



# Earnings

Are you or your partner in paid work?

You: Yes  No

If 'Yes' please give your employer's name and address

## You

  

Postcode

Job Title

Payroll or reference no.

Date you started

How often are you paid?

Weekly

4 weekly

Monthly

Other (please give details)

Is the job for a fixed period?

Yes

No

If 'Yes' please give details

How many hours do you work each week?

Amount paid before any deductions?

£

Do you receive Tax Credits in your pay? Yes

No

How are you paid?

Cash in hand

Crossed Cheque

Direct to bank account

Other

When was your last pay rise?

When is your next pay rise?

Do you pay into a pension scheme? Yes

No

Your partner: Yes

No

## Your partner

  

Postcode

Job Title

Payroll or reference no.

Date they started

How often are they paid?

Weekly

4 weekly

Monthly

Other (please give details)

Is the job for a fixed period?

Yes

No

If 'Yes' please give details

How many hours do they work each week?

Amount paid before any deductions?

£

Do they receive Tax Credits in their pay? Yes

No

How are they paid?

Cash in hand

Crossed Cheque

Direct to bank account

Other

When was their last pay rise?

When is their next pay rise?

Do they pay into a pension scheme? Yes

No

## Notes

*The Council reserve the right to amend the claimant to partner and vice-versa if the change in applicant increases the amount of the award*

We have to see **original evidence of your earnings.**

### Earnings

Please let us see at least five consecutive payslips if you are paid weekly, your last three payslips if you are paid every fortnight and your last two payslips if you are paid every month. Please also send us your partner's payslips. If you cannot find the payslips or it is a new job, please contact the benefits team.

If you carry out any work which you do not get paid for or you receive income in kind, please give details under 'any other changes'.

### Private Pension Payments

Please let us see proof of the pension scheme and the payments you make.

Please let us know if you receive any of the following:

- Bonuses
- Overtime
- Commission
- Tips
- Non cashable vouchers

If 'Yes' is it a company scheme?  Private scheme?

If 'yes' is it a company scheme?  Private scheme?

If 'Yes', how much do you pay each month? £

If 'Yes', how much do they pay each month? £

Do you pay childcare costs? Yes  No

Do they pay childcare costs? Yes  No

Do you have more than one job? Yes  No

Do they have more than one job? Yes  No

**If 'Yes', please give details in 'any other changes' and give the details that you have given above.**

# Self-employed earnings

Are you or your partner self-employed?

You: Yes  No

Your Partner: Yes  No

Business start up date?

Business start up date?

**If 'Yes', what is your trade/ profession?**

**If 'Yes', what is your trade /profession?**

Name and address of business


Name and address of business


How many hours do you work each week?

How many hours do they work each week?

Do you use your home for business purposes? Yes  No

Do they use their home for business purposes? Yes  No

How many rooms do you use?

How many rooms do they use?

Do you pay into a private pension scheme? Yes  No

Do they pay into a private pension scheme? Yes  No

If 'Yes', how much do you pay each month?

If 'Yes', how much do they pay each month?

Are you registered for VAT? Yes  No

Are they registered for VAT? Yes  No

Do you have more than one job? Yes  No

Do they have more than one job? Yes  No

(if 'yes' please give details under 'any other changes')

## Notes

### Self-employed earnings

Please fill in the form we will send you and let us see any accounts or other proof you have. Please provide your accounts for your last financial year.

**If you do not have accounts we will send you another form**

Please answer all of the questions

# Cash, savings and investments (see notes)

Please list all your cash, savings and investments and send us up-to-date proof of these amounts. If you do not have enough space for all of your investment details, please give details under 'any other changes'.

## You must tick 'yes' or 'no'

Do you or your partner have any of the following?	You			Your partner		
A current account	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
A deposit account	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
A Building Society account	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
A Post office or Giro account	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
Premium Bonds (if over £250)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
Cash savings	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
Income bonds/ Savings bonds/ Investments bonds <i>(Please say which)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
National Savings Certificates (please give details of the number of units held and the date of issue)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
Share or unit trusts	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
Stocks, shares, SAYE, other (please give names of shares and the number)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £
Do you have a PayPal or any other online account?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £	Yes <input type="checkbox"/>	No <input type="checkbox"/>	How much? £

Do you or your partner have any other cash, savings or investments, or money owing to you which you have not included above?  
(such as PEPs, TESSAs, ISAs)

If 'Yes', please give details (please say which and provide evidence of their current value)

Yes  No

Do you, your partner, or dependant children own property or land other than your home? (either in this country or abroad)

If 'Yes', please give the address. We may need to contact you for more information.

