

| For office use only |
|---------------------|
| Reference |

| Date issued |
|-------------|
| |

| Date received stamp |
|---------------------|
| |

Council Tax Support application form

If you want to claim help with paying your Council Tax, please fill in this form and return it without delay.

If you cannot provide proof, you can send it later.

Before you complete this claim:

You should be aware that the Council will check the information you provide against a range of other government databases including the Department for Work and Pensions and HM Revenue and Customs, as well as other Councils and credit reference agencies. 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 and declare all income, bank accounts and people that live in your property, and notify the council as soon as your circumstances change.

A Questions about your claim

1 Your title
Mr Mrs Ms Miss

2 First name(s)

Surname

3 Date of birth

4 National Insurance number

5 Contact details:
E-mail address

If we need more information to support your claim we will contact you at this e-mail address.

Mobile number

Telephone number

7 Address and postcode of the property you are claiming for

8 Date you moved in

9 Date you would like your claim to start

If you would like us to consider backdating your claim please tell us why in Section N.

Please tell us why you are making this claim

B**Questions about your home**

(Please tick any box that applies to you)

- 1 Do you rent from the council?
- 2 Do you rent from a private landlord?
- 3 Do you own your home or have a mortgage?
- 4 Do you rent from a housing association?
- 5 Other (please give details)
- 6 Are you liable for Council Tax? Yes No

C**Questions about your previous home**

- 1 What was your previous address?
- 2 At this address were you the (please tick):
Tenant? Owner?
Lodger? Other? Please Explain:
- 3 Please give the dates you lived there.
From / / to / /
- 4 Did you claim Council Tax Support at your old address?
Yes No

D**Questions about your partner****We use partner to mean:**

- a person you are married to or a person you live with as if you are married to them; or
- a civil partner or a person you live with as if you are civil partners.

- 1 Do you have a partner?
Yes No
- 2 Your partner's title
Mr Mrs Ms Miss
- 3 Partner's full name
- 4 Date of birth
- 5 National Insurance number
- 6 What date did your partner move in?
- 7 What was your partner's previous address?

E

Questions about children who live with you

Do you have any children who live with you? If 'Yes' please give details below.

| Full name of child | Relationship to you or your partner | Date of birth | Boy or girl? | Do you get child benefit? | If no, who gets child benefit for them? | Do they receive disability living allowance? |
|----------------------------|-------------------------------------|-----------------|--------------|---------------------------|---|--|
| <i>Example: John Smith</i> | <i>Son</i> | <i>04/01/01</i> | <i>Boy</i> | <i>Yes</i> | <i>No</i> | <i>No</i> |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

F

Questions about other people in your home

1 Does anybody live with you and your partner? For example grown up son or daughter, friend or lodger? If 'Yes', please give details below.

| Full name | Date of birth | National Insurance | Male or Female? | Relationship to you or your partner | Please provide proof of their income | Date moved in? |
|---------------------------|-----------------|--------------------|-----------------|-------------------------------------|--------------------------------------|-----------------|
| <i>Example: Ian Smith</i> | <i>01/09/69</i> | <i>AB123456C</i> | <i>Male</i> | <i>Son</i> | | <i>01/01/02</i> |
| | | | | | | |
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| | | | | | | |

If anyone listed above (who is not a lodger) is working, we must see their last five weekly or last two monthly wage slips. If you do not provide this, it may lead to us paying you less benefit.

If any of these people are married to each other or living together as if they are married, or civil partners or living as if they are civil partners, please give details in section N.

2 Do any of the above people pay you rent?

3 If 'Yes', give their names and the amount they each pay you

G

Do any of the following apply to you or your partner? (Please write Yes or No in the appropriate boxes.)

| | YOU | YOUR PARTNER |
|--|-----|--------------|
| 1 Have you come to live in the UK in the last two years? | | |
| 2 Does your passport say that you do not have recourse to public funds? | | |
| 3 What is your nationality? | | |
| 4 When did you move to the UK? | / / | / / |
| If this is within the last two years have you been working for at least three months before making this claim? | | |
| How much were you being paid each week? | £ | £ |
| 5 Are you a full time student? | | |
| 6 If 'Yes', what course and qualification are you studying? | | |
| 7 Are you an apprentice? | | |
| 8 Are you registered blind? | | |
| 9 Have you been unable to work for more than 52 weeks because of illness or disability? | | |
| 10 Does anyone get Carers Allowance for looking after you? | | |
| 11 Do you have a car provided by Motability or an invalid vehicle? | | |
| 12 Are you or your partner in hospital at the moment? | | |
| 13 If 'Yes', what date did you go in? | / / | / / |
| 14 Are you or your partner in legal custody? | | |

H

Questions about the money you have coming in (Please write Yes or No)

If you are 55+ do you have a private pension from which you could draw out money?

