## Income and Expenditure Statement

Completion of this form does not mean you have been accepted for the schemes.

Name:	
Address:	



Income	Weekly/ Monthly	General Expenditure	Weekly/ Monthly
Your wages	£	Mortgage (1st & 2nd)	£
Your partners wages	£	Rent	£
Company / State pension	£	Council Tax	£
Income support	£	Gas	£
Job seekers allowance	£	Electric	£
Child benefit	£	Water	£
Carers allowance	£	Maintenance	£
Employment Support Allowance	£	Phone	£
Working tax/child tax credit	£	Insurances	£
Incapacity benefit	£	Groceries/Toiletries	£
Pension credit	£	Clothing	£
Maintenance	£	Pension Payment	£
Housing benefit	£	Car/Travel expenses	£
Student loan grant	£	TV Licence	£
Disability Living Allowance	£	Childminding	£
Other	£	School/ Work Meals	£
Other	£	Prescriptions	£
Other	£	Dentist/Opticians	£
Other	£	Court Fines/County Court Judgements	£
Other	£	Socialising	£
Other	£	Other – please specify	£
Total income £		Total Expenditure	e £

Bank/Finance Debt		Paym	ents
Name	Outstanding Balance	Weekly	
	£		£
	£		£
	£		£
	£		£
	£		£
	£		£
	£		£
Total Debt	£	Total	£

Overall View	£
Total Income	
Total Expenditure	
Debt Payments	
Total Income Left	

Please sign and date the declaration below and send or hand it in to, Housing Needs, Gateway, 8 Grosvenor Road, Tunbridge Wells, Kent TN1 2AB or Housing Needs, Town Hall, Tunbridge Wells, Kent, TN1 1RS.

Declaration: The information I/we have given is true and complete and I/we understand that you may check the information I/we have given on this form.

Applicant 1 Signature:	<b></b>	Date:
Applicant 1 Signature:		Date:

