

www.nuneatonandbedworth.gov.uk Switchboard: 024 7637 6376

Enquiries to: Benefit Section Direct Dial: (024) 7637 6514

benefits.section@nuneatonandbedworth.gov.uk Date:



Dear

Claim For Discretionary Housing Payments and Hardship Payment

• Are you requesting additional help to pay your rent? (please tick)

□ No □ Yes

- Are you requesting additional help to pay council tax? (please tick)
- □ No □ Yes

• Are you in receipt of any disability benefits (please tick)

🗆 No 👘 Yes

Nuneaton and Bedworth Borough Council has a limited amount of money that can be used to help residents whose Housing Benefit/Council Tax Support has been restricted. If you are receiving either Housing Benefit or Council Tax Support and you are not getting maximum rent or council tax paid, then you may qualify for a Discretionary Housing Payment or Hardship Payment.

The scheme is not part of the benefit system and all awards are made at the authority's discretion. To be eligible you must be in receipt of Housing Benefit/Council Tax Support and you will also need to show that your circumstances are exceptional.

Please note these payments are normally only awarded for a limited period, usually 13 weeks and cannot be relied upon to solve long term housing difficulties.

It is important to give as much information as possible in support of your application. If you wish to apply, return the completed form, along with supporting evidence, **within one month of the issue date.**

IN SUPPORT OFYOUR APPLICATION FOR A DISCRETIONARY HOUSING PAYMENT or HARDSHIP PAYMENT YOU ARE REQUESTED TO PROVIDE THE FOLLOWING DOCUMENTATION:-

Only original documentation will be accepted. If you bring your documents into our office, we will photocopy them for you.

- Proof of rent arrears.
- Please send original proof of all Bank/Building Society Accounts, Post Office Accounts, Premium Bonds, National Savings, Income Bonds, Stocks and Shares, Unit trusts, PEP's, ISA's, TESSA's if you have not provided them in the last 3 months.
- Please provide details of any property that you own.
- Please provide details of any money that you are owed.
- Please provide original proof of any savings held by someone else on your behalf.
- Proof of outstanding debts or bills.
- Any other income or savings that have not been accounted for in the list above.
- Letter from doctor, hospital, social/welfare agency.

• Any other evidence or proof that you consider would assist the authority to make a decision on your claim.

SECTION 1

All customers must complete this section.

• If you have to pay the shortfall in rent or council tax yourself, how much is the shortfall in your rent and what difficulties will this cause you?

- Do you have any other financial resources that you could rely on i.e. family or friends? If yes, please give details.
- Are you in receipt of a state benefit and your entitlement has been reduced? If yes, give details of your normal entitlement and the amount of the reduction.
- Do you have any debts? If so, please state what for and for how long you have had the debts and when the repayment period is due to end. Have you sought advice on how to clear your debts/registered your debts. You must provide proof.

• Please describe any hardship or special circumstances that you or members of your family are suffering, giving the date that these circumstances started, and if appropriate, a date when they might end.

• Is there a particular reason why your accommodation is suited to the needs of your family? YES/NO. If yes, please provide details.

• Please provide the name and addresses of each different school(s) attended by your children.

1. 2. 3.

if you need additional space please use the last page of this form

 Have you been advised that bailiff or court action for non-payment of council tax is being considered?

• Have you sought advice on maximising your income eg benefit check, You may be entitled to Disability Living Allowance or free school

SECTION 2

ONLY COMPLETE THIS SECTION IF YOU ARE REQUESTING HELP TO PAY YOUR RENT

If you are renting from a private landlord (but not a Housing Association) the Rent Officer will have given us a maximum figure that we can use to assess your Housing Benefit/Local Housing Allowance entitlement.

• Have you moved from another rented property and if so, why?

• What type of property was it? E.g. Flat or house, how many living rooms and bedrooms did it have?

• How much was the rent, and how much was met by Housing Benefit/ Local Housing Allowance?

• If you are renting from a private landlord, did you check the local housing allowance amount for your property before moving in?

• What other accommodation did you consider before moving in?

• Have you attempted to re-negotiate your rent with your Landlord? If so, what was the outcome?

• Did you pay rent when you moved into your previous accommodation? How did you finance the deposit?

 If you have to leave your present accommodation, how much notice do you have to give?

• Have you tried to find cheaper accommodation?

