

HB1- HOUSING BENEFIT CLAIM FORM FOR NEW CLAIMS

Do not use this form if you currently receive Housing Benefit and are moving home ask for a Change of Address form instead. Complete all the sections that apply to you but do not complete any white boxes as these are for NIHE use.

I am a		I wish to claim Housing Benefit
Housing Executive Tenant	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Housing Association Tenant	<input type="checkbox"/>	I wish to claim Rate Relief
Private Tenant	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Hostel Tenant	<input type="checkbox"/>	I wish to claim Lone Pensioner Allowance
Other	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please tick one box ✓		

PART 1. – Basic information about you and your partner

First we need some basic information about you and any partner you may have. By partner we mean someone you are married to, in a civil partnership with or someone you are living with as if you were married or civil partners.

	YOU	YOUR PARTNER
Title (Mr, Mrs, Ms, other)		
First name		
Last name		
Other names used		
Date of Birth		
National Insurance Number		
Home telephone number		
Work telephone number		
Mobile telephone number		
E-mail address		

Address for which you are now claiming Housing Benefit	Post Code
What date did this tenancy start	
What date did you move in	
If not yet moved in when do you expect to do so	

If you or your partner have previously claimed Housing Benefit please give us the address from which that claim was made

YOU	YOUR PARTNER
Post Code	Post Code

Claim Reference Number			
Date form issued to claimant	Issued by		
Tenancy type/tenure			
Receipt date	Start date	End date	
Last CTAX responsibility ended		Date ended from	
Joint tenancy		% Responsibility	
Old correspondence address ended		Date ended from	
CL/PT details input		Household details input	
Built by	Checked by		
Date built	Date checked		

FRAUD WARNING

Before you complete your claim for Housing Benefit:

You should be aware that the Housing Executive will check the information you provide against a range of other government databases including the Social Security Agency and HM Revenue and Customs. These checks will be carried out by computer when we first assess your claim and regularly during the life of the claim. It is therefore in your interest to answer all necessary questions on this form fully. If you have any doubts about any aspect of your circumstances you should seek written clarification from the Housing Executive.

Who can claim Housing Benefit/Rate Relief from the Housing Executive?

Anyone who is on a low income and has to make payments for rent and/or rates who does not own the home in which they live. You do not have to be a Housing Executive tenant or unemployed to claim Housing Benefit or Rate Relief.

Filling in this form

Please answer all of the questions on this form, if any question does not apply to you answer No and you will be directed to the next question. You must answer all of the Yes or No questions. If you do not answer all of the questions that apply to you or your answers are unclear it may take the Housing Executive longer to calculate how much Housing Benefit you are entitled to.

If you are not a Housing Executive or Housing Association tenant please ask your landlord to complete the Certificate of Occupation which can be detached from the centre of this form.

Returning this form

This form must be returned as soon as possible otherwise you may lose money. This is because there are strict rules as to when Housing Benefit/Rate Relief can be paid from; this is usually the Monday following the date the form is received. If you think your claim for Housing Benefit/Rate Relief should start before the above date please complete Part 2.

Where you should return the form

It is always best to send, or take, the completed claim form to your nearest Housing Benefit office, these are shown below

BALLYMENA	Twickenham House, Mount Street, Ballymena, BT43 6BP
BELFAST	32-36 Great Victoria Street, Belfast, BT2 7BA
CRAIGAVON	Marlborough House, Central Way, Craigavon, BT64 1AJ
DERRY/LONDONDERRY	Richmond Chambers, The Diamond, Londonderry, BT48 6QP
LISBURN	29 Antrim Street, Lisburn, BT28 1AU
NEWTOWNARDS	Strangford House, 28 Court Street, Newtownards, BT23 7NX
OMAGH	MacAllister House, Woodside Avenue, Omagh, BT79 7BP

Remember you must sign and date the form in Part 11 before returning it.

Changes in circumstances

You must tell us immediately if any of your circumstances change. You can contact your Housing Benefit office by phoning 03448 920 902

Changes of circumstances include the following:

If you or your partner start or stop getting Income Support, Income Based Job Seekers

Allowance or Employment and Support Allowance (Income Related).

If you or your partner stop or start getting any other state benefit or Tax Credits

If you or your partner start receiving an occupational pension

If you, or your partner's wages or salary go up or down regardless of the amount

If the number of people who live with you changes

If you have another child

If any of your children leave school

If you move including a change of room or flat at the same address

If you go into hospital or prison

If you go into a nursing home even if this is for a trial period

If you will be away from home temporarily

If you stop paying for childcare

If someone starts or stops receiving Carers Allowance to look after you.

We need to know of any changes in your circumstances, not just those listed above so if you are in any doubt tell us.

REMEMBER YOU MAY BE COMMITTING AN OFFENCE IF YOU DO NOT TELL US PROMPTLY OF CHANGES IN YOUR CIRCUMSTANCES AND ACTION MAY BE TAKEN AGAINST YOU. YOU MAY ALSO LOSE MONEY OR WILL HAVE TO REPAY ANY HOUSING BENEFIT/RATE RELIEF OVERPAID.

