



Council Tax Support Application for Universal Credit Claimants

- Please complete this editable form online and send to housing.benefits@boston.gov.uk
- Please read the guidance notes at Part 15 before you complete the form.
- Remember that you must continue to pay your Council Tax until your entitlement is worked out.
- Please return this form straightaway, or within one month, even if you have documents that are missing – delays in submitting the form may cost you money.
- When you have completed the form, please ensure that you have signed the declaration at Part 14.
- If you are in receipt of Universal Credit you need to provide screen shots of all pages of your award summary from your online account or all pages of your award letter, when received, with this form.

Title:

Last name:

First name:

Address:

Postcode:

FOR OFFICIAL USE ONLY

Date issued: Initials:

Claim number:

If you have received or applied for Council Tax Support in this area before, please give your address at that time.

If you know your reference number, please enter it here:

Continued overleaf

PART 1 About you and your partner

Do you have a partner?

No

Yes

By partner we mean:

- A person you are married to or a person you live with as if you are married to them or
- A civil partner or a person you live with as if you are civil partners.

You

Your Partner

Last name:

Other names:

Any other last names
you have used:

Title: (Mr, Mrs, Ms and so on)

Address that you are applying for:

Do not tell us your partner's address
if it is the same as yours.

Postcode:

Date of birth:

National Insurance number:

We cannot decide your application if we do not have your National Insurance number, and we need to see evidence of it. Please see the guidance at Part 15 for the type of evidence to provide.

If you do not have a National
Insurance number, or cannot find
it, please tick this box

If you do not have a National
Insurance number, or cannot find
it, please tick this box

What is your nationality?

If your nationality is not British,
on what date did you last enter
the UK?

Contact number:

Email address:

You

Your Partner

What date did you move or will you move to this address?

What was your previous address?

Did you receive any benefits or support at that address?

No

Yes

No

Yes

Have you told your previous council that you have moved?

No

Yes

No

Yes

Please tick if you or your partner are:

An apprentice.....

On youth training.....

In legal custody

Severely mentally impaired.....

Registered blind.....

PART 2 About children

Are there any children
in your household?

No If No, go to Part 3.

Yes If Yes, please complete table below.

Please include children living in your household who are:

- Under 16
- Aged 16 or 17 and registered for work or youth training
- Aged 16 - 20 and in education doing a course not higher than GCSE A-level, SCE Higher level or GNVQ (advanced), or undertaking an approved training course.

If there are more than three children please ask for an additional child form or use a sheet of paper to give us all the same information we ask for here in Part 2.

If you are sending a separate sheet of paper, please tick this box

	First Child	Second Child	Third Child
Last name:			
Other names:			
Date of birth:	/ /	/ /	/ /
What is the child's sex?			
The child's relationship to you:			
The child's relationship to your partner:			
Usual address (if different from yours):			
Who gets the Child Benefit for them?			
Is the child registered blind?	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, we need to see evidence of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, we need to see evidence of this.	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, we need to see evidence of this.
Does the child get Disability Living Allowance or Personal Independence Payments (PIP)?	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, how much per week £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, how much per week £ <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, how much per week £ <input type="text"/>

PART 3 About other people who live with you

Do any adults usually live with you and your partner?

No If No, go to Part 4

Yes If Yes, tell us about all the people (except your partner) who usually live with you. If you want to tell us about more than 3 people, use a separate sheet of paper.

By adults we mean people over 16 who nobody gets Child Benefit for.

If you are sending a separate sheet of paper, please tick this box

	First Person	Second Person	Third Person
Last name:			
Other names:			
Date of Birth:	/ /	/ /	/ /
National Insurance No.			
Their relationship to you or your partner: eg. brother, daughter, stepson, joint tenant, joint owner, subtenant, lodger, friend etc.			
What was their previous address, if they have not always lived with you?			
Do they get Income Support, Income based Job Seekers Allowance, Income related Employment and Support Allowance or Pension Credit?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they a full time student, a student nurse, a care worker, an apprentice or on youth training? (Please state.)			
Are they severely mentally impaired?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