H

Questions about the money you have coming in

(Please write Yes or No in the appropriate boxes.)

Do you or your partner get any of the following?

| | YOU | YOUR PARTNER |
|---|-----|--------------|
| Universal Credit | | |
| Income Support | | |
| Jobseeker's Allowance income-based | | |
| Employment and Support Allowance income-related | | |
| Attendance Allowance | | |
| If 'Yes', how much each week? | £ | £ |
| Disability Living Allowance care component/Personal Independence Payment daily living component | | |
| If 'Yes', how much each week? | £ | £ |
| Disability Living Allowance/Personal Independence Payment – mobility component | | |
| If 'Yes', how much each week? | £ | £ |
| Working Tax Credit? | | |
| If 'Yes', how much each week? | £ | £ |
| Child Tax Credit | | |
| If 'Yes', how much each week? | £ | £ |

9 Please list all your and your partner's income below.

You need to include state or work pensions, Pension Credits, contribution-based Jobseeker's Allowance, contribution-based Employment and Support Allowance, Child Benefit, maintenance or child support, rental income, charitable or voluntary payments or any other income you receive on a regular basis.

If you and your partner have no income, write 'none' and explain why you have no income and how you are meeting your day to day living costs in section N.

If you do not declare all your income, you may have to pay back some or all of the award. We may also prosecute you.

| Type of income you receive | Received by who | Amount received | How often? |
|------------------------------|-----------------|-----------------|----------------|
| <i>Example: work pension</i> | <i>partner</i> | <i>£56.86</i> | <i>monthly</i> |
| | | | |
| | | | |
| | | | |
| | | | |

Questions if you are working

| | YOU | YOUR PARTNER |
|--|-----|--------------|
| 1 What is your job title? | | |
| 2 When did you start this job? | / / | / / |
| 3 How many hours do you work on average each week? | | |
| 4 If you work term time only please state how many weeks you work? | | |
| 5 How often do you get paid? | | |
| 6 How are you paid, for example, cash, cheque or BACS? | | |
| 7 When is your next pay review? | / / | / / |
| 8 If this is a temporary job, when is it due to end? | | |
| 9 What is the name and address of your employer? | | |
| 10 Do you pay into a pension plan or occupational pension scheme? | | |
| 11 Do you have any other jobs? | | |
| If 'Yes' please give full details in section N. | | |
| 12 Are you receiving statutory sick pay, or statutory maternity pay at the moment? | | |

Proof: Please provide wage slips to confirm your income.

If you are weekly paid you need to give us the last five consecutive slips.

If you are paid fortnightly you need to give us the last three consecutive slips.

If you are paid monthly you need to give us the last two payslips

If you are unable to provide these slips you can ask your employer to fill in one of our employer's earnings certificate.

J

Questions if you or your partner are self-employed (If you are not self-employed, go to section L.)

| | YOU | YOUR PARTNER |
|--|-----|--------------|
| 1 What is the name of your business? | | |
| 2 What is the business address? | | |
| 3 How many hours do you work on average each week? | | |
| 4 What type of work do you do? | | |
| 5 What date did you start? | / / | / / |
| 6 Who else is involved in the business? | | |
| 7 Do you pay into a pension plan? | | |

Note: If you are self-employed, you must give us proof of your income by providing detailed audited accounts for the last year, if available. If audited accounts are not available, return this form straight away and ask for a Self-Employed Earnings form. You can download a form from our website. If you do not have any income, please tell us in Section N what you are living on. Please note we do not accept self assessment tax returns as proof.

K

Questions about childcare

1 Do you, or your partner, pay childcare costs to a registered childminder or pay for an after-school club or play scheme?

