

HOUSING BENEFIT (RENT ALLOWANCE) PROPERTY DETAIL FORM

Please write your name, address and postcode in this box (including Room No. or Flat No.)

Telephone Number (optional):

If you have any query in respect of this form,
 Please call 01376 557852

INTRODUCTION

PLEASE READ THE NOTES CAREFULLY BEFORE COMPLETING THIS FORM (SEE BACK OF FORM)

Please complete this form only if you are renting privately.
 This form is to claim help with your rent payments.
 The information given will be treated as private and confidential.
 Please tick boxes either 'No' or 'Yes' and answer all questions which apply to you or the property.

**YOU MUST RETURN THIS FORM IMMEDIATELY -
 WE CANNOT PROCEED WITH YOUR CLAIM UNTIL THIS IS RETURNED.**

SECTION A OTHER PEOPLE IN YOUR HOUSEHOLD/ACCOMMODATION IF NONE TICK BOX

(Not your Landlord's family or other tenants)

| | | | | | | |
|----------|---|--------------------------------|--------------------------------|--------------------------------|--------------------------------|--------------------------------|
| 1 | FIRST NAME(S) SURNAME: DATE OF BIRTH: RELATIONSHIP TO YOU: | / / | / / | / / | / / | / / |
|----------|---|--------------------------------|--------------------------------|--------------------------------|--------------------------------|--------------------------------|

SECTION B WHO ELSE LIVES AT THIS ADDRESS IF NONE TICK BOX

(List anyone not entered above i.e. Landlords family, other Tenants)

| | | | | | |
|---|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| FIRST NAME(S) SURNAME: RELATIONSHIP TO YOU: e.g Landlord, Joint Tenant | | | | | |
|---|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|

SECTION C

ABOUT YOUR TENANCY

Date you moved in?

Tenancy start date:

Do you have a shorthold tenancy agreement? NO YES

If 'YES', what is the period? Months

Is your rent registered with the Rent Office? NO YES

Landlords name?

Landlords address?

Agents name?

Agents address?

Is the property shared ownership? NO YES

Are you related to your landlord or his/her family? NO YES

If 'YES', what is the relationship?

Do you give permission for this office to discuss your benefit claim with your landlord/agent NO YES

SECTION D

ABOUT YOUR ACCOMMODATION

(PLEASE TICK WHERE NECESSARY)

1. Describe your accommodation:

Detached house

Semi detached house

Detached bungalow

Semi detached bungalow

Terrace house

Terrace bungalow

Maisonette

Flat in block

Flat over shop

Room in a house

Hostel/Refuge

Site Rent

2. If you rent a room is it:

A

Front of house

Rear of house

Centre of house

B

Basement

Ground floor

First floor

Second floor

Third floor

Other

(please detail)

C

Number of floors

3. About your accommodation:

A Yes No

Is it furnished by Landlord?

If 'YES', is it?

Fully furnished

Partly furnished

Minimally furnished

B

Who is responsible for the internal decoration?

Landlord

Yourself

Not known

C Yes No

Is it centrally heated?

4. How many rooms (please put number)

| | Living Rooms | Bed Rooms | Bed Sits | Kitchen | Bath Rooms | Toilets | Other | Total |
|--|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| In the whole house/flat: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Rooms used solely by you and your family: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Rooms shared with people not in your family: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

5. If you have lived in this accommodation for less than 3 years, please state your previous address:-

.....

.....

Did you own or rent this property? Own Rent

SECTION E**ABOUT THE RENT CHARGE FOR YOUR HOME**

(TICK ALL BOXES WHICH APPLY AND STATE AMOUNTS IF KNOWN)

How often do you pay rent?

WEEKLY

4 WEEKLY

CALENDAR MONTH

QUARTERLY

YEARLY

HOW MUCH RENT DO YOU PAY?

Are any of the following included in your rent payments?

Power Supply for:

Heating £

Lighting of your accommodation £

Hot water £

Care/Support £

Meals: Breakfast Lunch Dinner

SECTION F**DECLARATION: PLEASE READ CAREFULLY BEFORE SIGNING THE FORM**

Even if someone else has filled in this form for you, you must sign this declaration, if you can.

Please read this declaration carefully before you sign and date it. I understand all the following:

■ If I give information that is incorrect or incomplete, you may take action against me and may prosecute me.

I know I must write to Braintree District Council's Benefit Section straight away if any of my circumstances change that could affect my claim. I will give full details. (You may lose out if you do not tell us within one month of that change.) If you are not sure whether to tell something, please contact us.

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

Your signature

Date

Their signature

Date

Did someone else fill in this form for you? Yes No

If someone else has filled in this form for you, they must complete the following section. This includes an agent, an appointee, a relative or a friend.

Name of the person who filled in the form

Their relationship to you

Their signature

Their address

Phone Number

Date

Please tell us why you are filling in this form for someone else.

DATA PROTECTION

Braintree District Council is a data controller for the purposes of data protection legislation. All personal information is held and processed by Braintree District Council in accordance with Data Protection Legislation. For further information, please refer to the Housing Benefits and Council Tax Privacy notice published on our website under our Privacy page which can be found at www.braintree.gov.uk/privacy. Alternatively, please contact us should you require the privacy notice in an alternative format.

