



**Basingstoke
and Deane**

Application for a Discretionary Housing Payment

| Name and Address |
|------------------|
| |
| |
| |
| Postcode |
| |

| FOR OFFICE USE ONLY | |
|---------------------|--|
| Date Issue | |
| Date Received | |
| Claim Ref No | |

If your award of Housing or Council Tax Benefit is less than the maximum payable, you can apply for further help with your housing costs. This is known as a Discretionary Housing Payment. These payments are designed as a short term measure to assist with your housing costs. They are made from cash limited funds therefore are mainly awarded in cases of hardship.

To be considered, you must answer **all** the questions and sign the declaration. If you are asked to provide evidence, it must be supplied within 1 month from the date requested.

We may contact your landlord, ask you to attend an interview, or visit you at home, before reaching a decision.

Please note that you can only be considered for help if you have a amount entitlement to housing and/or Council tax benefit which is less than you must pay.

If you need help with this form, please contact the Housing Benefits office at the address or telephone number below.

**Basingstoke and Deane Borough Council, Corporate Resources Department,
PO Box 191, Civic Offices, London Road, Basingstoke, Hampshire RG21 7EA**

Telephone: 01256 810680 Fax: 01256 845405

Monday – Thursday 8.30am – 5.30pm, Friday 8-30am – 5.00pm

Please answer ALL the questions in this form and complete in BLACK INK.

SECTION 1

| | |
|---------------------------------|----------------------|
| Your full name | |
| <input type="text"/> | |
| Your address | |
| <input type="text"/> | |
| <input type="text"/> | |
| <input type="text"/> | |
| Postcode | |
| <input type="text"/> | |
| Your telephone number | |
| <input type="text"/> | |
| Other residents in the property | |
| Name | relationship to you |
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |

| |
|---|
| Your landlords name |
| <input type="text"/> |
| Your landlords address (if different from your own) |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |
| Your landlords telephone number |
| <input type="text"/> |
| How much is your rent? £ <input type="text"/> |
| weekly / monthly (please circle as applicable) |

SECTION 2

What date did you move to this address?

If less than 12 months ago, please give your previous address:

Postcode

Did you obtain a Pre-Tenancy Determination?

YES NO

Were you able to afford the rent/council tax when you moved in?

YES NO

If yes, how were you able to afford it?

For example, were you working/using savings?

Have you asked your landlord to reduce the rent?

YES NO

If yes, what was the outcome?

If no, explain why not

How much notice are you required to give?

When does your current tenancy end?

Have you tried to find cheaper accommodation?

YES NO

If yes, what have you done?

Is there any reason you could not move if you found cheaper accommodation?

Do you have any relatives or friends who could provide you with accommodation, if only temporarily?

YES NO

Could they, or anyone else, help you with the rent?

YES NO

How much are your rent arrears: £

Has your landlord taken any action against you because of your rent arrears?

YES NO

If yes, please give full details

Are you currently paying your rent?

YES NO

Do you have any other debts? For example, hire purchase, loans, catalogues, fines, etc?

YES NO

| Company | Balance Outstanding | Monthly Payment | Arrears |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Are you currently paying these debts?

YES NO

SECTION 3 Household expenditure. Please state the amount and frequency of payments

| Expense | Amount (£) | How Often? (e.g. weekly, monthly) | | | |
|------------------------------|----------------------|--------------------------------------|---|----------------------|--|
| Rent/mortgage | <input type="text"/> | <input type="text"/> | Catalogue | <input type="text"/> | <input type="text"/> |
| Council Tax | <input type="text"/> | <input type="text"/> | Maintenance paid | <input type="text"/> | <input type="text"/> |
| Water rates | <input type="text"/> | <input type="text"/> | Food | <input type="text"/> | <input type="text"/> |
| Gas | <input type="text"/> | <input type="text"/> | Alcohol | <input type="text"/> | <input type="text"/> |
| Electric | <input type="text"/> | <input type="text"/> | Cigarettes | <input type="text"/> | <input type="text"/> |
| Telephone | <input type="text"/> | <input type="text"/> | Bus/train fares | <input type="text"/> | <input type="text"/> |
| Mobile phone | <input type="text"/> | <input type="text"/> | Other payments | <input type="text"/> | <input type="text"/> |
| Household insurance | <input type="text"/> | <input type="text"/> | Please state in section 5 what these are for. | | |
| Life insurance | <input type="text"/> | <input type="text"/> | Have there been any exceptional areas of expenditure you have recently had to meet or are about to meet? (For example, travel costs/funeral expenses/replacement of household items/payment for Prescriptions/medical treatment/medical equipment/new glasses etc). | | |
| Pension plan | <input type="text"/> | <input type="text"/> | Item | Cost | How did you/do you expect to pay for it? |
| Car- | | | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Road fund licence | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Insurance | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Petrol | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| TV Licence | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| TV/Video Rental | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Satellite/Cable Subscription | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