Evidence you must supply

So that we can be sure that we are paying you the right amount of Housing Benefit/Rate Relief we need to see certain evidence relating to you, your partner, your family and your financial circumstances. What we need to see will vary according to the particular circumstances of your case but we will always tell you what we need to see. If you do not provide all the evidence we need, we might not be able to pay you any benefit. We need the same evidence for your partner, if you have one, and in some instances for children and other people living in your home.

If you cannot send the evidence we need at the moment, send the form back to us now and send the evidence later. We can start to process your claim but we will not be able to pay you any benefit until we have all the evidence. A general guide to what evidence is required is given below but remember that we look at each case individually and may require more or less evidence depending on your circumstances.

1. Proof of your and your partner's identity

We must see **one** of the following documents:

- Northern Ireland Driving Licence (current and valid)
- Current passport
- Electoral Identity Card

If none of these are available we will need to see **two or more** of the following:

- Benefit payment book
- Life assurance or insurance policies
- Birth certificate (either long or short)
- Marriage certificate
- Credit cards
- Medical card
- Divorce or annulment Papers
- UK residency permit
- Home Office Standard Acknowledgement letters
- SAL1 or SAL2
- Gas, electricity, telephone or rates bill issued in the last quarter and in your name
- Identity Card issued by a European Union or European Economic Area state
- Wage slips from a current employer

If you are unable to produce the required evidence you should ring 03448 920 902 and you will be advised on other ways of proving identity.

2. Evidence of your address

Such as a recent gas or electricity bill, or TV licence

3. Evidence of National Insurance Numbers

Such as a National Insurance number card, payslips or letters from the Social Security Agency or Inland Revenue.

4. Evidence of capital, savings and investments

We need to see documents such as

- statements and books which show bank account details for at least the last three months,
- certificates for things like Premium Bonds, National or Ulster Savings Certificates, ISAs, stocks, shares and unit trusts
- documents which confirm ownership or part ownership of property

UNLESS YOU RECEIVE GUARANTEE PENSION CREDIT YOU CANNOT QUALIFY FOR HOUSING BENEFIT IF THE VALUE OF YOUR SAVINGS, CAPITAL AND INVESTMENTS EXCEEDS £16000

5. Evidence of earnings

If you have an employer your last 5 weekly, 3 fortnightly or 2 monthly payslips, alternatively we will accept a Certificate of Earnings (at the back of this form) completed by your employer. If you have only commenced work we will accept an estimate of your likely earnings from your employer. If you are self-employed we will contact you concerning evidence of your earnings.

6. Evidence of other income

Such as occupational pension slips from a previous employer, a letter from a court showing how much maintenance you are getting or letters about student grants and loans. If anyone pays you for board and lodgings we will need to see evidence of the amount paid.

7. Evidence of benefits, allowances, pensions

Such as current award notices or letters from Social Security or the Inland Revenue confirming how much you get.

8. Evidence of other money paid out

Such as letters about student grants and receipts from registered childminders

9. Evidence of private rent and tenancy

Normally we will ask for a Certificate of Occupation completed by your landlord or his agent. In exceptional circumstances we will accept your tenancy agreement together with either your rent book or rent receipts and any other evidence we will specify.

WE MUST ALWAYS SEE ORIGINAL DOCUMENTS, NOT COPIES BUT DO NOT SEND VALUABLE ITEMS THROUGH THE POST. IF YOU CAN, BRING THEM TO ANY HOUSING EXECUTIVE DISTRICT OFFICE. WE WILL TAKE THE DETAILS WE NEED AND GIVE YOU THE DOCUMENTS BACK STRAIGHT AWAY. IF YOU CANNOT GET TO A DISTRICT OFFICE, PHONE US FOR MORE ADVICE.

Part 2. – About backdating

We can usually only pay Housing Benefit from the Monday following the date we receive your claim however in certain circumstances we can backdate for a limited period. If you would like us to consider backdating your benefit please tell us why you did not claim earlier in the space below.

What date would you like your claim backdated to	
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Part 3 – More information about you and your partner

We need some information to see if we can pay you Housing Benefit so everyone must answer the following questions. In the questions the UK is England, Northern Ireland, Scotland and Wales.

Do you have British or Irish nationality	YES		NO	
<i>-If yes have you lived abroad within the last 6 months</i>	YES		NO	
<i>-If yes what date did you return to the UK to live</i>				
If not British or Irish please state your nationality				
<i>-What date did you come to live in the UK</i>				

Does your partner have British or Irish nationality	YES		NO	
<i>-If yes has he/she lived abroad within the last 6 months</i>	YES		NO	
<i>-If yes what date did he/she return to the UK to live</i>				
If not British or Irish please state his/her nationality				
<i>-What date did he/she come to live in the UK</i>				

Please tick if any of the following apply to either you or your partner

Have a vehicle from a mobility scheme e.g. Motability	
Entitled to but not currently being paid Carers Allowance	
Someone is receiving Carers Allowance to look after me/us	
I have a carer who lives somewhere else but provides overnight care in my home	
Registered blind	
Recently left care provided by Social Services	

If you or your partner has moved home within the last 12 months we need to know about your last address but only if it is different from the address you are now claiming from.

