### Housing Benefit and Council Tax Support CHANGE OF ADDRESS FORM

If you have moved or are moving soon please fill in this form. For assistance, please contact: the Benefits Section by phone, email, or post, using the contact details below.



the heart of Leicestershire

Benefits Section
Blaby District Council
Desford Road
Narborough
Leicester
LE19 2EP

Tel: (0116) 2727510 Fax: (0116) 2727591

Email: benefits@blaby.gov.uk
Website: www.blaby.gov.uk

Date issued	/ /	IMPORTANT: You must tell us as soon as possible of your change of address so that we can avoid any gap in your
Office use		payments.
Claim number		

If you need help completing this form please contact the Benefits Section on 0116 272 7510.						
PLEASE COMPLETE USING BLACK INK						
A: Questions about you						
1) Title  Mr Mrs Miss Ms	8) Address of the property you are currently claiming for					
2) First name and middle name						
3) Last name						
4) National Insurance number	Is the property rented Yes No If Yes is it Furnished or Unfurnished?					
	9) Address of the property you are moving to					
5) Home telephone number						
6) Mobile telephone number						
7) E-mail address	Is the property rented Yes No No If Yes is it Furnished or Unfurnished?					
10) Do you wish to pay your Council Tax by Direct Debit ? Yes No						

1) Do you have a partner?		6) What dat	e did	your partr	ner mo	ve in?	
		/	/				
2) Does your partner live with you?		7) What wa	s you	r partner's	previo	ous add	lress?
2) Vour partner's title							
B) Your partner's title  Mr Mrs Miss Ms	,						
Mr Mrs Miss Ms							
1) Partner's full name		8) At this ac	ddress	were you	ı the (p	olease t	ick)?
5) National Insurance number		Tenant?			Owne		<u>,                                      </u>
) National insurance number		Lodger?			Other	r?	
C: Questions about your hous If there is no one else living wit		No' for que	stion	1 and go	to pa	rt D.	
Do any other people live with you?		If 'Y	′es', p	lease give	e detail	ls belov	٧.
Name	Relatio	onship to you		Date of	birth		ou get enefit?
f anyone has moved in or out of your h ou have not already told us about , ple							

D: Questions about your property If you own your property please answer questions 2 and 3	then go to section G
1) What date did your tenancy start?	/ /
2) What date did you move in?	/ /
3) If you have not moved in yet, what date do you intend to move in?	/ /
4) Do you have a tenancy agreement?:	
5) If you have a joint tenancy, list the names of the other tenants and how much they each pay.	
6) What is the name and address of your landlord or housing association?	
	Email:
	Telephone:
7) Do they own the property?	
8) If not, please give the owner's full name and their address.	
9) Have you or your partner ever owned the property you are renting?	
10) Are you, your partner, or your children related to the owner or agent of the property, or their partner?	
11) If 'Yes', please state how you are related.	
If you have a tenancy agreement, please send it in as proof of rer agreement, please contact us.	nt. If you do not have a tenancy

E: Questions about your rent	4			
1) How much is the full rent?				
2) How often is the rent charged? For example, weekly, 4-weekly, or monthly.				
3) Are you behind with the rent?				
4) If 'Yes', how much do you owe?				
5) What has caused you to fall behind with the rent?				
6) What was the date of the last rent increase?	/ /			
7) Does your rent include money for any of the following? Please we state how much you pay for each.	rite 'Yes' or 'No' in each box and			
Water rates  Council Tax  Heating  Hot water  Lighting  Personal care of Breakfast  Lunch  Evening meal  Fuel for cooking				
8) Are any other services included?				
9) If 'Yes', please state what else is included				

F: Questions about your	home		5					
1) If you rent a room or flat, please tick a box to show where in the property it is								
Front	Back							
2) Looking at the front of the build	ling, is your room to th	ne						
Left?	Centre?		Right?					
3) On which floor is your room or flat? For example, basement, ground floor, first floor.								
4) What is your room or flat numb	er?							
5) How many floors are there in the property?								
6) Please tell us the number of rooms you share.	oms in the property, th	ne number of rooms yo	u use and the number					
Type of room	Number of rooms in property	Number of rooms used just by you and your household	Number of rooms you share with other people					
Living rooms								
Bedrooms								
Bedsitting rooms								
Kitchens								
Bathrooms								
Separate toilets								
Dining rooms	Dining rooms							
Other rooms (please describe)								
Total								
Local Housing Allowance for private tenants  Local Housing Allowance is paid to private tenants (not including housing association tenants). It is								

