



BOROUGH OF HYNDBURN
HOME OF THE ACCRINGTON PALS

**BENEFITS, REVENUES
AND CUSTOMER CONTACT**

Accrington Town Hall
Broadway Offices
Accrington
BB5 1EZ

Housing and Council Tax Support

Moving House

Section 1: About you

1. Your Housing Benefit Reference	
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1a. Your Council tax number	
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2. Please provide details for you and your partner if you have one:	You	Your partner
Name		
Date of birth		
National Insurance Number		
Your telephone number		

Section 2: Your old address

3. Please provide your OLD address	
Address	
Postcode	

4. Date you moved out	
4a. Date you moved your furniture out	

5. Please provide the full names of any residents left in the property when you moved out.	1.
	2.
	3.
	4.
	5.

6. Please provide the names of the new owner/occupiers or tenants if you have these details.	
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<p>6b. If rented:</p> <p>Please provide the date that your tenancy ended</p> <p>Please provide the name and address of the Landlord/Agent responsible for this property.</p>	
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Section 3: Your new address

7. Please provide your NEW address	
Address	
Postcode	

7a. Please provide the full names of all residents over the age of 18			
Name	Owner	Tenant	Partner
1.Mr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.Mr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.Mr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.Mr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7b. Do any of the residents fall into a category for which there is a disregard? If so provide details. <ul style="list-style-type: none"> • Students or Student Nurses • Apprentices or Trainees • Severely Mentally Impaired • Aged 18, 19 or 20 and in Further Education • Aged 18, 19 or 20 and still entitled to child benefit payments 			
Name	Disregard category		
1.Mr			
2.Mr			

3.Mr	
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8. Please provide your Landlord or your property agent's name and address.

Name	
Address	

8a. Is this person the landlord or agent?	Landlord <input type="checkbox"/>	Agent <input type="checkbox"/>
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8b. Does your landlord live with you?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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8c. Is your Landlord a Registered Social Landlord or Housing Association?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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8d. Are you or your partner, or any of your children (or your partner's children) related to your landlord? Yes No
If so, please tell us who is related to your landlord and what is their relationship?

Name	Relationship

9. Date your tenancy began

9a. Date you moved in

9b. Date you moved your furniture in

9c. Type and length of tenancy e.g. 12 month shorthold

9d. How much is your rent? £ per

We will need to see proof of your new tenancy agreement – please see Section 8, Supporting documents for further details.

10. Does your rent include any of the charges listed below? If so, please tell us how much.

Water rates	
Heating	
Lighting	
Hot water	
Fuel for cooking	
Laundry	
Cleaning rooms or windows	
Gardening	
Garage or parking space	
Personal care or support	
Any other charges (please specify)	
Any meals (please tell us which meals)	

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11. What type of property is your new home?

Terraced house <input type="checkbox"/>	Detached house <input type="checkbox"/>	Semi-detached <input type="checkbox"/>
Flat in a house <input type="checkbox"/>	Flat in a block <input type="checkbox"/>	Flat over a shop <input type="checkbox"/>
Bed-sit or rooms <input type="checkbox"/>	Hostel <input type="checkbox"/>	Board and lodgings <input type="checkbox"/>
Caravan <input type="checkbox"/>	Mobile Home <input type="checkbox"/>	Houseboat <input type="checkbox"/>
Other (please specify) <input type="checkbox"/>		

12. How much or which part of the property do you occupy?

Whole building <input type="checkbox"/>		
Front <input type="checkbox"/>	Middle <input type="checkbox"/>	Back <input type="checkbox"/>
Ground floor <input type="checkbox"/>	First floor <input type="checkbox"/>	Second floor <input type="checkbox"/>
Other (please specify) <input type="checkbox"/>		

13. If your house is privately rented, please tell us about the rooms in the house.

	Number of rooms	Shared with other	For use by your household only
Living room			
Bedsitting rooms			
Bedrooms			
Bathrooms			
Toilets			
Kitchen			
Other rooms			

14. Is your property:

Furnished <input type="checkbox"/>	Unfurnished <input type="checkbox"/>
Partly furnished <input type="checkbox"/>	Minimally furnished <input type="checkbox"/>

15. Does the property have central heating?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
16. Who is responsible for decorating the house?	Me <input type="checkbox"/>	Landlord <input type="checkbox"/>

Section 4: Paying your Council Tax

17.	Please indicate on which day of the month you wish your instalments to be set
1st of each month	<input type="checkbox"/>
10th of each month	<input type="checkbox"/>
20th of each month	<input type="checkbox"/>
28th of each month	<input type="checkbox"/>

Section 5: Your household

18. If details of the people living with you have changed, please tell us about those changes in this section.

This includes any joint tenants. If there have not been any changes, please leave this section blank.

Please use another sheet of paper if you need more space.

Name	Date of Birth	Relationship to you	Income per month

19. Are any of the people in this property married to each other, civil partners, or living together as if they are married or civil partners? We call these people *partners*.

	Is the partner of	
	Is the partner of	

NOTE: If someone new has moved in with you in your new property, and this person is not dependant on you then you must provide details of their income. A non dependant is anyone who is **not**:

- your husband/wife/partner,
- your child or someone you receive child benefit for or a joint tenant with you.