	YOU				YOUR PARTNER			
What was your last address	Post Code				Post Code			
Were you an NIHE tenant	YES		NO		YES		NO	
Were you a home owner	YES		NO		YES		NO	
Was this your marital home	YES		NO		YES		NO	
Did you live with parents	YES		NO		YES		NO	
Other – please specify								

CLAIMANT	Blind		Car		Care				
PARTNER	Blind		Car		Care				
Previous overpayment				Common period					
Rent overpayment £				Rates overpayment £					
Contra SD		ENT		HOU		LLI		LLD	
Backdating requested				Decision sheet on file					
Start date on system				End date on system					
Backdating requested				Decision sheet on file					
Updated start date				Updated end date					

Part 4. - Monitoring Information

The Housing Executive aims to deliver a completely fair and impartial service to everyone regardless of political affiliation, religious belief, ethnic origin or sexual orientation. Collecting some basic information concerning your religion and ethnic origin will help us monitor if we are achieving this.

YOU DO NOT HAVE TO ANSWER THESE QUESTIONS AND YOUR APPLICATION WILL NOT BE AFFECTED IF YOU CHOOSE NOT TO DO SO, ANY INFORMATION GIVEN WILL BE TREATED AS STRICTLY CONFIDENTIAL.

Please tick one box to indicate what best describes your religion and one box to indicate what best describes your ethnic origin

RELIGION		ETHNIC ORIGIN		ETHNIC ORIGIN	
Catholic		Bangladeshi		Indian	
Protestant		Black African		Irish Traveller	
Other		Black Caribbean		Pakistani	
None		Chinese		White	

If your partner or another household member is of a different ethnic origin or religion to you please give details below

NAME	RELIGION	ETHNIC ORIGIN

	CL	PT	OTHER	OTHER	OTHER	OTHER
LANGUAGE/NATIONALITY						
RELIGION						

PART 5. – About children and young people

We now need to know about children or young people in your household for whom you, or your partner, receive Child Benefit. If you receive Child Benefit for more than 6 children use the space in Part 10 to give us their details.

	CHILD 1	CHILD 2	CHILD 3
First Name			
Last Name			
Date of birth			
Sex			
Relationship to you/your partner			
Child Benefit Number			
Who is this paid to			

	CHILD 4	CHILD 5	CHILD 6
First Name			
Last Name			
Date of birth			
Sex			
Relationship to you/your partner			
Child Benefit Number			
Who is this paid to			

Please tick if any of the following apply to the children or young people in your household. By "Receives DLA" we mean that any amount of either the care or the mobility component of Disability Living Allowance is being paid.

CHILD NUMBER	1	2	3	4	5	6
Receives DLA						
Registered blind						
Has left school						

We may need to see the child or young person's birth certificate or proof of the information you have provided.

ROLE	DLA	BL	LEFT SCHOOL
CHILD 1			
CHILD 2			
CHILD 3			
CHILD 4			
CHILD 5			
CHILD 6			

PART 6. – About other people who live with you

Now tell us about anyone else who normally live with you and your partner, this includes adults and anyone over 16 for whom no-one receives Child Benefit. Do not include anyone who only shares a hall, bathroom or toilet with you but do include any boarders, lodgers or sub-tenants. Boarders and lodgers are not members of your family and will receive at least one meal per day from you whereas sub-tenants are responsible for all their own cooking arrangements. If you have more than 3 other people living with you use the space in Part 10 to give us their details.

	PERSON 1				PERSON 2				PERSON 3			
First name												
Last name												
Date of Birth												
Relationship to you												
Is the partner of (state name)												
Nat. Insurance No												
Is a boarder/lodger	YES		NO		YES		NO		YES		NO	
Is a sub-tenant	YES		NO		YES		NO		YES		NO	
Temporarily absent	YES		NO		YES		NO		YES		NO	

Please tick if any of the following apply to these people

	PERSON 1				PERSON 2				PERSON 3			
Receives Income Support												
Receives Income based Job Seekers Allowance												
Receives Income Related Employment & Support Allowance												
Receives Pension Credit												
Is a full time student												
Is on youth training												
Works more than 16 hours a week												

If anyone (other than boarders/lodgers) works more than 16 hours a week we need to know more details about their income, tell us about it below.