SECTION 4 Household Income. Please state the amount and frequency of payments

| Type of Income | Person receiving it (e.g. you or your partner?) | How much? | How Often? (e.g. weekly, monthly) |
|------------------------|--|------------------------|--------------------------------------|
| State Benefits | | | |
| Income Support | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Job Seekers' Allowance | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Incapacity Benefit | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Child Benefit | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Tax Credits (Child) | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| (Working) | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Pension Credits | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Other | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |

SECTION 4 Continued

| Type of Income | Person receiving it (e.g. you or your partner?) | How much? | How Often? (e.g. weekly, monthly) |
|--|--|------------------------|--------------------------------------|
| Earnings | | | |
| Job 1 | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Job 2 | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Please give the date of your next pay increase | <input type="text"/> | | |
| Other Income | | | |
| Maintenance received | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Private pensions | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Charitable payments | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Income from lodgers | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Loans/gifts from friends/relatives | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |
| Other | <input type="text"/> | £ <input type="text"/> | <input type="text"/> |

Are you about to make a claim for a State benefit, i.e. tax credits? If yes, please give details.

Do you have any outstanding claims for pensions and/or benefits, which have not been paid? If yes, please give details.

Do you normally receive any other benefits or income, which have been temporarily suspended? If yes, please give details.

Capital

Please give details of any accounts held by you (and/or your partner) with banks, building societies or Post Office.

| | | | |
|-------------------|----------------------|-----------|----------------------|
| Account held with | <input type="text"/> | Balance £ | <input type="text"/> |
| Account held with | <input type="text"/> | Balance £ | <input type="text"/> |
| Account held with | <input type="text"/> | Balance £ | <input type="text"/> |

Do you have any other money, savings or property, including holiday homes or a timeshare? If yes, please give details.

Do you have any policy, or long term investments? If yes, please give details of the policy and the maturity date.

SECTION 5 Other Details. You must answer all the questions and give as much detail as possible.

Do you or a member of your household or family living elsewhere; have any disabilities or health problems? If yes, please explain how this affects your finances.

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Please give details of any other circumstances, which have affected your finances.

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What are your main reasons for needing additional help with your housing costs?

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Do you think you will need help for more or less than 3 months? Please explain why

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Please let us know if there is anything else which you would like to make us aware of when considering your application?

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Please continue on a separate sheet if required, making sure your name and address is included on it.

Declaration

Please read this declaration carefully and sign where indicated.

I/we declare that the information I/we have given on this form is correct and complete to the best of my/our knowledge.

I/we authorise the Council to make any necessary enquiries to verify the information on this form.

I/we authorise the Council to cross check the information I/we have given with other departments in the Council, The Rent Service, Department of Social Security, other Councils and Benefit Authorities and any other public bodies involved with the protection of public funds.

I/we understand that I/we must provide the Council with any information needed for a decision to be made.

I/we understand that if any information given is incorrect (or incomplete) or if I/we fail to report any changes that might affect the Discretionary Housing Payment, I/we may be prosecuted.

Signature of claimant

Date

Signature of partner

Date

This information is being collected in accordance with the Data Protection Act. All correspondence received will be processed and held in a document management system. The information declared on this form will be used to assess your entitlement.

You have a right to access the information the Council holds about you. Please contact the Council's Data Protection Officer on 01256 845572, if you would like to pursue this.

The completed form should be returned to the address on the front of this form, without delay.

Basingstoke and Deane Borough Council

Corporate Resources Department PO Box 191 Civic Offices London Road Basingstoke
Hants RG21 7EA

Telephone: (01256) 844844 Textphone: 01256 845400
www.basingstoke.gov.uk