Yes  No

Have you or your partner lent anyone money that they still have to pay back?

If 'Yes', please give details. We may need to contact you for information.

Yes  No

## Notes

### Proof

You must send us **original** evidence if you have any of these.

**If you, your partner, or both of you have cash, savings and investments of over £16,000, we cannot award you benefit.**

**If you are of working age and have savings of over £6,000, we cannot award you council tax support**

### Proof

#### Working age:

#### Bank accounts:

Please let us see statements covering at least the last two months, even if the account is overdrawn.

An advice slip from a cash machine is not enough.

#### Building society accounts

Please let us see your up-to-date passbook or statements covering at least the last two months.

#### National Savings

Please let us see the relevant certificate or bond document.

#### Shares, bonds, unit trusts

Please let us see the share certificates or the last dividend statement.

#### Pension Age

Send original evidence to the Pension Service.

# Other income (but not your earnings) (See notes)

Please look at the list below (and over the page)

You must tick 'yes' or 'no' to each question. If 'Yes' please enter the amount and show how it is paid.

Please note not all questions may apply, depending on whether you are 'pension age' or 'working age'. Please see notes

	<b>You</b>		<b>Your partner</b>
<b>Pension age (see notes)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you or your partner receive Guarantee Credit?			
<b>Working age (see notes)</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you or your partner receive Income Support, Job Seeker's Allowance (Income Based), Universal Credit or employment and support allowance?			

**Please complete the section below: Please ensure you tick either 'yes' or 'no'**

Do you receive any of the following? <b>Pensions</b>	You				Your partner					
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Details of how it's paid (DD Giro etc)	If 'yes' how much do you get?	How often is it paid?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Details of how it's paid (DD Giro etc)	If 'yes' how much do they get?	How often is it paid?
State Retirement Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Private Pension Date expected to Increase / /	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Annuity Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Widow's Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Widow's Mother's allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Widow's Dependant's Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
War Disablement Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Industrial Disablement Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	
Any other Pension	Yes <input type="checkbox"/>	No <input type="checkbox"/>		£		Yes <input type="checkbox"/>	No <input type="checkbox"/>		£	

Do you or your partner receive Savings Credits?      Yes  No       Yes  No

How much do you get?	How often is it paid?

How much do they get?	How often is it paid?

## Notes

### Working Age: Private Pension Payments

Please let us see original proof of the pension scheme and the payment you make.

### Proof

For each type of income you or your partner receive, please let us see **original** evidence of one of the following.

- The latest award letter
- A bank statement showing the payment.

### Pension Age:

Send original evidence to the Pension Service

### War Disablement Pension

Please let us see the original letter of award showing the break down of this pension.

# Benefits and Allowances

**You**

Yes  No

**Your partner**

Yes  No

Have you or your partner applied for any other benefit and not yet received it?

If 'Yes' please tell us which benefit and the date you claimed it - you will need to send us the award letter

 /  / 

 /  / 

Are you or your partner provided with an invalid car?

Yes  No

Yes  No

**(see notes)** you must tick 'yes' or 'no' to each question. If you tick 'yes', show the amount and how often it is paid.

Do you receive any of the following? <b>Benefits and Allowances</b>	You					Your partner						
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Method of payment	Date started	If 'yes' How much? £	How often is paid?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Method of payment	Date started	If 'yes' How Much? £	How often is it paid?
Carers allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
If 'Yes' who do you care for?												
Child Benefit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Child Tax Credit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Disabled Persons Tax Credit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Employment & Support Allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Employment Training Allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Fostering or Guardian's Allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Industrial Injuries Benefit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Attendance allowance (for people over 65)	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Disability living allowance / Personal independence payment Care Component	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
- Mobility Component	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Jobseeker's Allowance (contributions based)	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Long-Term Incapacity Benefit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Maternity Allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Universal Credit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Working Tax Credit	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	
Any other Benefit or Allowance	Yes <input type="checkbox"/>	No <input type="checkbox"/>			£		Yes <input type="checkbox"/>	No <input type="checkbox"/>			£	

## Notes

### Proof

(Send us **original** evidence if you are getting any of these benefits and allowances)

### Child benefit

Please let us see one of the following for each child.