	PERSON 1				PERSON 2				PERSON 3			
Weekly earnings before deductions	£				£				£			
Weekly total of income from all benefits	£				£				£			
Weekly total of income from tax credits	£				£				£			
Weekly total of any other income	£				£				£			
Yearly interest on any savings	£				£				£			

ROLE	IS	JSA	ESA	PC	NDD	FTS	YTS	WKG	INC	PTR
PERSON 1										
PERSON 2										
PERSON 3										

Part 7. – About your income

We first need to know if you or your partner is **currently** receiving any of the following types of income
Please tick which applies

Employment & Support Allowance (Income Related)	
Income Support	
Job Seeker Allowance (Income Based)	
Pension Credit (Guarantee Credit)	

If you answered YES to any of the income types above move on now to Part 8 .

Benefits, State Pensions & Tax Credits

Please tick if you, or your partner, currently receive or have applied for any of the following types of income (you do not need to give amounts).

INCOME TYPE	BEING PAID	APPLIED FOR
Attendance Allowance		
Bereavement Allowance		
Carers Allowance		
Child Tax Credit		
Disability Living Allowance – Mobility Component		
Disability Living Allowance – Care Component		
PIP		
Employment & Support Allowance (Contributory)		
Employment & Support Allowance (Income Related)		
Incapacity Benefit		
Income Support		
Industrial Injuries Death Benefit		
Industrial Injuries Disablement Benefit		
Job Seekers Allowance (Contribution Based)		
Job Seeker Allowance (Income Based)		
Maternity Allowance		
Pension Credit (Guarantee Credit)		
Pension Credit (Savings Credit)		
Severe Disablement Allowance		
State Retirement Pension		
War Disablement Pension		
War Widows Pension		
Widowed Parents Allowance		
Widows Pension		
Working Tax Credit		

We can usually confirm this type of income without evidence from you however sometimes we may have to ask you to provide proof.

If you work for an employer please give us the details below

	YOU				PARTNER			
Hours each week usually worked								
Pay before any deductions	£				£			
How often do you receive this								
Do you pay towards a private pension	YES		NO		YES		NO	
<i>If yes how much do you pay</i>	£				£			
<i>How often do you pay this</i>	Every				Every			
If known give date of next pay rise								

	CODE	AMOUNT	FREQ	START	END
CLAIMANT	EI				
PARTNER	EI				

If you or your partner is currently absent from work but still receiving payments from your employer please tick if any of the following apply

	YOU				PARTNER			
Receiving Statutory Sick Pay								
Receiving Statutory Maternity or Paternity Pay								
Receiving Statutory Adoption Pay								

	CODE	AMOUNT	FREQ	START	END
CLAIMANT					
PARTNER					

If you or your partner are currently receiving employer's sick or maternity pay please give details below

	YOU		PARTNER		HOW OFTEN	
Employers sick pay	£		£			
Employers maternity pay	£		£			

	CODE	AMOUNT	FREQ	START	END
CLAIMANT					
PARTNER					

Income from Voluntary & Unpaid Work

If you, or your partner, do any voluntary or unpaid work please give us details below. We will need to see evidence of income from voluntary work.

	YOU				YOUR PARTNER			
Who do you do the voluntary or unpaid work for, please state name and address								
When did you start								
Hours worked each week								
Do you get paid	YES		NO		YES		NO	
Do you get tips	YES		NO		YES		NO	
Do you get expenses only	YES		NO		YES		NO	

HOUSING BENEFIT CERTIFICATE OF OCCUPATION

This form must be completed by the landlord or agent only. It should not be given back to the tenant but instead should be returned directly to the appropriate Housing Benefit office (see addresses on back of this form).

NO HOUSING BENEFIT CAN BE PAID UNTIL THIS IS RECEIVED BY THE NIHE.

Property Address (include any flat number)	
	Post Code

Tenants Name	
Tenants Partner's name	
Previous HB Reference No.	
Previous Address	
	Post Code

About the owner/agent

Please give us details of the property owner (required in **EVERY** case)

Last Name	
Other Names	
Address	
	Post Code
Phone Number	
E-mail address	

Please give us agent's details if there is one

Agents Name	
Company	
Address	
	Post Code
Phone Number	
E-mail address	

	YES	NO
Is the tenant related to the owner or agent		
Is the tenant's partner related to the owner or agent		
Is the tenant's former partner related to the owner or agent		
Is a close family member related to the owner or agent		
Is the tenant a former partner of the owner		
Is the owner responsible for a child living in the property		
Is the owner or agent employed by the Housing Executive		

If the answer to any of the above questions was YES please give details below.

Do you already receive direct payment of Housing Benefit	YES		NO	
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If yes please state your landlord reference number here _____

If you do not already receive direct payment of Housing Benefit we must have details of the bank or building society account you wish to use for payments.

Name of bank or building society										
Branch address										
	Post Code									
Sort Code										
Account Number										
Account Name										

To receive payment notification by secure email please provide your email address in the box below.