🗆 Yes

🗆 No

If no, please give reason why not.

• Are you in arrears with your rent? If so, by how much? Have you had a Notice to Quit?

Please provide proof of arrears and your Notice to Quit. Original document not copies please.

• If you have children living with you for some of the time, please give details of when they stay

(if Social Services are involved please give as much detail as possible).

• Are you expecting an increase in the number of people living in your property in the near future?

E.g. is anyone in the household expecting a child/adopting a child, or is someone coming to live with you?

 Are there medical reasons as to why you or your partner or any members of the household including children need a separate bedroom? Please provide details and original documentary evidence of the medical condition.

• Is there any other information that you think we should know about in support of your application? Please provide details below. Continue on the back page if necessary

SECTION 3

ALL CUSTOMERS MUST COMPLETE THE FOLLOWING SECTION

OUTGOINGS	£ Per Week	£ Per Month	INCOME	£ Per Week	£ Per Month
Rent			Pensions (state)		
Council Tax		_	Pensions (work)		
Water Rates			Pensions (state)		
Food			Pensions (work)		
Private Pension Contributions			Disability benefits		
Travel/Car			Child benefits		
Gas			Working Tax Credit		
Electricity		-			_
Telephone			Main earnings		_
Mortgage		-	Main earnings		_
TV Licence			2nd earnings		_
Clothes		-	2nd earnings		_
Insurance buildings/			Maintenance		
contents			Tips/gratuities		
Health related			Child Tax Credit		
problems			Child support		
All other regular			Others		
monthly			(please detail)		-
payments you have to make			Others		
(please give			(please detail)		-
			Total:		
Total:					

Total Savings

£

lotal	Loan Repayments Overdrafts Credit Cards Employers Loans Bank/Building Society Court Maintenance Paid Out Others (please give Total	£ Per Week	£ Per Month	Repayment / loan start date
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DECLARATION

YOU AND YOUR PARTNER MUST READ THIS CAREFULLY BEFORE YOU SIGN.

Even if someone else has filled in this form for you, you must sign this declaration if you can. If you have a parner, getting them to sign this form should allow us to process your claim more quickly, but they do not have to sign it. If you partner does sign this form, they are signing to agree to the declaration shown below

IMPORTANT. It is vital that you fully read and understand the declaration below before you sign and date it. If you do not understand any part of it, please ask a member of the Benefit Section for further guidance.

I understand that this is my claim for Disrectionary Housing Payment/Hardship Payment.

I declare that the information I have given on this form is correct and complete as far as I know and believe.

I know that I must tell the authority in writing straight away of any changes in circumstances.

I give permission for you to check the information I have given with any of the sections of the Council, the Rent Officer, other Councils and Benefit Authorities.

I MUST INFORM THE AUTHORITY IF:-

- I start or stop receiving Income Support, Job Seeker's Allowance, Employment Support Allowance, Guarantee Element of Pension Credit, Child Tax Credit, Working Tax Credit or any other State Benefits.
- I start or stop work or get a pay rise or an increase in pension.
- If someone else moves into my home or one of my children leaves school.
- I understand that I have to tell the Benefit Service about any changes to my Income Support, Pension Credit or job Seeker's Allowance
- I understand that the Benefits Agency, Pension Service or Job Centre are not responsible for giving this information and that I must tell the authority myself.
- I understand the information provided will be used to deal with this and any other claim for social security benefits that I have made or may make. It may also be shared with other Council services, Data Processors acting on the Council's behalf such as Experian, a Credit Reference Agency, and other partner organisations to prevent and detect fraud, which could include checks on undeclared cohabiters, to ensure that records are accurate and to help identify services I may be entitled to or interested in.
- I agree that you will use the information I have provided to process my claim for Housing Benefit or CouncilTax Support, or both. You may check some of the information with other sources as allowed by the law.
- I understand that any information I provide on this form may be discussed with my partner if this is a joint claim for Housing Benefit or Council Tax Support, or both.

I have read and understood this Declaration Date				
Please sign here: Your Signature				
Your Partner's Signature				
If this form has been filled in by someone Other than the person(s) claiming – Please Tell us why you are filling in this form for The person(s) claiming.				
Name of the person who filled in the form				
Signature				
Relationship to the person claiming				
Date				
Home Telephone Number				
Mobile Telephone Number				
Email Address				

ADDITIONAL INFORMATION:-