received Yes No

Child 3



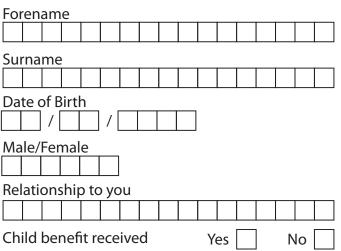
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Child 4

Child 2



Child 6

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Section 4 - Other people who live with you aged over 16

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Please list the names of other people who live with you.

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Do you have an overnight carer?

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/

Surname

Date of Birth

|/|

Type of Income

How Often Paid

Amount £

Relationship to you

Yes

No

Section 5 - Earnings	
Are you working? Yes	No Is your partner working? Yes No
Please give details of all earr	nings received and how often it is paid. (eg weekly, four weekly, monthly etc)
-	
	YOU
Name and Address of	Name of Employer
Employer	Address
	Town Postcode
Gross Amount	£ • •
Hours Worked	
When paid	
	YOUR PARTNER
Name and Address of	Name of Employer
Employer	Address
	Town
Gross Amount	£
Hours Worked	
When paid	
Do You Pay Childminding	Costs Yes No
Name of Childminder/Nur	sery
Address of Childminder N	ırsery
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.

	CL	.AIN		IT				l	PAR	RTN	IER			
Type of Income														
Amount	£				•			£					•	
How Often														
How is it paid?														
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How Often	 	+		+	•	+		± T				+		
How is it paid?	+	+	+	+	\dashv			+	+		+	+	+	+

Section 7 - Any Changes

Please tell us about any other changes that have happened since your last claim.

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Section 8 - Bank Accounts (Capital and Savings)

Do you or your partner have any bank/building society accounts or investments? Yes No

Please give details of all savings, investments, shares, property or land. This includes current accounts even where accounts are empty or overdrawn. If none, please write none).

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Your Ter	nancy
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	Title
What is your landlord's name?	
What is their address?	
Are you, your partner, or any of you or y landlord's partners or the agent's partn	/our partner's children related to your landlord or agent, or to your er? Yes No
If Yes, what is the relationship?	
Does the landlord live in the property you rent?	Yes No
Do you pay money to a letting agency for the home you rent?	Yes No
If Yes, please state their name and	Name
address here:	
Date tenancy started	
Date tenancy ends	
When did you move in?	
Or when are you going to move in?	
Is it a shorthold tenancy?	Yes No
If No, what type of tenancy do you have?	
Are you a joint tenant?	Yes No
If Yes, please state other tenant(s)	Forename Surname
name(s) here:	
Your share of rent:	%

Your Home

Please tick the box which best describes your home

lf it is a House , is it	Detached 🗌	Semi-detached	Terrae	ced	Room(s) in house
If it is a Bungalow , is it	Detached	Semi-detached	Terra	ced 🗌 Roc	om(s) in bungalow
lf it is a Caravan , is it	Static 🗌	Tourer		Connected	to mains services
lf it is a Flat , is it	In a house 📃 🤇	Over Shop 📃 🛛 II	n 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 w	here in the p	roperty they are:
	Front 🦳	Centre	Back	Room Nu	umber 🗌
How many floors are the	re in the whole bu	ilding?		Floors	
	What floor(s) are y	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								
Number used by you and your family								
Number you share with other tenants and/or you landlord								
Is your home furnished	by your land	dlord?	Fully	/	Partly	Not	at all	
Does your home have co	entral heati	ng?	Yes	5	No 🗌	If you live		
Who pays for decorating	g the inside	of your home	? You	ı 🗌 Lar	ndlord	bedsit do cooking fa		
Do you have a garage?			Yes	5	No 🗌	and a shower in ye room?		
Do you have a garden?			Yes	5	No 🗌	Yes 🗌	No 🗌	
Do you or your family us	se any room	for business	? Yes	5	No 🗌			
Do you (and your partn	er) sub-let a	any rooms?	Yes	5	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 / / / / / / / / / / /

What your rent includes

Are any of the following services	Included	Yes No	How Much?
included in your rent? If you get a separate bill or the	Heating		£
service is not provided tick No . If Yes , please also say how much	Lighting		£
it costs (if you know)	Electricity or Gas for Cooking		£
	Hot Water		£
	Council Tax		£
	Cleaning of Rooms and Windows		£
	Laundry		£
	Emergency Alarm		£
	General Counselling and Support		£
	Personal Care and Support		£
	Medical		£
	Warden		£
	Cleaning of Shared Areas		£
	Heating of Shared Areas		£
	Lighting of Shared Areas		£
	Other Services		£
Meals Are meals inclu	ided in your rent? Yes 🗌 N	No	
If Yes , how mar	ny meals do you get each day? (tick	the box which	n applies)
breakfast only	2 meals each day	3 meals each	n 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 - How We Pay Your Housing Benefit - Tenants Only

This does not apply to Council Tenants, Housing Association Tenants, tenants of Caravans etc.

If you are a private tenant we recommend that you choose to get your money paid directly into your bank account. If we cannot pay into your account, we will send you a crossed cheque. **Please note that we cannot make payments into Post Office Card Accounts.**

Please tell us how you want your housing benefit paid.

Please tick one: Please pay straight into my account												ΡI	eas	e p	ay r	me	by	che	qu	e]		
lf you want your benefit p	baid	diı	rect	tly i	nto	yo	ur k	ban	k ad	cco	unt	, pl	eas	e p	rov	ide	the	e fol	llov	ving	g in	forr	nat	ion:
Name of Your Bank																								
Address of Your Bank																								
																								I
Name of Account Holder																								
Account Number]			B	Ban	k So	ort	Coc	le							

If you experience difficulty in managing your rent payments please contact 01259 450000. This will allow the council to consider making payments direct to your landlord on your behalf.

With effect from 30th April 2006, **ALL** Private Landlords letting properties in Scotland must have applied for registration in the Register of Landlords. It is a criminal offence to let a property if it is not registered.

Section 11 - 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.

Sig	natu	ire
Sig	induce	~ C

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Date	/	/		

Section 12 - 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 completi		
Title Forenam	me Surname	
Signature of the person		
Relationship to Claimant	t	
Why are you completing	y 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.

Name of person completing the form