About the tenancy

What date did the tenancy commence	
On what date did the tenant first occupy the property	
Is the tenant still living there – state yes or no	
Is the tenant in arrears –state yes or no	
If yes state by how many weeks	
How much in total do you charge the tenant	
How often is this charged (e.g. weekly or monthly)	
Are rates included - state yes or no	
Are charges for any services included – state yes or no	
Are charges for meals included - state yes or no	
Is there a signed tenancy agreement? - state yes or no	
Is it a joint tenancy? - state yes or no	

If charges for services or meals are included please give details

SERVICE	AMOUNT	SERVICE	AMOUNT
Heating	£	Laundry or cleaning	£
Lighting	£	Furniture	£
Hot water	£	Garage/parking space	£
Power for cooking	£	Personal care/support	£
Other (give details)			

MEAL	AMOUNT				
Breakfast	£	Tick if daily		Tick if weekly	
Lunch	£	Tick if daily		Tick if weekly	
Evening meal	£	Tick if daily		Tick if weekly	

About the tenants accommodation/property

The tenant’s accommodation is (tick one box only)

House		Purpose built flat		Houseboat	
Bungalow		Flat over a shop		Bedsit or rooms	
Flat in a house		Caravan		Board & lodgings	

The property is (tick one box)

Detached		Semi-detached		Terraced	
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Number of rooms occupied by the household

	NUMBER
Living Rooms	
Kitchens	
Bedrooms	
Bathrooms	

Does the tenant share any rooms (other than with a partner or any children)	YES		NO	
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If YES, please tick rooms that are shared

Shares a living room	
Shares a bedroom	
Shares a kitchen only	
Shares a bathroom only	
Shares both kitchen and bathroom	

Private Tenancies Order 2006 information

	YES	NO
Was the property built before 1945		
If yes has a Certificate of Fitness been issued		
Is the rent registered with the NI Rent Office		

The following statement is important so please read it carefully. You must sign and date the statement and then return the form to us.

I declare that the information I have given on this form is correct and complete to the best of my knowledge and understand that it is a criminal offence to knowingly give incorrect information or to withhold relevant information. I authorise the Housing Executive to make any enquiries it considers necessary to verify the information given on this form and understand that any information given may be shared with other government organisations if this is allowed by law. I understand that any Housing Benefit overpaid to a landlord or agent may be recovered from any other payment of Housing Benefit made to that person even if it is in respect of another tenancy. I understand that the information I have given may also be used for other functions of the Housing Executive.

Signed: _____ Date: _____

Landlord or Agent

Data protection: The Housing Executive applies the principles of the Data Protection Act 1998 in terms of the gathering, use and disclosure of the information provided on this claim form.

HOUSING BENEFIT OFFICE ADDRESSES

OFFICE ADDRESS	DISTRICT COUNCIL AREAS COVERED
Twickenham House Mount Street, BALLYMENA BT43 6BP	Antrim, Ballymena, Ballymoney, Carrickfergus, Coleraine, Larne, Newtownabbey, Moyle
32-36 Great Victoria Street BELFAST BT2 7BA	Belfast
Marlborough House Central Way CRAIGAVON BT64 1AJ	Armagh, Banbridge, Craigavon, Newry & Mourne
29 Antrim Street LISBURN BT28 3AU	Lisburn
Richmond Chambers The Diamond LONDONDERRY BT48 6QP	Derry, Limavady, Magherafelt, Strabane
Strangford House 28 Court Street NEWTOWNARDS BT23 7NX	Ards, Bangor, Castlereagh, Downpatrick
MacAllister House Woodside Avenue OMAGH BT79 7BP	Cookstown, Dungannon, Fermanagh, Omagh

If you are paid anything or receive tips please give details below

	YOU	YOUR PARTNER
How much are you paid	£	£
How often		
Amount of tips received	£	£
For what period		

	CODE	AMOUNT	FREQ	START	END
CLAIMANT	OI				
PARTNER	OI				

Money you pay out

In some circumstances we can take payments made to a registered childminder, day nursery, after school club or parental contributions to a student into account. We will need to see proof of these payments and, if applicable, the Certificate of Registration for the childminder.

Do you make any payments to a <i>registered childminder, day nursery or after school club</i>	YES		NO	
<i>If yes how much do you pay each week</i>	£			
Do you pay a parental contribution for a student	YES		NO	
<i>If yes how much do you pay each week</i>	£			

	CODE	AMOUNT	FREQ	START	END
EXPENSE 1					
EXPENSE 2					
EXPENSE 3					

Income from boarders/lodgers and subtenants

We need to know about any income you receive from boarders/lodgers and sub-tenants. These are people who occupy part of your dwelling and pay rent to you but are not members of your immediate family. Boarders/lodgers receive at least one meal per day from you whereas sub-tenants are responsible for all their own cooking arrangements.