	First Person	Second Person	Third Person
Are they in legal custody at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> When are they expected to come out? <input type="text"/> / <input type="text"/> / <input type="text"/>
Do they pay rent or money for board and lodgings to you or your partner?	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, how much? £ <input type="text"/> Does this amount include meals? No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, how much? £ <input type="text"/> Does this amount include meals? No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, how much? £ <input type="text"/> Does this amount include meals? No <input type="checkbox"/> Yes <input type="checkbox"/>
Are they in hospital at the moment?	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, when did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, when did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, when did they go in? <input type="text"/> / <input type="text"/> / <input type="text"/> When will they come out (if you know this)? <input type="text"/> / <input type="text"/> / <input type="text"/>
Do they normally work for 16 hours or more a week?	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, please tell us their earnings before any deductions. £ <input type="text"/> We need to see evidence of their earnings. This could be their last 5 payslips if paid weekly or last 2 if paid monthly.	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, please tell us their earnings before any deductions. £ <input type="text"/> We need to see evidence of their earnings. This could be their last 5 payslips if paid weekly or last 2 if paid monthly.	No <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, please tell us their earnings before any deductions. £ <input type="text"/> We need to see evidence of their earnings. This could be their last 5 payslips if paid weekly or last 2 if paid monthly.

	First Person	Second Person	Third Person
<p>Do they have any other income at all?</p> <p>This includes any benefits or allowances and interest from savings and investments.</p> <p>We need to see evidence of their income.</p>	<p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>If Yes, please give details of all other income along with the frequency and the amount before deductions.</p> <p>1. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>	<p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>If Yes, please give details of all other income along with the frequency and the amount before deductions.</p> <p>1. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>	<p>No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>If Yes, please give details of all other income along with the frequency and the amount before deductions.</p> <p>1. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>
	<p>2. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>	<p>2. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>	<p>2. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>
	<p>3. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>	<p>3. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>	<p>3. Income</p> <input type="text"/> Amount: £ <input type="text"/> How often? <input type="text"/>

Are any of the people who normally live with you married to each other, civil partners with each other, or living together as if they are married?

No

Yes If Yes, please tell us about this:

<input type="text"/>	is the partner of	<input type="text"/>
<input type="text"/>	is the partner of	<input type="text"/>

PART 4 About your income

Income for you and your partner (we will need to see proof of each income)

Please read this list of benefits and incomes and tell us about any you or your partner are getting now or have claimed. Tell us the full rate of the benefit or income before any deductions and provide evidence of the amount received. Please see the guidance at Part 18b for the types of documents you can use as evidence.

- Annuity
- Bereavement Allowance
- Carers Allowance
- Child Benefit
- Child Tax Credit / Working Tax Credit
- Employment and Support Allowance
- Fostering / Adoption / Guardians Allowance
- Incapacity Benefit
- Industrial Injuries Disablement Benefit
- Industrial Death Benefit
- Job Seekers Allowance
- Maternity Allowance or Statutory Maternity Pay
- Pension Credit
- Private / Occupational Pension
- Retirement Pension
- Severe Disablement Allowance
- Sickness Benefit or Statutory Sick Pay
- Statutory Paternity Pay
- Universal Credit
- Widowed Parents Allowance

Please tell us below about any income you are getting, or have claimed. If you need to use a separate sheet of paper, please do so and send it with the form.

If you are sending a separate sheet of paper, please tick this box

Name of person receiving the income?	What is the income?	Amount	Frequency	Date income started	Benefit applied for

PART 5 About working for an employer

Do you or your partner work for an employer?

No If No, go to Part 6

Yes If Yes, please answer the following questions.

If you work for more than one employer, tell us about all the employers on a separate sheet of paper and send it with this form.

If you are sending a separate sheet of paper, please tick this box

We must see evidence of any earnings before we can decide how much benefit or support you can get. Please see the guidance at Part 15 to see what you can use as evidence.

You

Your Partner

What kind of work do you do?

What is your employer's name, address and telephone number?

Tel:

Tel:

When did you start this job?

Can we contact your employer?

No

Yes

No

Yes

Are you employed for a limited period?

No

Yes

No

Yes

If Yes, when will you finish?

If Yes, when will you finish?

How many hours a week do you usually work?

How much do you get paid before tax and National Insurance are taken off?

£

£

How are you paid?

For example cash, cheque, straight into a bank or building society.

You

Your Partner

When was your last pay rise?

When will your next pay rise be?

What period does your payslip cover (for example weekly in arrears, monthly in advance)?

