

### **Application for Discretionary Housing Payment**

Customer & Digital Services, Town Hall, Parade, Royal Learnington Spa, CV32 4AT Telephone: 01926 456760

Please answer the question as fully as possible. The more information you give us, the better we will be able to understand your circumstances and your need for extra financial help. If you need more space to write in, please use a separate piece of paper and enclose it with the form when you return it.

### **Section 1** (Information about you and your family)

Name:	National Insurance No:		
Address:			
Telephone No:	E-mail:		

Would you prefer to receive <u>all</u> future benefit notification letters via e-mail?	Ye
	) No

Please fill in below who lives with you, even if they don't contribute to the household? For example grown up son or daughter, friend or lodger?

Full Name	Date of Birth	Relationship to you or your partner	If working, put working and how many hours each week, or list what benefits they receive
Example: Peter Smith	01/09/69	Son	Working 30 hours

Yes

Are there any circumstances that contribute to an increase in your household expenditure? (For example, if anyone in your household is ill or disabled, has any special needs or has any special dietary needs)

Are there medical reasons as to why you or your partner or any members of the household need a separate bedroom for an overnight carer?
Yes No
If 'Yes' please provide further details
Has the property been adapted for a disabled person to live in?  Yes No
If `Yes' please provide further details
Section 2 (Information about your housing costs)
Did you check the Local Housing Allowance amount for your property before moving in?
Yes No
Have you tried to find cheaper accommodation?  Yes No
If no, please give reasons why not

Did y	you	consider	any	cheaper	pro	perties

Yes (please give details below)
 No

Which addresses did you look at?         Why were these properties			itable?
Have you asked your landlord if you can pa	y less rent?  Yes No		
What did your landlord say?			
Has your landlord asked you to leave the p	roperty? 🗌 Yes 🗌 No		
What date did they say you had to leave by	? / /		
(If you have received a written notice of eviction	n, please provide a copy	of this.)	
Where will you live if you are evicted (force	ed to leave your home	)?	
Are you requesting any additional help to p	ay a rent deposit?	🗌 Yes	🗌 No
Are you requesting additional help to pay for (You must provide proof of the removal costs)	or removal costs?	🗌 Yes	🗌 No
Are you requesting additional help to pay r	ent in advance?	🗌 Yes	🗌 No
If you are requesting additional help with a or rent in advance you <u>must</u> provide the inf Address you are moving to:	formation requested b	elow.	a deposit

Are you, your partner or any of your children related to your landlord/agent or your landlord's/agent's partner in any way? Related includes related through marriage or civil partnership, even if it has ended.

	Yes
$\square$	No

Please tell us how the shortfall in your housing costs will affect your family \_\_\_\_\_

Please tell us the reason for the shortfall in your housing costs.

Your weekly outgoings exceeds your income	
Your entitlement has been restricted due to the benefit cap	
You are under 35 and only entitled to the LHA shared room rate	
Your entitlement has been affected by the bedroom size criteria	

## Section 3 (Information about your income and outgoings)

Amount of weekly Discretionary Housing Payment required £ \_\_\_\_

Have you sought advice on maximising your income e.g. benefit check? \_\_\_\_\_\_

So that I can understand what effect the shortfall is having on you and your family's budget, please give as much information on the next page as you can. In addition to your own wages and/or other benefit entitlements, you must also include those of your partner, if there is one. You should also detail all maintenance payments received as well as contributions from children living at home or contributions from other people living with you.

Please use the space below to detail your <u>WEEKLY</u> income and expenditure.
Continue on a separate sheet if necessary.

INCOME	£	OUTGOING	iS	£
		Rent/Mortgage		
		Council Tax		
		Gas		
		Electricity		
		Other Fuel		
		Water		
		Telephone		
		Mobile Telephone		
		Internet		
		Television		
		Food/Housekeeping		
		Clothing		
		Travel / Petrol		
		Car Insurance		
		Life Insurance		
		House Insurance		
		Health Costs		
		Court Fines		
		Maintenance		
		Catalogues		
LOAN HP/REPAYMENTS	£	START DATE	END D	ATE

If you have listed any Court Fines, Hire Purchase and Loan expenditure, please enclose recent evidence (dated within the last 2 months) of your repayments.

What have you done to reduce your outgoings? \_\_\_\_\_

Please list all balances of any bank, building society and post offices accounts below.

SORT CODE	ACCOUNT NUMBER	BALANCE
		£
		£
		£

The information you have provided in this application form will now be used to consider your request for a Discretionary Housing Payment. If we need further information we will contact you again.

The Benefits Department will aim to process your application within 14 days of receiving all of the information needed to make a decision.

PLEASE NOTE: if you are awarded a Discretionary Housing Payment, you have demonstrated to the authority that you are experiencing difficulties managing your financial affairs.

To assist you further, and if it is considered appropriate your contact details will be passed to the Coventry and Warwickshire Co-operative Development Agency. They offer a free and confidential service and may be able to provide additional help to you.

If the shortfall in your housing costs is due to restrictions in your Housing Benefit entitlement due to your living accommodation, your details will be passed to the authority's Housing Advice Department. They may be able to give you further advice and help you to find a more suitable place to live or help you keep your current home.

If you are renting your home from the Council; your details will be forwarded to Warwick District Council's Housing Department as they may be able to help you with your housing needs.

# Section 4 (Your declaration)

**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 Warwick District Council Benefits Department for further guidance.

- I understand that this is my claim for a Discretionary Housing 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 Warwick District Council Benefits Department straight away of any changes in my circumstance. For example:
  - If I start or stop receiving Income Support, Jobseeker's Allowance, Employment Support Allowance, Guarantee element of Pension Credit, Child Tax Credit, Working Tax Credit or any other State Benefits;
  - If I start or stop work or get a pay rise or an increase in pension
  - If someone else moves in to my home or moves out
  - If one of my children leaves school
  - If any of my outgoings reduce or stop
- I understand that the information provided will be used to calculate a possible entitlement to Discretionary Housing Payments. It may also be shared with other Council services and other partner organisations.
- I understand that you may check some of the information I have given with other sources within the council 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 have read and understood this declaration.

Signature	Date	/	/
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If this form has been filled in by someone other than the person claiming, please tell us why you are filling in this form for the person claiming.

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

Name of person who fill in the form				
Signature	Date (	/	/	
Relationship to the person claiming				