SECTION G**PAYING YOUR HOUSING BENEFIT**

If you rent your home from a private landlord and you are making a new claim, we will pay your benefit direct to you under the Local Housing Allowance Scheme. We may pay it to your landlord if you cannot manage your own money. Please contact us for more information.

Paying your benefit direct into your bank (or building society) account is the easiest and safest way because cheques can get lost, stolen or delayed in the post. You must have an account for us to pay you direct.

Do you want us to pay your benefit straight into your bank or building society account? NO YES

If 'YES', please fill in your account details below.

Name of bank or building society

Branch address and postcode

Sort Code

Account number

Account holder's name

Other reference (e.g. roll number)

Your signature

Date

If you are a tenant of a housing association or you are a private tenant who is not assessed under Local Housing Allowance, you can choose to have your benefit paid direct to your landlord.

Do you want payment made to your landlord NO YES

Complete Section H then ask your landlord to complete the section I

**SECTION H****AUTHORISED PAYMENT**

I AUTHORISE THE COUNCIL TO PAY RENT ALLOWANCE DIRECT TO THE LANDLORD

Name

Address

Your signature

Date

SECTION I**LANDLORDS DETAILS**

For landlord use only (please see INFORMATION FOR LANDLORDS on reverse of page)

I agree to accept any Housing Benefit payments on behalf of my tenant. I understand that I must tell Braintree District Council's Housing Benefit Section in writing about any changes in the tenant's circumstances that I may be reasonably aware of, and that I may have to pay back any overpaid housing Benefit that my tenant was not entitled to. I understand that I may be prosecuted if I accept Housing Benefit that I know I am not entitled to.

Name of bank or building society

Branch address and postcode

Sort Code

Account number

Account holder's name

Other reference (e.g. roll number)

Your signature

Date

SECTION A OTHER PEOPLE IN YOUR HOUSEHOLD/ACCOMMODATION

Include your partner, children, relatives or friends who share your accommodation and do not pay rent separately to your Landlord.

Include sub-tenants, boarders and lodgers who pay a commercial rent to you.

SECTION B WHO ELSE LIVES AT THIS ADDRESS

Please list everyone else who lives in the accommodation i.e. other people who pay rent direct to the Landlord or Landlord and his/her family.

SECTION C ABOUT YOUR TENANCY

If you have a tenancy agreement or your rent is registered with the Rent Officer please enclose papers when you forward the proof of your rent.

If you are related to your Landlord and/or his/her family and they also reside in the property, you will not be able to claim a rent allowance in most circumstances. However, there are some exceptions and enquiries should be made at the Benefit Office, if in doubt.

SECTION D ABOUT YOUR ACCOMMODATION

1. If you rent a room in a house, also tick what type of house it is e.g. semi detached, terrace etc.
4. Rooms used by you and your family - these would be the persons entered at section A.
Rooms shared with people not in your family - these would be the persons entered at section B.

SECTION E ABOUT THE RENT CHARGE FOR YOUR HOME

If your rent includes charges for meals, services or amenities then deductions are made from the rent before calculating your rent allowance.

The details of the deductions are as follows:-

WATER CHARGES

The actual amount charged by your landlord or, if not known, a calculation based on the existing rateable value of the property and the portion of the accommodation occupied by yourself and your family.

AMENITIES (Heating, Hot water, Lighting, cooking power)

The actual amount charged by your Landlord or, if not known, a set amount which is determined by the Government each April.

SERVICES (Laundry, Cleaning, Counselling Support, Nursing/Personal Care)

The actual amount charged by your Landlord or, if not known, an amount determined by the Council as being reasonable in the circumstances.

MEALS

An amount set by the Government each April for breakfast, part board (breakfast and another meal) or full board (breakfast, lunch and dinner)

SECTION F DECLARATION

This must be completed by all the applicants

SECTION G PROOF OF RENT PAYMENTS

If you do not have all the necessary proof to hand, do not delay in sending back this form. Give us what you have, make a note of what you need to get and let us have the rest as soon as possible, within one month of claim

SECTION H PAYMENTS DIRECT TO YOUR LANDLORDS

If you have requested for payments to be made direct to your Landlord, please read the information on the reverse of the "authorisation form".

Payments will not be made until the "authorisation form" is returned to the Benefits Office.

INFORMATION FOR LANDLORDS

1. In accordance with regulation 101 (1) of the Housing Benefit (General) regulations 1987, the Local Authority may recover overpayments of rent allowance from the person to who it was paid.
2. The Landlord must notify the Benefits Section of any change of circumstances which they would reasonably know could affect their Tenant's Housing Benefit Entitlement.
3. The Benefit Section cannot become involve in any dispute between the landlord and Tenant, e.g. over outstanding rent arrears.
4. The Benefit Section can only divulge personal information with the Tenant's written permission.
5. The Benefit Section has the right to withhold the rent allowance or pay it to the Tenant, should it so decide.
6. Braintree District Council is a data controller for the purposes of data protection legislation. All personal information is held and processed by Braintree District Council in accordance with Data Protection Legislation. For further information, please refer to the Housing Benefits and Council Tax Privacy notice published on our website under our Privacy page which can be found at **www.braintree.gov.uk/privacy**. Alternatively, please contact us should you require the privacy notice in an alternative format.

**Please return this form to Benefit Section, Braintree District Council,
Causeway House, Bocking End, Braintree, Essex, CM7 9HB.**