Do you have any boarders/lodgers living with you	YES		NO	
<i>If yes state number of boarders/lodgers</i>				
<i>If yes how much in total do you charge each week</i>	£			
Are you related to any of the boarders/lodgers	YES		NO	
<i>If yes please state relationship to you/your partner</i>				

Do you have any subtenants	YES		NO	
<i>If yes how many sub-tenants do you have</i>				
<i>If yes how much in total you receive each week</i>	£			
Does this include any amount for heating	YES		NO	
Are you related to the sub-tenant(s)				
<i>If yes please state relationship to you/your partner</i>				

	CODE	AMOUNT	FREQ	START	END
CLAIMANT					
PARTNER					

Student income

If you or your partner is a student please answer the questions below. We will need to see proof of student income.

	YOU				PARTNER			
Are you a student	YES		NO		YES		NO	
<i>If yes is the course full time</i>	YES		NO		YES		NO	
Where do you study state name and address of educational institution								
What date did the course start								
What date will the course end								
What type of course is it								

Do you receive a student grant or loan	YES		NO	
<i>If yes how much is this and how often is it paid</i>	£		Every	
Do you receive a parental contribution	YES		NO	
<i>If yes how much is this and how often is it paid</i>	£		Every	
Do you receive any other income	YES		NO	
<i>Please state what this is e.g. bursary or sponsorship</i>				
How much is this and how often is it paid	£		Every	

	CODE	AMOUNT	FREQ	START	END
CLAIMANT					
PARTNER					

Any other income

If you, or your partner, currently receive any other income please tell us about it below. You do not need to tell us about payments from the Independent Living Trust, the Eileen Trust or the Macfarlane Trust. We will need to see proof of any other income you may have.

INCOME TYPE	AMOUNT	EVERY	PAID TO
Personal maintenance from a former partner	£		
Occupational/works/private pensions	£		
Training allowances	£		
Income from Trust funds	£		
Regular cash payments	£		
Fostering allowance	£		
Guardians allowance	£		

If you have any other income not already listed please give us details of this.

DESCRIPTION OF INCOME	AMOUNT	EVERY	PAID TO
	£		
	£		
	£		
	£		

Savings & Investments

UNLESS YOU RECEIVE GUARANTEE PENSION CREDIT YOU CANNOT QUALIFY FOR HOUSING BENEFIT IF THE VALUE OF YOUR SAVINGS, CAPITAL AND INVESTMENTS EXCEEDS £16000

We may need to see proof of your savings and investments if so we will contact you. Tell us first about any current or savings accounts held by you or your partner at a bank, building society, post office, credit union or any other financial institution.

ACCOUNT TYPE	HELD AT	ACCOUNT NUMBER	NAME ON ACCOUNT	CURRENT BALANCE
Current				£
Current				£
Current				£
Savings				£

Now tell us about any other cash or investments you or your partner has

TYPE	VALUE
Cash	£
Premium Bonds	£
Unit Trusts, ISA's, PEP's or TESSA's	£
National Savings Certificates	£
Ulster Savings Certificates, Income or Capital Bonds	£
Money/property held in trust	£
Other investments- please give details below of what this is	£

In certain circumstances savings can be ignored for a limited period or not taken into account at all. So that we do not wrongly take your savings into account please tell us if your savings include any money from the following.

	YES	NO
The sale of a house		
A charity		
Compulsory purchase of a former home		
Far Eastern Prisoner of War Compensation Scheme		
Compensation for atrocities during the 2nd World War		
Paid to families of the disappeared in Northern Ireland		
Payments from the vCJD (Creutzfeld-Jacob Disease) Trust		

If you answered yes to any of the above questions about savings we will contact you for further information.

Shares

Please tell us if you, or your partner, own shares here or in any other country.

Do you or your partner own any shares in this or any other country	YES		NO	
--	-----	--	----	--

If you answered yes please give details below, we may need to contact you about this.

Name of company	No. of shares	Approx. Value
		£
		£
		£
		£
		£
		£
		£

Property & Land

We need to know if you, or your partner, own property or land in this or any other country. You should still answer yes if there is a mortgage or loan outstanding on the property or land.

Do you or your partner own any property or land in this or any other country	YES		NO	
--	-----	--	----	--

If you answered yes we will contact you for further details

OWNED BY	CODE	AMOUNT	FREQ	START	END

PART 8. – About rent and where you live

Number of Bedrooms in Property

How many bedrooms are in the property you are renting				
Did you sign a tenancy agreement?	YES		NO	
Do you have a joint tenancy?	YES		NO	
If you have a joint tenancy are you related to any of the other joint tenants?	YES		NO	

Housing Executive tenants should go now to Part 10 everyone else should continue with the rest of Part 8

Landlord or Agents Name	
Landlord or Agents Address (if not NIHE)	Post Code
Landlords phone number	
Landlords e-mail address	
Total amount payable by you to the landlord	£
How often is this paid (e.g. weekly or monthly)	

Sharing information with your landlord can help us to deal with your claim more quickly and reduce the risk that your landlord will take action against you in the event of non-payment. If you agree to this we will only share information about the progress of your claim with your landlord, this will not contain any personal details and you can withdraw your consent at any time.

