



## Housing Benefit

Claim Number

### What is this form for?

We have to make all payments of Local Housing Allowance to the tenant. However we can, in certain circumstances, make payments to the landlord.

**The information you provide in this form will help us to decide whether it is appropriate to pay directly to the landlord. You may not need to complete all the questions but try to give as much information and evidence as possible. If you need help please get in touch with us**

Where possible the tenant should complete this form but it can also be completed on their behalf. The tenant should always sign the form and be fully aware that it may lead to their benefit being paid directly to the landlord to cover the rent. If the tenant has not signed the form, the reasons why must be provided in the declaration part of this form. Written evidence needs to be provided to support the information given in this form. This can be from various sources depending on a person's circumstances. For example:

- Advice Workers
- Care Workers / Social Workers
- Department for Works & Pensions (DWP), Job Centre Plus, Pension Service
- Doctor / Hospital
- Courts
- Probation Officer
- The tenants family and friends
- Landlord and Letting Agencies
- Evidence from other sources may be accepted

Name of tenant:

Address of tenant.

Person completing the form (if not the tenant).

Contact address and telephone number (if not the tenant).

If the tenant is not completing the form, please tell us your relationship to the tenant and reason for completing the form on their behalf.

Tell us about any learning disabilities that may cause you problems in paying your rent.

Tell us about any physical disabilities or medical conditions that may cause you problems in paying your rent.

Are you dealing with an addiction (e.g. alcoholism, substance misuse, gambling) that may cause you problems in paying your rent?

Tell us about any mental health problems that may cause you problems in paying your rent.

Are you having problems paying your rent because you need assistance understanding English?

Please tell us anything that means you need additional support that may cause you problems in paying your rent? For example, if you are receiving help because of homelessness or leaving local authority care.

Have you had any previous problems paying your rent? If yes, please give details.

Do you currently have rent arrears?            Yes            No

If yes: How much are your rent arrears?    £

What period do they cover?                    to

**Please provide proof of rent arrears**

Has your landlord taken any action to recover your rent arrears? (court action, notice of seeking possession, notice to quit, sent you a letter or set up a payment plan?)

If so, please tell us what and **send us proof** of any action taken.

Do you have debt problems- for example county court judgements or bankruptcy which you think will make it difficult for you to budget to pay your rent? Please tell us details.

Do you receive support from any agency, organisation, friend or family member to help you to make rent payments?    Yes            No            If Yes, tell us how.

Are you having deductions made from your Income Support or Job Seekers Allowance?  
Yes            No            If Yes, what is it for. We need to see proof.

**Tenants Declaration**

- The information in this form is true and correct
- I am happy for my Local Housing Allowance to be paid directly to my landlord
- I will contact the Benefits Service if I feel able to receive my benefit myself

I have read and understand the declaration. Please sign and date the form below

Signature

Date

**Please remember to include evidence to support your request**

**Person completing the form, if not the tenant**

- The information is true and correct
- I believe it to be in the best interest of the tenant to pay Local Housing Allowance to their landlord

I have read and understand the declaration. Please sign and date the form below

Name

Signature

Date

**How we collect and use information.**

This authority is under a duty to protect the public funds it administers. We may check information by a third party, with other information we hold, to check the accuracy of information, to prevent or detect crime; and to protect public funds in other ways, as permitted by law. We may also share this information with other council departments or bodies administering public funds for these purposes. We may also use this information to put you in touch with our services that may be able to help you.

We will not disclose information about you to anyone, unless the law permits us to.

Please use this space for any additional information.

If you are having problems managing your financial affairs and would like to seek help and advice, we can forward your details to the Stockton & District Advice & Information Service (CAB) who will contact you.

Yes, I would like the Stockton & District Advice & Information Service to contact me

Name .....

Address .....

Telephone contact number ..... Preferred contact time .....

I agree that Stockton & District Advice & Information Service can feedback the outcome of this referral to the council.

**FOR OFFICE USE ONLY**

**Details forwarded to SDAIS .....**