Yes No

2 If 'Yes', please give the name and address of the childminder or play scheme or club together with their OFSTED or Social Services registration number

3 Date child care started?

 / /

4 How much do you pay?

£

How often?

5 Names of children who attend.

Please provide receipts for payments made or ask us for a child care certificate

L

Questions about accounts and investments

If you get Income Support, income-based Jobseekers Allowance, income-related Employment and Support Allowance or Pension Guarantee Credit go to section N.

1 Do you or your partner have any bank, building society or post office accounts?

If 'Yes', please give details below. If you have more accounts please give details in Section N.

| Type of account or savings | Account number | Amount | Held by |
|---|-----------------|-------------|----------------|
| <i>Example: Natwest current account</i> | <i>12345678</i> | <i>0.01</i> | <i>Partner</i> |
| | | | |
| | | | |
| | | | |

2 Do you or your partner have any stocks or shares?

If 'Yes', please give details below.

| Name of company | Number of shares | Held by |
|--------------------|------------------|-----------|
| <i>Example: BT</i> | <i>225</i> | <i>me</i> |
| | | |
| | | |

3 Do you or your partner have any National Savings Certificates or Premium Bonds?

If 'Yes', please give details below.

| Name | Issue type | Amount invested | Date of issue | Held by |
|-------------------------|-----------------|-----------------|---------------------|----------------|
| <i>Example: Premium</i> | <i>12345678</i> | <i>£100</i> | <i>19 July 1978</i> | <i>Partner</i> |
| | | | | |
| | | | | |

4 Do you have any other form of capital?

If 'Yes', please give details and amounts in section N.

5 Do you have any savings that are held in cash?

If 'Yes', please give details and amounts in section N.

6 Does anyone owe you any money?

If 'Yes', please give details and amounts in section N.

M

Questions about property and land

1 Do you, your partner or your children own any property (other than the home you live in), land or holiday homes, in the UK or abroad? This includes properties and land on which there is a mortgage or loan, held in trust or jointly held with another person.

If 'Yes', please give the address of each property in section N. Please ask us for a valuation of property form.

N

Other information

If you want to give any more information that would help us work out your benefit, please give details in the box below. If there is not enough room, please add a separate sheet of paper.

Please remember to sign page 10

O

Declaration

Please read this declaration carefully.

- I declare that the information I have given is correct.
- I understand that if I give information that is false, I may be prosecuted.
- I understand that if I supply or allow to be supplied any documents that I know to be false, I may be prosecuted.
- I authorise you to make any necessary enquiries to check the information on this form. This includes contacting my bank, building society, employer, pension provider, Her Majesty's Revenue and Customs, D.W.P and other local authorities.
- I authorise you to check the information I have given with other sections within the council and the Valuation Office Agency.
- I understand that information disclosed on this form may be supplied to Experian, a Credit Reference Agency, and any investigations could possibly include checks on undeclared cohabiters.
- I live at the address given on the form, and have no income other than that I have declared.

- I am not claiming Council Tax Support elsewhere.
- I must tell the Benefit Section about any changes within a month of them happening.

Examples of changes include if:

- Tax Credit changes;
- Pension Credit changes;
- You or your partner start working or change employer;
- You or your partner have a baby;
- You or your partner go into hospital;
- Anyone leaves or joins the household;
- The income of anyone in your household goes up or down;
- A child leaves school or Child Benefit stops;
- You or your partner's investments or savings go up or down; or
- You or your partner come off Income Support, Jobseeker's Allowance, Employment and Support Allowance or Pension Credit or Universal Credit.

Remember if you change address, you must fill in a new form.

I understand that if I knowingly continue to get Council Tax Support that I am not entitled to I may be prosecuted.

We will pass the information you give on this form to our Anti-Fraud Team as part of our commitment to reduce crime. We use the information to check against other local and national government services, to detect and prevent crime only. This includes the D.W.P, Housing Benefits Matching Service and the Audit Commission's National Anti-Fraud Initiative.

Data Protection declaration

There are now government rules that affect people who are from a country other than the United Kingdom and are claiming Council Tax Support.

We may use this information to tell you about changes to the service.

We may also share information with other departments within the Council and partner organisations that are involved in the planning and delivery of local services.