Give details of any regular overtime, bonuses or commission:

Are you, or will you be, getting Sick pay (SSP). Maternity Pay (SMP) or Paternity Pay from your employer?

No If Yes, when will / did it start?

Yes

No If Yes, when will / did it start?

Yes

Do you or your partner do any other work at all?

No
Yes If Yes, tell us about this in the space at Part 12.

No
Yes If Yes, tell us about this in the space at Part 12.

This could be voluntary work or any other work, even if it is not paid work.

PART 6 About being self-employed

You

Your Partner

Are you or your partner self-employed?

No

Yes

No

Yes

Are you or your partner a Director of a company?

No

Yes

No

Yes

Please tell us what kind of work you do, or details of the company:

How many hours do you work per week?

Please give an estimate of your earnings for the next year:

£

£

You must send us your trading accounts for the last financial year or complete one of our Self-Employment forms. There is more guidance about this at Part 15. You will need to complete a different form for each self-employment. If both you and your partner are self-employed, you will both need to complete a form or supply accounts.

PART 7 About being a student

Are you or your partner a student?

No If No, go to Part 8.

Yes If Yes, tell us about this below.

Please tell us if you or your partner are a student. By student we mean anyone who is undertaking a course of study at an educational establishment, including student nurses.

We must see evidence of your student loan, grant or other income you get for being a student, before we can decide how much benefit you are entitled to. Read the guidance at Part 15 to see what you can use as evidence.

You

Your Partner

Tell us the name of the course and the name and address of the college or university:

Is the course full-time or part-time?

What date does the academic year start and end?

Start:

Start:

End:

End:

If you get a grant, how much is it and how often is it paid?

If you get a student loan, how much is it and how often is it paid?

If you get money from your parents or a deed of covenant, how much is it and how often is it paid?

PART 8 About money you pay out

We need to see evidence of any of the following items that you pay. Please see the guidance at Part 15 for the type of proof to provide.

	You	Your Partner
Do you make payments towards a private pension?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
	If Yes, please state the pension provider's name, amount paid and frequency.	If Yes, please state the pension provider's name, amount paid and frequency.

Are you or your partner required to help support a son or daughter under 25 who is at college or university?	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>
	If Yes, please give details. How much do you give them and how often?	If Yes, please give details. How much do you give them and how often?
	£ <input style="width: 150px;" type="text"/> every <input style="width: 150px;" type="text"/>	£ <input style="width: 150px;" type="text"/> every <input style="width: 150px;" type="text"/>

Do you pay a registered childminder, nursery, or after-school club any childminding costs for your children?

- No If No, please go to Part 9.
- Yes If Yes, tell us about this below. Please tell us if your child care costs change during term time. We will need to see proof of the amount that you pay.

Name of child	Name and registration number of the minder	How much do you pay each week?

PART 9 - Capital

In this section please declare all capital that you and your partner hold, even if you have already declared them to us on previous forms. This includes any bank accounts you have which are either empty or overdrawn, as well as any internet-based accounts, ISAs, Savings Bonds, Shares, Paypal Accounts, Unit Trusts, Premium Bonds etc. If your savings total more than £6000 please provide proof such as bank statements, bank books or certificates. Continue at Part 12 if necessary.

Who holds the capital? (you, your partner, etc)	Name of bank, or building society	Full account number	Number of shares / bonds (if applicable)	Total amount

Do you or your partner own or partly own, any property, land or timeshare, other than the home you live in, either in the UK or abroad?

No

Yes

If Yes, please give details below.

Address of property or land:

How much is it worth?

£

Mortgage or loan left to repay if applicable?

£

Does an elderly or disabled relative live in this property?

No

Yes

Does a former partner live in the property?

No

Yes If Yes, do any children live in the property with them? No Yes

Are you or your partner trying to sell the property?

No

Yes

If Yes, we will need to see proof that you are selling the property, such as a letter from the Estate Agent.

If the property is for sale, please give the date that it went on the market:

PART 10 Information sharing

We would not normally share any of your information with another person should they make enquiries about your application/entitlement. However, you may find it helpful for someone to act on your behalf, such as a family member or a close friend. If this is the case, you must give us your permission before we can do this.