- The latest award letter:
- A bank statement showing the payment

### Working Tax Credit

### Child Tax Credit

### Disabled Persons Tax Credit

### Universal Credit

You must send us the whole award letter.

### Tax Credit

If tax credits are paid by your Employer this will be shown on your pay slip

**You must advise us if you have an entitlement to an allowance or benefit but which due to your circumstances do not actually receive payment.**

**This entitlement may affect your claim.**

## You

## Your partner

Do you receive any of the following? <b>Other income</b>		Method of payment	Date started	If 'yes How much?	How often is it paid?		Method of payment	Date started	If 'yes How Much?	How often is it paid?
Statutory Sick Pay (paid by your employer)	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Statutory Maternity Pay (paid by your employer)	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Youth Training Scheme Payment of Training Credits	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Maintenance payments you receive	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Student Grant Loan	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Payment from boarders	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Amount from letting or subletting part of a property	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Payments from charities or voluntary organisations	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	
Any other income (please give details)	Yes <input type="checkbox"/> No <input type="checkbox"/>			£		Yes <input type="checkbox"/> No <input type="checkbox"/>			£	

### Nil income

Are you or your partner not receiving any income at the moment? Yes  No

Yes  No

If yes, from what date have you not had any income



### Other information:

Please give any extra information that you feel may help us to calculate your benefit. For example, if you have more than one job, are working irregular hours or have had a change in the composition of your household.

## Money you have to pay out

Do you or your partner have any of the outgoings below?

Yes  No

### You

### Your partner

Child minding fees to a registered childminder or nursery

**You will also need to supply a letter from the registered childminder detailing recent weekly payments, whether this is likely to be representative of future payments, and the childminder's registration number.**

Parental contribution towards a son's or daughter's student maintenance grant.

**You need to provide us with the deduction authority's assessment of your parental contributions and recent bank statements showing regular payments.**


## Notes

### Proof

You must send us **original** evidence of any of this income.

### Students

Full-time students can only get housing benefit in special cases.

### Any other Income

This could include payments you receive from insurance policies to cover mortgage repayments and loss of earnings. Income in kind including credits you receive under local exchange trading schemes.

# Any other changes

Use this box to tell us anything else you think we should know about. Use a separate sheet and attach it to this form if you need to.

**\*\*\*\*\* If your council tax account includes any discounts or exemptions, for example single occupier discount, and your household circumstances change you must advise the benefits team immediately. \*\*\*\*\***



# Declaration

Even if someone else has filled in the form for you, you must sign this declaration if you can. If you have a partner, they must sign this declaration as well.

Please read the declaration carefully before you sign and date it.  
I understand that:

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for housing benefit and/or council tax support. You may check some of the information with other sources within the council, rent offices and other councils.
- You may use any information I have provided in connection with this and any other claim for social security benefits that I have made or may make.
- You may give some information to other Government organisations, other Local Authorities and other departments of Torridge District Council for the prevention and detection of crime.

I know I must promptly let the council know about any change in my circumstances which might affect my claim.

I declare the information I have given on this form is correct and complete.

Signature of the person claiming  Date

Partner's signature  Date

If this form has been filled in by someone other than the person claiming:  
Please tell us why you are filling in the form for the person claiming.

Name of the person who filled in the form

Signature of the person

Relationship to the person claiming  Date

# Privacy Notice

Torrige District Council collects stores and processes your personal information in accordance with the requirements of the General Data Protection Regulation (Regulation (EU) 2016/679) and Data Protection Act 2018.

Our lawful basis has been determined as:

- Legal Obligation – in relation to personal data
- Social Security Law – in relation to ‘special category’ personal data

Personal information provided on this form may be shared with other council services where this assists in the delivery of those services.

Personal information provided on this form may be shared with third parties where we are legally obliged to do so, or where this is necessary to enable us to provide the service requested.

To view our full privacy policy including information on your rights, how to contact the Data Protection Officer, data retention information, more detail on information sharing and how to provide feedback or make a complaint, please see the privacy pages of our website: [www.torrige.gov.uk/privacypolicy](http://www.torrige.gov.uk/privacypolicy)

Alternatively, a full copy of our privacy policy can be viewed at our main office or a copy can be requested by writing to:

Data Protection Officer  
Riverbank House  
Bideford  
Devon  
EX39 2QG.

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