



Statement of Means

If you have a Housing Benefit overpayment and you are paying this money back to us at a level that you think you can not afford, you can apply to us to reduce your repayments. This form is used to assess the level of repayment that your budget will allow whilst still paying enough of the money back to ensure that the overpayment is cleared in a reasonable time.

Why do we need this information?

We need this information in order to assess the level of repayment that you can reasonably afford. This form also asks you to make an offer of repayment that you think you can afford. Please provide as much detail as you can about your income and expenditure. We may ask you to provide proof of the information that you give us so please make sure that your details are accurate and up to date.

What happens next?

We will write to you either to accept your offer of repayment or to confirm the level of repayment that we think you can afford based on the information you have provided. We do not want to cause hardship and we will always try to accept reasonable offers of repayment.

Where to send this form

You can provide this information either by post to the address at the top of this page.

Our Broadway Offices are open:

Monday	Tuesday	Wednesday	Thursday	Friday
09.00 – 16.45	09.00 – 16.45	10.00 – 16.45	09.00 – 16.45	09.00 - 16.45

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

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

Monday	Tuesday	Wednesday	Thursday	Friday
09.00 – 16.45	09.00 – 16.45	10.00 – 16.45	09.00 – 16.45	09.00 - 16.45



Statement of Means

Please read the notes at the start of this form which will help you when completing your details.

Section 1 – personal details

Your name	
Your reference number	
Address	
Telephone number	
Your partner's name	

Section 2 – about your income. Please provide income details for you and your partner if you have one.

Type of income	You		Your Partner	
	Weekly	Monthly	Weekly	Monthly
Income Support				
Job Seekers Allowance				
Incapacity Benefit/ESA				
Maternity Benefit/Adoption Allowance				
Child Benefit				
Working Tax Credit				
Child Tax Credit				
Maintenance				
State Retirement Pension/Pension Credit				
War Pension or allowance				
Widow's Pension				
Disability Living Allowance/Mobility				
Carer's Allowance				
Private/Occupational Pension				
Rent from boarders, lodgers or other people living with you				
Wage or salary				
Self employed earnings				
Any other income				
Any other income				
Total Income				

We may ask for proof of the information that you provide.

Section 3 – About your expenditure or money you pay out.

Type of payment	Weekly amount	Monthly amount
Rent – do not include amount paid by Housing Benefits		
Mortgage		
Council Tax – do not include amount paid by Council Tax Benefits		
Water		
Gas		
Electricity		
Buildings and Contents Insurance		
Life Insurance		
Telephone – landline		
Mobile telephone		
TV Licence		
Food		
Travel – public transport including taxis		
Car insurance		
Car Tax		
Petrol		
Child Care costs		
Other (please specify)		
Other (please specify)		
Other (please specify)		
Total Expenditure		

Section 4 – Loans, credit cards and hire purchase agreements

Name of Company	Amount outstanding	Repayment Amounts	
		Weekly	Monthly
Total			

Section 5 – Repayment offer. Please tell us how much you think you can afford to repay on a weekly, fortnightly or monthly basis. We will use this offer as well as the information you have provided on this form to set a level of repayment that your budget will allow.

Weekly repayment offer	Fortnightly repayment offer	Monthly repayment offer
/week	/fortnight	/month

Please read the declaration on the following page (Section 6) carefully before signing and returning this form to us.

We may ask for proof of the information you have provided.

Section 6 - Your declaration –

Please read this declaration carefully before you sign it:

I understand the following:

- If I give information that is incomplete or incorrect, you may take action against me.
- You will use the information I have provided to set a repayment level for my Housing Benefit Overpayment.
- You may check the information I have provided with other sources within the council and other organisations.
- You may use the information I have provided in connection with this and any other claim for Social Security Benefits that I have had or may make in the future.
- You may give some of the information I have provided to other organisations if the law allows it.

I know that I must inform Hyndburn Borough Council of any changes in circumstances which may affect my claim.

I declare that the information I have provided is correct and complete.

Signed	Date
Please print your full name	
Name if not the claimant	
Relationship to claimant	
Address if different to the claimant,	

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