Can we share information concerning your claim with your landlord as outlined above	YES		NO	
---	-----	--	----	--

Please answer all of the questions below

Do you share paying the rent with anyone other than your partner	YES		NO	
<i>If yes what is your share of the rent</i>	£	Each		
Are there any weeks when you do not have to pay the landlord rent	YES		NO	
<i>If yes how many weeks each year</i>				
Does the rent include an amount for a garage or parking space	YES		NO	
<i>If yes can you choose not to rent this</i>	YES		NO	
Is the property furnished	YES		NO	
Are you behind with your rent	YES		NO	
<i>If yes by how many weeks</i>				

If you are a Housing Association tenant you do NOT need to answer the questions below move on now to Part 9.

Did you or your partner ever own this property	YES		NO	
<i>If yes what date did you sell the property</i>				
Do you use the property for any sort of business	YES		NO	
Are you or your partner related to the owner or agent	YES		NO	
<i>If yes please state relationship</i>				
Is the landlord a former partner of either you or your current partner	YES		NO	
<i>If yes did either you or your partner live with the landlord in this property</i>	YES		NO	
Is the landlord responsible for any of your or your partners children who live with you	YES		NO	

If you answered YES to any of the above questions we may need to contact you for further information.

I am renting a (tick one box)

House		Purpose built flat		Houseboat	
Bungalow		Flat over a shop		Bedsit or room	
Flat in a house		Caravan		Board & lodgings	

The property is (tick one box)

Detached		Semi-detached		Terraced	
----------	--	---------------	--	----------	--

Do you share any rooms (other than with a partner or any children?)	YES		NO	
---	-----	--	----	--

If YES, please tick rooms that are shared

Share a living room	
Share a bedroom	
Share a kitchen only	
Share a bathroom only	
Share both kitchen and bathroom	

PUBLIC TENANCIES		
A/C responsibility for rent AND rates linked to HMS		
HMS reference number		

HOUSING ASSOCIATION TENANCIES			
Weekly rent	£	Weekly rates	£
Supported accom. code		Scheme number	

LHA TENANCIES					
Rent start date	Amount	£	Frequency		
Self contained	LHA type ANN		LHA type CoC		
Anniversary date		End date			
Previous end date		Start date			
Tenancy start date		Rent	£	Freq	
ROOM TYPE	IN PROPERTY		SHARED	SOLE USE	
Bedrooms					
Living rooms					
Kitchens					
Bathrooms					
Toilets					

RATES											
Amount	£	Start date		End date							
Frequency	CTAX Linked	Joint tenancy		% resp.							
Rating Reference No											

Part 9. – Payment Details

You can choose to have payments made to yourself or to your landlord although in some instances we will be obliged to make the payments to your landlord. If you have to pay rates separately from rent we can also pay these directly to Land & Property Services for credit to your account. Please let us know your preference below.

I want to receive all payments myself	YES		NO	
I want all payments made to my landlord	YES		NO	
I want rates payments only made to Land & Property Services	YES		NO	
I want rent payments made to my landlord and rates payments to Land & Property Services	YES		NO	

If you have chosen to receive payments yourself please give details of the bank or building society account you would wish us to use for this.

Name of bank or building society											
Branch address											
		Post Code									
Sort Code											
Account Number											
Account Name											

PUBLIC TENANCIES			
LAHRA norm pay scheme created for rent AND rates by system			
Benefit period start date		Benefit period end date	

PRIVATE TENANCIES			
Pay scheme start date		Benefit period end date	
Pay rent to	Pay rates to	Pay schedule	
Cash location		Landlord Reference No.	
Landlord Name			
Account Name			
Account Number		Sort Code	
Ratepayer Reference No.			

EVENT DATE	COMMENT

Assessed by		Date	
Calculated by		Date	
Checked by		Date	

Part 10 – Anything else you need to tell us

Use the space below to tell us anything else you think we might need to know or to give us details if there was not enough space earlier in the application form.

IMPORTANT NOTE

**ALL APPLICANTS SHOULD NOW READ CAREFULLY AND SIGN THE DECLARATION IN PART 11.
IF YOU DO NOT SIGN AND DATE THE DECLARATION NO HOUSING BENEFIT CAN BE PAID.**

Part 11 – Declaration to be completed by all applicants

Please read this declaration carefully before you sign and date it. You must sign the declaration even if someone else has filled this form in for you. If you have a partner they must also sign the declaration.

I declare that the information I have given on this form is correct and complete and understand that action, including court action, may be taken against me if this is not the case. I agree that you will use the information I have provided to process my claim for Housing Benefit and any other claim for social security benefits that I have made or may make as well as for other functions of the Housing Executive including the recovery of rent arrears. I understand that you may check this information with other sources and may give some information to other organisations such as government departments, local authorities and private sector companies such as banks, organisations that may lend me money and companies that assist you in fraud detection and prevention such as Credit Reference Agencies if the law allows this. I know that I must notify you about any change in my circumstances, which might affect my claim and understand that if I do not tell you about any change of circumstances I may be prosecuted. If you pay me too much benefit I understand that I may have to repay this

Claimant's signature _____ Date _____

Partner's signature _____ Date _____

If someone other than the person claiming filled in this form please complete the sections below.