If you want to give us permission to speak to another person about your application, please give their details here:

Name:

Address:

Contact number:

Relationship to you:

If you have an official appointee or someone holds power of attorney for you, please provide the documents regarding this.

PART 11 About your application or entitlement start date

The law limits how far we can backdate your application. The maximum amount is 1 month if you are of working age. Your Council Tax Support will usually start from the Monday after the date we receive your application. Your application will only be backdated to an earlier start date if you can tell us a good reason why you did not apply before. If you would like your application to start earlier, or you have sent us your application early and you want your support to start from a later date (perhaps because your circumstances are due to change soon), please tell us the date that you would like your application to start from here:

If you have asked for us to start your application from an earlier date, please give full reasons for your late application at Part 12. You must give us as much detail as possible to enable us to make a decision. Further guidance about backdating your application can be found at Part 15.

PART 12 Anything else that you need to tell us

Use the box below to tell us anything else you think we should know about. Please make sure that you tell us about any other income that you have not already told us about on the form. Continue on a separate piece of paper if necessary.

Equality monitoring

Please indicate your race in the space opposite (optional):

Now please read Parts 13 and 14 and ensure that you sign the form.
We cannot process your application if the form is not signed.

PART 13 Changes you must tell us about

If something changes while you are claiming Council Tax or support, you must tell us immediately.

Your income or your partner's income

- If you start, change or leave a job or the hours you work change, including regular overtime.
- If you start or stop receiving Statutory Sick Pay / Maternity Pay.
- If you start getting another income such as Tax credits.
- If you start or stop getting a benefit such as Income Support, Job Seekers Allowance, Employment and Support Allowance, Universal Credit or Pension Credit. Also tell us if one of these benefits changes to a different type, for example you were getting Job Seekers Allowance (income based) and this changes to contribution based Job Seekers Allowance.
- If you start getting a pension such as State Retirement Pension or a pension from a former employer.
- If the amount you get from your job, tax credits, pension or any other income changes.

Remember, you must tell us if anyone in your household has any changes to their income. This includes you, your partner, other family members or friends.

Capital you and your partner have

- Any changes to any bank/savings/building society accounts held, such as opening or closing an account, receipt of any lump sum etc. This includes accounts such as TESSAs, ISAs, Paypal, Premium Bonds and Post Office card accounts.
- Any changes to investments or shares held.
- Property – you must tell us if you or anyone in your household becomes an owner or part owner of any property or land either in this country or abroad.
- If the amount of your capital exceeds £6,000, including all savings, investments or bank accounts.

Your household

- If anyone moves in or out of your home – this includes your partner, children, other family, members, lodgers, sub-tenants or friends.
- If a child leaves school.
- If anyone becomes a student or stops being a student.
- If anyone has a baby.

The people in your household and the income they receive can affect the amount of support you get.

Other changes you must report

- If you move.
- If you will be leaving your property for over two months.
- If someone goes into hospital, a nursing home or to prison.
- If you start or stop paying for child care or the amount of child care you pay changes.

Remember

- It is your responsibility to tell us about changes in circumstances – You must tell us immediately to avoid having to pay money back later.
- Don't rely on someone else to tell us.
- If you are not sure then contact us on 01507 601111.
- It is an offence not to tell us straight away about any changes that affect your support.
- We may take court action against you if you do not tell us about changes and you get too much support.

PART 14 Declaration

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

Please read this declaration carefully and the 'changes you must tell us about' section before you sign and date it.

I understand the following:

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my application for Council Tax Support. You may check some of the information with other sources as allowed by the law.
- You may use any information I have provided in connection with this and any other claim for social security benefits that I have made or may make. You may give some information to other organisations, such as government departments, local authorities and private-sector companies such as banks and organisations that may lend me money, if the law allows this. You may also share information between departments of the council, if it is going to be of benefit to me and the law allows this.
- I know I must let the benefit department at the council know about any change in my circumstances which might affect my application.
- I declare the information I have given on this form is correct and complete.
- I declare that I have read (or had read to me) and understand the changes that I must notify the council of.

I am fully aware that I must declare my full and true circumstances when making an application for Council Tax Support. Once I have made an application I have a legal responsibility to notify the council of any changes in my circumstances.

- For Council Tax Support, I understand that I must notify the change of circumstance within 21 days of the date the change occurred.