Local Housing Allowance is paid to private tenants (not including housing association tenants). It is based on the make up of your household, what income and savings you have and how many bedrooms you need. The number of bedrooms you need is based on the number, age, and gender of the people in your household and not the number of bedrooms in the property. There are different rates depending on the number of bedrooms you need up to a maximum of 4 bedrooms. These rates are published on our website www.blaby.gov.uk and are available to view at the council offices and our service shops at Blaby and Braunstone. You can also contact the benefits team by phone for this information.

#### **Rent Allowance for housing association tenants**

Rent Allowance is paid to Housing Association tenants. It is based on the make up of your household, what income and savings you have and how many bedrooms you need. The number of bedrooms you need is based on the number, age, and gender of the people in your household. If you are of working age and have more bedrooms in the property than you need the amount of housing benefit you receive may be reduced by 14% for 1 extra bedroom or 25% for 2 or more extra bedrooms.

G: Questions about your previous prope	erty 6
1) At your previous property were you the (please tick)?	Tenant? Owner?
	Lodger? Other?
2) If you were renting or lodging what date did your tenancy end?	/ /
3) If you owned the property is it for sale?	
4) Please provide estate agents details if the property is for sale, or explain why it is not for sale.	
H: Questions about property and land	
1) Do you, your partner, or your children own any live in), land, or holiday homes, in the UK or abroac on which there is a mortgage or loan, and any help person.	1? This includes properties and land
2) Have you sold a property within the last 5 years?	
If you have answered 'Yes' to either questi	ion above, please provide details below.

l:	Other information				
If you want to give any more information that would help us work out your benefit, please give details in the box below. If there is not enough room, please add a separate piece of paper.					

J: Paying Housing Benefit	8					
Tick this box if you wish us to pay your housing benefit to your housing association.						
If you are entitled to housing benefit and you bank account. Please provide your account	ou pay a private landlord, we will pay you directly into your t details here.					
1) Name of your bank or building society						
2) Account holder's name						
3) Branch sort code						
4) Account number						
5) Role number (Building society and Clockwise accounts						
6) Do you believe you will have difficulty managing payment of rent? For example, if you have a learning or physical disability, problems including drugs, alcohol, mental health, and debt, or difficulty managing your finances. If so we may consider making payments to your landlord.						
7) If 'Yes', please state your reasons below	<i>I</i> .					
K: Paying Council Tax Support						
If you qualify for help towards your Council account and you will be sent a revised bill.	Tax a reduction will be applied to your Council Tax					

#### L: Declaration Please read this declaration carefully then sign in part M.

- This is my change of address form for Housing Benefit and Council Tax Support.
- I live at the address given on the form and have no income other than that I have declared.
- I am not claiming Housing Benefit or Council Tax Support elsewhere.
- I must tell the Benefit Department straight away about any changes. (See part Q).
- I accept that this form may be used to calculate new entitlement to Council Tax Support.

#### **Prosecution**

I declare that the information I have given is correct, and I understand that I may be prosecuted if:

- I give information that is false;
- I supply or allow to be supplied any documents that I know to be false;
- I knowingly continue to get benefit that I am not entitled to.

#### **Data Protection & Information Sharing**

Blaby District Council is registered under the Data Protection Act 1998 for the purpose of processing personal data in the performance of its legitimate business. We may share your information with and obtain information about you from other departments within Blaby District Council, other local authorities, government departments or financial organisations to ensure that the information is accurate, to prevent or detect crime and protect public funds.

Any personal data that the Council collects about you will be processed in compliance with the eight principles of the Act. If you want further information about the data that we hold about you or your rights under the Data Protection Act then please email the Information Management Team at foi@blaby.gov.uk.

