Application for discretionary housing payment/council tax discretionary relief

Name/address	Council tax account number:	York House 91 Granby Street Leicester LE1 6FB
	Housing benefit claim number:	Personal Visitors Customer Service Centre 91 Granby Street
	Contact number	Leicester LE1 6FB
		If you have any queries please call 0116 454 1006
	Date of issue	·
		If you need this form in Braille, large print or a different language
		call 0116 454 1006
	ments and council tax discretion	
1 0. 7	t can be made to help you meet your housi f your rent that you are required to make.	ng costs if your housing
In order to apply for discretionary hobe entitled to housing benefit	- · · · · · · · · · · · · · · · · · · ·	
Have a liability to pay rent; a		
require further assistance in	order to meet your housing costs	
A council tax discretionary reliest only. In order to qualify for council tax dis	f payment can be made to help you meet	your council tax liability
in order to quality for council tax dis	cretionary relief you must.	
<u>-</u>	City council tax reduction and/or	
Universal credit (UC) and/orrequire further financial assis		
 suffer hardship through ar 	n extreme event or natural disaster who mage, which could not reasonably have b	
I am applying for (tick one only):	discretionary housing payment	
	council tax discretionary relief	
	both	
	rm providing all evidence in ation, there may be a delay in our	
Please co	omplete all sections of this form	1

Postal Address Revenues & Benefits

Section 1: Reasons for your request

Please state why you need additional support with your housing costs (this includes council tax): This could be:...

to pay rent arrears. You must provide evidence of your arrears

to help you for a set period in the past due to your circumstances at that time.

for a short period to cover you until your circumstances change, for example you are expecting a baby and your benefits will change, or you are on a work based training course and hope to gain employment as a result..

to assist you on an on-going basis, while you see if you can negotiate the rent with your landlord

or find alternative accommodation.

to help you to move home (e.g. help with removal costs).

to pay a deposit or rent in advance for a new home.

Please give full details of why you need the additional financial assistance, and what effects a shortfall in funds to meet your housing costs will have on you and your family.

I would like to apply for additional support because				

Section 2: Household information Are you..... Sole occupier, under 35 years old $\ \square$ Sole occupier, over 35 years old $\ \square$ A lone parent $\ \square$ A couple, under retirement age □ A couple, over retirement age \Box An expectant mother □ Date your baby is due How many dependent children do you have (under 18 or 18-20 in full-time education) NB: These are children you will be getting child benefit for Please complete details Shares a **Female** Disabled? Age Male of your children below: bedroom? ✓ First child Second child Third child Fourth child Fifth child Sixth child (please use a separate page if you have more than six children) Please list all adults in your household (anyone aged 18 or over Name Date of birth Male/Female Disabled Income Is anyone who normally lives in your household a member of the UK armed forces Yes $\ \square$ No □

Male

Female

Date Of Birth

Full Name

Section 3 Information about your accommodation and your housing costs				
Council Tax				
Do you have arrears of council tax? Yes No If yes, how much do you owe? £				
Have you made an arrangement to pay these arrears? Yes No No				
<u>Mortgage</u>				
Do you pay a mortgage? Yes No				
Are you up to date with your mortgage payments? Yes \text{No} \text{D}				
If no, how much do you owe?£ Proof must be provided.				
Rent				
Do you pay rent for your home? Yes No Who do you pay?				
Date you moved in				
If this is within the last 12 months, please explain why you moved to this address				
Do you have rent arrears? Yes \Boxedow No \Boxedow				
If YES, how much are your arrears? £				
You must provide proof of these arrears (this should be in the form of a letter from your Landlord and/or your latest rent statement showing the arrears.)				
If you do not have any arrears, please explain how you have met your rent shortfall				
Have you asked your landlord to accept less rent?				
If no, what reason has your landlord/lady given?				

Section 3 Information about your accommodation and your housing costs
Has your landlord/lady asked you to leave the property Yes No
If yes, on what date did they ask you to leave?//
Adapted property
Has your property been adapted for your households disabled needs? Yes No
If yes please give full details of the adaptations.
Proof will be needed, this should be in the form of a letter from your Landlord explaining what adaptations have been done to your property.
Foster carers
Are you a registered foster carer needing additional bedrooms? Yes \(\square\) No \(\square\)
Are you currently fostering and have a child or children in your property? Yes \square No \square
Please confirm the date of your last placement//
Alternative accommodation
Have you applied for alternative accommodation? Yes No
If yes please give details
If no, please explain why