I fully understand that should I fail to notify the benefit department at the council of any changes in circumstances of myself or other household members promptly that I may be prosecuted in accordance with the Social Security Administration Act 1992 or the Fraud Act 2006.

Signature of
person making:
application:

Partner's
signature:

Date (ddmmyy):

Date (ddmmyy):

If this form has been filled in by someone other than the person making the application, please tell us why?

I declare that as far as possible, I have confirmed with the person making the application that the answers I have written on this form are correct.

Name of person who
filled in the form:

Signature of
the person:

Relationship to the
person named
at Part 1:

Date (ddmmyy):

a) Filling in the form

Answer 'yes' or 'no' questions by putting a tick in the relevant box. If you are picking an answer from a list of answers, put a tick in the relevant box. Do not put a cross in any boxes.

If someone fills the form out for you, there is a special space for them to sign.

Your application may be reviewed periodically either by post or by home visit.

b) Evidence

Throughout this form we tell you that we need evidence of some of the things you have told us about. Please provide this with the form wherever possible as this will help us to process your application faster. We need to see original documents, not photocopies.

If you do not provide all the proof we need we might not be able to pay you any support. We need the same proof for your partner, if you have one, and for any other adults living in your home.

If you cannot send the evidence we need at the moment ensure that you send the form back to us within a month and send the evidence as soon as possible. We can start to process your application, but we will not be able to pay you any support until we have all the evidence.

The following list shows the types of documents you can use to provide evidence:

Proof of your identity

Birth certificate, Marriage certificate, passport, driving licence, UK residence permit.

Proof of your address

A recent gas, electricity or telephone bill, or a credit agreement or similar showing your current address.

Proof of National Insurance number

National Insurance number card, payslips or letters from the DWP or HMRC.

Proof of income

Letters from the DWP or HMRC, Occupational pension slips and letters.

c) Backdating your application

We cannot backdate your benefit or support application automatically. You need to prove you have good reasons for not making your application sooner. These good reasons must exist for the whole period – starting from the date you want us to pay from, right up to the date that you ask us to consider backdating. The law limits how far we can backdate your application. The maximum amount is 1 month if you are of working age. We will need proof of all your income and savings from the earliest date that you want us to pay benefit from, and if your household was different during that period we will need full details of that too.

Social Security Commissioners have already decided that the following reasons are not good enough to justify backdating applications, therefore, we will usually refuse to backdate your application if your reasons for not applying sooner are that:

- you thought your illness or situation would not last very long
- you did not know about claiming benefit or support
- you were careless and did not bother to make an application
- you thought that you would not get any benefit or support even if you did apply
- you thought you would only be out of work for a short time.

How we collect and use information

We will use the information you give in this form, and in any supporting evidence you send us, to process your application for Council Tax Support.

We may pass the information to other organisations such as the Department for Work and Pensions and HM Revenue and Customs, as allowed by law.

We may check information you have provided, or information about you that someone else has provided, with other information held by us. We may also get information about you from certain third parties, or give them information to :

- make sure the information is accurate
- prevent or detect crime
- protect public funds.

These third parties include government departments, local authorities and private-sector companies such as banks and organisations that may lend you money.

We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows us to.

What to do next

When you have filled in the form and read the declaration, please ensure it is signed and send it back to us with the evidence we need to see.

Please return along with any necessary proofs to:

Email: housing.benefits@boston.gov.uk

Post: Municipal Buildings, West Street, Boston, Lincolnshire, Pe21 8QR

For enquiries:

Tel: 01205 314200

Web: www.boston.gov.uk

If you do not want to send valuable items such as bank books or passports in the post you can bring the form and evidence to us. Please telephone 01205 314200 for advice on how to do this.

If you suspect anyone of fraud, please telephone our 24 hour FREEPHONE hotline: 0800 002 008

Any information you provide in response to this correspondence will be processed by Public Sector Partnership Services Ltd on behalf of the data controller, Boston Borough Council.

We have a legal responsibility to administer claims for Council Tax Support, and this forms our legal basis for processing your information. We may also share this information with other public bodies responsible for auditing or administering public funds, and with other suppliers we commission to support us with our duties.

Please refer to our website www.boston.gov.uk/HBCTS-Privacy-Notice for more information relating to how your information is processed and your rights as a data subject.