

To be filled in by you

Business information

Your name

Your address

Business name

Business address

Phone number

Business partners

Name and address (if applicable)

Date you started trading / /

Type of work

Please fill this form in if you are self-employed. If you have more than one type of self-employed work or more than one business, you should complete a separate form for each type of work or business. You should fill this form in for the latest year's trading unless we have asked you for a different period or if your income/work has changed within the last year. Do not give details for more than a year. Let us know the reason if you are giving a different period.

If you are newly self-employed, we will work out your benefit initially on 4 week's details. We will ask you for more details after 10 weeks.

You will need to provide evidence of your income and expenses plus your latest set of prepared accounts and national insurance exemption certificate if applicable.

Do you expect your earnings/expenses to change within a year?
(if yes, please explain when and how you expect it to change?)

Yes No

How many hours do you work each week on average?

hrs per week

Do you pay into a private pension scheme?
(if yes, please tell us how much)

Yes No

Amount: £ per:

National insurance - do you have an exception certificate?
(if yes, please let us see the certificate)

Yes No

Do you employ anyone to work for you?
(do not include partner) Names and addresses of people you employ must be provided

Yes No

Do you pay for any business loans? if yes, give details of the purpose, total amount borrowed and the amount of interest included in the payments. We will need to see the loan agreement.

Yes No

Amount: £ interest:

If you do not have any audited accounts, you must complete the section overleaf

What period are you giving details of?

From: / / To: / /

Did you work in your self employed business throughout this time? (if no, please tell us about any periods when you didn't work)

Yes No

Income

Sales/Takings/Main Business Income

Other Business income e.g. tips, interest

Please specify

Expenses

Stock / Materials used during period

Wages paid to you

Wages paid to husband/wife/partner

Wages paid to others

Stationary/Postage/Printing

Accountancy Fees

Rent for business premises

Business Rates

Heat / Light for business premises

Telephone

Insurance... please specify

Vehicle running costs: fuel, repairs, servicing etc

Other repairs / replacements - details

Bank charges

Loan payments

Other expenses

Please use this box to tell us about any other information you think may help in assessing your self employed income expenses.

We need to see proof of all income and expenses. (Childminders need only to supply proof of income)

Declaration - read carefully and sign

The information I have given on this form is true and complete to the best of my knowledge and belief. I understand I will be liable to prosecution if I have wilfully stated anything that I know to be false, do not believe to be true or I do not inform the council of any future changes that may affect my claim.

Signature

Date

/ /

RETURN TO:

BENEFITS SECTION
Braintree District Council
Causeway House
Braintree
Essex CM7 9HB