I authorise you to make any necessary enquiries to check the information on this form. This
includes contacting my employer, pension provider, HM Revenue and Customs, DWP, other
Council departments, the Rent Officer and other Local Authorities where necessary.

# M: Signatures We have read and understood the declaration Your signature Date / / Your partner's signature Date

#### N: Signatures continued

If someone else has completed the claim form for you this section must be completed. This includes agents, appointee, relatives, and friends.						
I have filled in this form on behalf of the claimant.						
They cannot fill in the form because:						
My name is:						
Relationship to the person claiming:						
I have read each question and recorded the answer	ers given.					
As far as I am aware the answers are true and con	ıplete.					
Signature of the person who filled in the form	Date					
	/ /					
Unless you are the appointee or have power of a the form at part M.	ttorney, the person claiming must also sign					
O: Allowing someone to act on your beha						
	lf					
If you want someone to act for you in relation address and contact details here. They will receive	to benefit claims, please enter their name,					
	to benefit claims, please enter their name,					
address and contact details here. They will receive	to benefit claims, please enter their name,					
address and contact details here. They will receive  1) Name	to benefit claims, please enter their name,					
address and contact details here. They will receive  1) Name	to benefit claims, please enter their name,					
address and contact details here. They will receive  1) Name	to benefit claims, please enter their name,					
address and contact details here. They will receive  1) Name	to benefit claims, please enter their name, e all the letters related to your benefit claim.					

#### P: Sharing information

If you would like us to share information about your claim with your landlord or someone else you should complete the section below. You may choose for us to share information with anyone else, for example a relative or someone from an advice centre who is helping with your claim.

We will not share personal or household circumstances with your landlord, but would discuss this with a third party if you provide their name and contact details below.

I give Blaby District	Council permission	i to share information	on with the following	g people:

My landlord A third party If you have ticked 'A third party', please give their name and address.							
If you have ticked 77 tilled party, please give their haine and address.							
1) Name							
2) Address							
Email:			Telephone:				
Signature of claims	ant	_		Date			
				1	1		

#### Q: Changes that must be reported

- Tax Credit changes;
- Rent changes;
- Pension Credit changes;
- You or your partner start working or change employer;
- You or your partner have a baby;
- You or your partner go into hospital;
- Anyone leaves or joins the household;
- Childcare costs change or stop;
- Anyone is planning to or leaves the UK;
- Change of address; (If you change your address you must contact us for a change of address form).

- You or a member of the household are leaving Great Britain for more than 4 weeks;
- Any other temporary absences from the property;
- You or your partner's income goes up or down;
- The income of anyone in your household goes up or down;
- A child leaves school or Child Benefit stops;
- Employment Support Allowance changes;
- You or your partner's investments or savings go up or down;
- You or your partner come off Income Support, Jobseekers Allowance, or Employment Support Allowance;

#### R: Claim checklist what to do next

Please check that the information you have given is correct.

- Have you answered all the necessary questions?
- Have you included your full name, address, and postcode on page 1?
- Have you signed and dated the form on page 9?
- Have you provided your tenancy agreement? We may also ask for proof of your rent and deposit.
   These must be the originals and not copies.

S: Anything else we can help you w	vith
------------------------------------	------

Do you require any further information regarding bins, etc? Yes No	
If so please tell us what information you require.	
	l

T: Once you have filled in this form you must return it with proofs to

Benefits Section
Blaby District Council
Council Offices
Desford Road
Narborough
LE19 2EP

If you need advice about what to send, please phone us on 0116 272 7510, fax 0116 272 7591, or email benefits@blaby.gov.uk

## Make sure you get your housing benefit payments as quickly as possible.

- Answer every question on the form. Remember to answer 'No' if a question does not apply to you.
- Make sure you give us the evidence to confirm the information you have told us.
- If you do not have all the evidence, don't forget to send in your claim form anyway. You could lose benefit if you do not hand your claim form in.
- If we request more information, send it to us as quickly as you can. Do not ignore the request.

#### Send this form back to

Benefits Section
Blaby District Council
Council Offices
Desford Road
Narborough
LE19 2EP

If you need advice about what to send, please phone us on 0116 272 7510, fax 0116 272 7591, or email benefits@blaby.gov.uk