Section 3 Information about your accommodation and your housing costs
Are you registered with Leicester City Housing options service? Yes No If yes, what have they advised you to do?
If you have registered with housing options, are you actively bidding on alternative properties? Yes No
Do you have exceptional reasons why you cannot move? i.e. severe illness or recent bereavement. Yes No
i.e. severe illness or recent bereavement. Yes No No

Section 4: Budget Statement Please state the Income and Outgoings for you and your partner (if you have one) You MUST supply supporting evidence for any items marked with a *

Net wages (self) Net wages (partner)	much	often		much	often	use only
(self) Net wages			Mortgage/rent	much	OILEII	use only
Net wages			3.0			
(partner)			Rent arrears*			
(partitor)						
Self-employed earnings			Water rates			
JSA (CB)			Council tax			_
JSA (IB)			Council Tax arrears*			
Income support			Endowments/life assurance *			
Pension credit			Mortgage protection*			
(guarantee) Pension credit (savings)			Home insurance			
State retirement pension						
-			Electricity *			
Superannuation/ private pension			Gas *			
Maintenance			Arrears of fuel bills			
received						
Working tax credit			Telephone bill			
Child tax credit			Food bills			
Child			Housekeeping costs			
benefit						
Incapacity			TV licence/rental			
benefit						
Employment and			School meals		1	
support allowance			OL 41			
Attendance allowance			Clothing			
Disability living allowance			Laundry			
Housing benefit			Maintenance paid*			
Contributions from			Child minding			
children living at home						
Contributions from			Credit card*			
other residents			Credit card			
Any other income			Loans/hire purchase*			
Vouchers or tokens in lieu of payments			Deductions for social fund loan			
			Other deductions from benefit *			
			Travelling expenses *			
			Road tax/car insurance			
			Oil/petrol *			
			Servicing*			1
Total			Prescriptions			
£.p			*			+
			Court Fines * Catalogue			
			Cigarettes			
			_			
			Any other outgoings*			
			Total £ . p			

You must provide your last 2 months bank statements

Do you run a car? If yes, please explain why this is required				
Please confirm if you have any other debts outstanding:				
Have you sought any advice on how to deal with these debts?				

Please read this declaration carefully before you sign and date it

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

I am aware that it is an offence to deliberately give false statement or withhold information in order to obtain a discretionary payment and that I may be prosecuted under the Theft Act 1968 if I do this.

I authorise Leicester City Council to make any enquiries it feels necessary to satisfy itself that the information I have given is true and complete.

I understand that the information that I have given on this form may be used by other departments of the council and may be checked against the records of other councils and government departments.

I agree to notify the council immediately of any changes in my circumstances which may affect the amount of discount that I receive; e.g. changes in the amount of any benefits or allowances that I receive, changes to the number of people who live with me, children leaving full-time education or any other matter that is covered by this form.

I also agree that the DWP or Job Centre Plus may provide the council with information about any benefits that I receive where it is relevant to this claim.

I fully understand that if I do not notify Leicester City Council's revenues and benefits service of any change to my income or family circumstances at the time of the change, my discretionary relief will be adjusted from the date that the change happened and I will have to repay any discretionary payment that I was not entitled to.

I agree that any information previously given on benefit applications or council tax reduction applications may be used to decide any discretionary payment.

I understand that the information that I have given on this form will be put on to a computer which has been registered under the Data Protection Act 1998 and that this information will be used to tell me about other benefits which I may be able to claim.

I live at the address given on this form.

YOU MUST SIGN THIS DECLARATION. IF YOU DO NOT SIGN THIS DECLARATION WE WILL RETURN THIS FORM TO YOU TO BE SIGNED.

Your signature		Today's	date:	1	1	
If someone else has completed this form for you please provide their details here:						
Signature	Full Name	Address	Relationship to you		o you	

Section: Details of your household In order to meet your needs and improve our service we need to know a bit more about you. Please help us by completing this form. You will not be disadvantaged in any way. This information is confidential. The information you have provided will be kept in accordance with terms of the Data Protection Act 1998 and will only be used for the purpose of monitoring. Your details will not be passed on to any other individual, organisation or group. Leicester City Council will be responsible for managing the information on this form for the purposes of the Data Protection Act. What is your ethnic background? Asian or Asian British Indian Pakistani Bangladeshi 🔲 Any other Asian background (please confirm)..... **Black or Black British** Caribbean Somali U Other African Any other Black background (please confirm) Chinese | **Dual/Multiple Heritage** White and Asian White and Black African White and Black Caribbean Any other heritage background (please confirm) White European \square British L I Any other White background (please confirm)