The information in this form is personal and will be held by the authority. As a result, it is covered by the Data Protection Act 1984, amended by the Data Protection Act 1998.

Because of these changes, we have now registered the Council Tax database for access by the Home Office.

P

Signatures

I have read and understand the declaration on page 9 and 10.

Your signature

Date

Your partner's signature

Date

If someone has filled in the claim form for you please ask them to complete this section. This includes an agent, appointee, relative or friend.

I have filled in this form on behalf of

As they cannot fill in the form because

I am (block capitals)

Relationship to person claiming

I have read each question and recorded the answers given. As far as I know they are true and complete.

Your signature

Date

Remember, unless you are the appointee or have Power of Attorney, the person claiming must also sign the form.

- 1 Your fully completed and signed claim form. You must answer every question.
- 2 Proof of identity for you and your partner if you have a partner. Please note that two separate items for each of you are required.
- 3 Proof of national Insurance number for you and your partner if you have a partner.
- 4 Proof of income for you and your partner if you have a partner.
- 5 Proof of all income for you and anyone else who lives with you (including your children or a grown up son or daughter or other relative living with you).
- 6 Proof of any savings, investments, stocks, shares, property or any other capital held by you, your partner or your children including any bank or building society current accounts.

Send us your claim form as soon as possible, but within one calendar month, even if you do not have all the proof now.

Proof of identity can be any of the following:

- Birth certificate, marriage certificate or divorce, separation or annulment papers (in your current name).
- Passport (current and valid) or National Identity Card.
- Medical Card.
- Gas, electricity, phone or water rates bill, but not a mobile phone bill, in your name at your current address.
- Driving licence (photocard or paper) – full or provisional.
- Home Office standard acknowledgement letter (SAL1 or 2).
- Original documents are required to prove identity

Proof of your National Insurance number (NINo) can be one of these:

- P45 or P60.
- Letter from the Inland Revenue about tax.
- Letter that the Job Centre or Pension Service has sent to you (not hand-written).
- NINo card (not hand-written).

Proof of Income and capital can be any of the following:

- Pay slips (the last five weeks or the last two months pay slips – no gaps) or
- Certificate of earnings completed in full and stamped by your employer.
- Trading accounts for the last financial year if you are self-employed. If you have been trading for less than a year please ask for a self employment form.
- State Benefit decision letter.
- Bank or Building Society or Post Office account pass books or statements showing the last two months' transactions.

These are examples, not a full list.

Please provide proof of ALL your household's income and capital.

To pay by Direct Debit please complete this section

Direct Debit Instruction

Name(s) of Account Holder(s)

| |
|--|
| |
| |

Bank/Building Society account number:

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

Bank Sort code

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

| | |
|-------------------------------|-----------------------|
| To the manager of | |
| _____ | Bank/Building Society |
| Address | |
| _____ | Postcode |
| Council Tax Account Reference | |
| _____ | |

Instruction to your Bank or Building society to pay by Direct Debit

Originators Identification Number

| | | | | | |
|---|---|---|---|---|---|
| 9 | 9 | 0 | 8 | 5 | 6 |
|---|---|---|---|---|---|

Information to the Council – not part of the DD instruction

Please tick the date you wish to pay each month:

1st

 15th

How many months would you like to pay over:

10 Months

 12 months

Instruction for your Bank/Building Society

Please pay Tunbridge Wells Borough Council Direct Debits from my account detailed in this instruction, subject to the safeguards assured by the direct debit guarantee. I understand that this instruction may remain with Tunbridge Wells Borough Council and, if so, details will be passed electronically to my Bank/building society.

| |
|--------------|
| Signature(s) |
| |
| |
| |
| Date |
| |

Tunbridge Wells residents should return their forms by post to:

Revenues & Benefit Section
PO Box 1358
Maidstone
ME14 9US



For further advice and information:

Visit our website at www.tunbridgewells.gov.uk e-mail: benefits@tunbridgewells.gov.uk

Telephone **01892 526121** The lines are open: 8.30am to 5pm Monday to Friday

Minicom: **01892 545449**

Fraud costs you many thousands of pounds each year. If you believe you know of anyone taking money from us to which they are not entitled, please phone

0800 854 440

This is a free 24-hour fraud hotline. We will treat all calls in the strictest confidence.