20. If any of the residents you have named are in any of the following categories,

- Students or Student Nurses
- Apprentices or Trainees
- Severely mentally impaired
- Aged 18, 19 or 20 and in Further Education
- Aged 18, 19 or 20 and still entitled to child benefit payments

please use this space to tell us and we will contact you about any discounts which may be applicable. Details of discounts and downloadable forms can be found online at www.hyndburnbc.gov.uk/counciltax

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Section 6: Your income, savings and capital

21. Has your income or your partner’s income changed? If so, please tell us about all changes to your income below.

If you have not had any changes, please leave this section blank.

If your income has changed, you must provide proof of the changes. Proof can be

- your wage slips
- a certificate of earnings from your employer
- a letter from your employer

Type of Income	Date of change	Details of change (amount and frequency of payments)

22. Have your or your partner’s saving and/or capital changed? If so, please tell us about all changes to your and your partner’s saving and/or capital below.

If you have not had any changes, please leave this section blank.

If your or your partner’s savings and/or capital have changed, you must provide proof of the changes. Proof can be

- your bank statements,
- your building society statements,
- your investment statements

Type of saving or capital e.g. name of account	Date of change	Details of change and current balance

Section 7: Other changes

23. Please use this space to tell us about any other changes you have had and have not been included in any of the other questions on this form.

24. If your landlord is not a Registered Social Landlord, you can choose to have your payments sent to you directly or directly to your bank. Please tell us which payment method you would prefer:

Please send the cheque to me Please send the cheque to my bank

24a. If you have chosen to have your cheque sent to your bank, please provide your bank details below.

Name of Bank	
Bank's address	
Account Holder's name	
Sort Code	
Account Number	

Section 8: Declaration

Even if someone else has filled this form in form you, you must sign this declaration if you can.

Please read this declaration carefully before you sign it:

- I understand that this claim form is made to you, my local council.
- I confirm that as far as I know, this information I have provided on this form is correct and complete
- I understand that if I have given information that is incomplete or incorrect that you may take legal action against me
- I agree that you will use the information provided to process my claim for Housing or Council Tax Benefit, or both, you may check some of the information with other sources as the law allows.
- I know that I must let you know in writing straight away about any change in my circumstance that could affect my claim.
- The council will use your information in line with the Data Protection Act 1998. We have a duty to protect public funds and we may use the information you have given us or share it with other organisations to prevent and detect fraud.

- The council will also share your information if we have a legal duty to do so, or where we believe that by doing so we can provide you with a better standard of service.

Signature of the person claiming	
Please print your name here	
Date	

Please note, we may use your telephone and email details to contact you by telephone, SMS or email with information regarding your Council Tax account and updates in relation to Council Tax information.

If you prefer not to receive these useful updates, please tick this

If this form has been completed by someone other than the claimant or claimant's partner, please tell us why you are filling this form in on behalf of the claimant.

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Your name if you have completed this form for the claimant	
Your signature	
Your relationship to the claimant	
Date	

Sharing information with your Landlord.

Sharing information with your landlord could help us to deal with your claim more quickly and reduce the risk of you falling behind with your rent because of your claim being delayed. If you give us permission, we would be able to tell your landlord whether:

- You have claimed Housing Benefits
- We have made a decision on your claim, or
- We need more information to make a decision on your claim.

We will not give your landlord any information about:

- Your personal household circumstances, or
- Your financial circumstances

It will not affect your claim if you do not give us permission to discuss your claim with your landlord. If you want to give us permission to discuss your claim with your landlord, please sign on the next page.

Signature	
Full name (please print)	
Date	
Sharing information with someone else.	
If you would like to give anyone else permission to discuss your claim with us, you can do so by telling us about them here.	
Their name	
Their relationship to you	
Your signature	
Date	

Section 9: What to do next

In order to prevent an overpayment of your benefit, your claim may be suspended until we have received the information we need as well as any supporting documents.

If we do not receive this form within 1 calendar month of the date you told us about your house move, we will assume that you no longer wish to claim benefit and your claim will be cancelled.

Supporting Documents

To support your claim, you may need to provide supporting evidence or documents. We will only accept original documents, not photo copies. We will return all original documents to you.

Please use this box to list the information or documents you have provided to support your change of address such as your new tenancy agreement.

If you are not able to provide all documents, please tell us here. You have one calendar month from submitting this form to provide this information. If you do not provide this information, your claim will be cancelled

Where to send your documents

You have several options for returning this information:

You can drop it in our post box: Our post box is on the right hand side of the automatic doors at the Broadway entrance to our offices. This sign-posted steel post box is secure and can be used 24 hours a day.

Post your documents to us at the following address:

Hyndburn Borough Council
Housing and Council Tax Benefits
Accrington Town Hall
Broadway
Accrington
BB5 1EZ

Contact us

For help with your application, for any other enquiries or to book an appointment to see us in person, please contact us using the following details:

- Use our e-services online at www.hyndburnbc.gov.uk/benefits
- By email – enquiries@hyndburnbc.gov.uk
- By telephone – 01254 388 111
- Check your Benefits, Council Tax and Business Rates on line. Register at www.hyndburnbc.gov.uk to get your unique PIN number

Please call or email our Customer Contact Centre, we are open:

Monday	Tuesday	Wednesday	Thursday	Friday
9:00 – 17:00	09:00 – 17:00	10:00 – 17:00	09:00 – 17:00	09:00 – 17:00

Please send or bring ORIGINAL DOCUMENTS ONLY – we cannot accept photocopies.