Your name	
Your address	
	Post Code
Relationship to the person claiming	
Why did you complete this form for the person claiming	
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 and complete	
Signed _____ Date _____	

Checklist

Please tick to say what evidence you are sending with this form.

Evidence of identity	<input type="checkbox"/>
Evidence of your address	<input type="checkbox"/>
Evidence of National Insurance Number	<input type="checkbox"/>
Evidence of capital savings and investments	<input type="checkbox"/>
Evidence of earnings	<input type="checkbox"/>
Evidence of other income	<input type="checkbox"/>
Evidence of benefits, allowances or pensions	<input type="checkbox"/>
Evidence of private rent and tenancy	<input type="checkbox"/>
Evidence of other money paid out	<input type="checkbox"/>

We must see original documents and cannot accept copies. If you do not provide all the evidence we need, we might not be able to pay you any benefit but do not delay returning this form if you cannot send all the evidence we need at the moment. Send the form back to us now and send the evidence later. We can start to process your claim but we will not be able to pay you any benefit until we have all the evidence.

What to do next

You should now have:

- Filled in the claim form for Housing Benefit/Rate Relief
- Asked your employer to complete the Certificate of Earnings if applicable
- Asked your landlord, or his agent, to complete the Certification of Occupation if applicable
- Collected any other evidence to support your claim, but remember do not send valuable items through the post

If you are claiming Income Support, Income Based Job Seekers Allowance, Employment and Support Allowance (Income Related) or Pension Credit (Guarantee Credit) you should send this form to the Social Security Office or Pension Service office which deals with you. You may also send this form to your Housing Benefit Office – see page 2 for details.

If you are working or receiving any other benefits, including Pension Credit (Savings Credit) you should return this form directly to your Housing Benefit Office.

If you are submitting any evidence to support your claim separately this should be sent to your Housing Benefit Office. Please remember to write your name and address on this to avoid delays.

If you cannot send the evidence we need at the moment, send the form back to us now and send the evidence later. We can start to process your claim but we will not be able to pay you any benefit until we have all the evidence.

HOUSING BENEFIT-CERTIFICATE OF EARNINGS

To the claimant

Please enter only your name and address below do NOT complete any other details. You should then give the Certificate to your employer who will send it directly to the Housing Benefit office after completion.

Your name			
Your Address			
	Post Code		

To the employer

Once completed this Certificate should be returned directly to the Housing Executive (addresses on reverse). Please do NOT give back to the employee

Details of earnings and deductions

We need details of earnings and deductions for tax, National Insurance and pension contributions for the last 5 weeks, 3 fortnights or 2 months depending on when the employee is paid. You should include tips, bonuses and overtime if appropriate.

PERIOD ENDED DATE	PAYMENTS		DEDUCTIONS			NIHE USE ONLY
	THIS PERIOD	YEAR TO DATE	TAX	N. INS	PENSION	

Employees National Insurance Number									
Employees staff number (if any)									
Number of hours worked per week									
Are the above figures estimated	YES				NO				
Date employee started work with you									
Date of last pay increase									
If known date of next pay increase									
METHOD OF PAYMENT(TICK BOX)	FREQUENCY OF PAYMENT (TICK BOX)								
Cash		Week							
Cheque		Fortnight							
Bank account credit		Month							

Please turn over the page

Employers Name	
Employers Address	
Contact name	
Contact Number	
E-mail address	
Are you related to the employee	
<i>If yes give details</i>	
Employers signature	
Date completed	

Official stamp

Thank you for your help please now return this certificate to the Housing Benefit office dealing with the area where your employee lives, the addresses are shown below.

OFFICE ADDRESS	DISTRICT COUNCIL AREAS COVERED
Twickenham House Mount Street, BALLYMENA BT43 6BP	Antrim, Ballymena, Ballymoney, Carrickfergus, Coleraine, Larne, Newtownabbey, Moyle
32-36 Great Victoria Street BELFAST BT2 7BA	Belfast
Marlborough House Central Way CRAIGAVON BT64 1AJ	Armagh, Banbridge, Craigavon, Newry & Mourne
29 Antrim Street LISBURN BT28 3AU	Lisburn
Richmond Chambers The Diamond LONDONDERRY BT48 6QP	Derry, Limavady, Magherafelt, Strabane
Strangford House 28 Court Street NEWTOWNARDS BT23 7NX	Ards, Bangor, Castlereagh, Downpatrick
MacAllister House Woodside Avenue OMAGH BT79 7BP	Cookstown, Dungannon, Fermanagh, Omagh