



## Application for Discretionary Housing Payments & Discretionary Council Tax Support

Discretionary Housing Payments are free standing payments and are not payments of benefit. Any payment is at the discretion of the local council where it considers that additional help with housing costs are needed. Each council has an annual cash limit and once this has been reached no further awards can be made.

Discretionary Housing Payments cannot be awarded for charges due to heating, lighting, water, sewerage, meals, laundry and other day-to-day expenses. It is for help with housing costs only, meaning eligible rent. Any claimant whose Housing Benefit is restricted may apply.

Please fill in this form to apply for discretionary housing payments and/or discretionary Council tax support and send it to:

Benefit Services

PO Box 302

Witney

OX28 1WP

If you have any queries, call 01993 861030

### Please use **BLOCK CAPITALS**

Details of applicant	
Name:	
Address and postcode:	
Home tel:	
Daytime tel:	

<b>I need additional help with my housing costs because:</b>		
Please note it is not enough to say you need discretionary housing payments to help pay your rent. You must tell us why you need extra help.		
<b>Have you asked the Landlord to reduce your rent?</b>	<b>Yes</b>	<b>No</b>
If yes, please explain what happened:		
<b>Were you able to afford the rent when you moved in?</b>	<b>Yes</b>	<b>No</b>
If yes, please tell us how you were able to afford it:		
<b>Do you or any member of your family have any disabilities or health problems?</b>	<b>Yes</b>	<b>No</b>
If yes, please give details:		
<b>Please tell us how your accommodation is suitable for you.</b>		
For example has it been adapted if you have a disability, or if a member of your family has any health problems or disabilities.		

Do you have an overnight carer?		<b>Yes</b>	<b>No</b>
If yes, please give details:			
Do you have any regular expenses due to disabilities not included in any headings in the Personal Budget Sheet, including transport/laundry etc? If so, please provide details.			
Amount	Frequency	Reason for expenses	
Have you tried to find alternative accommodation?		<b>Yes</b>	<b>No</b>
If yes, please give details.			
Are you on the housing list?		<b>Yes</b>	<b>No</b>
For details see <a href="http://www.homeseekerplus.co.uk">www.homeseekerplus.co.uk</a>			
How much notice are you required to give and when does your tenancy actually end?			
Notice period:		Tenancy end date:	
Please tell us how the area is suitable for you and your family. Do you need to live near a particular nursery, other childcare, school or service?			

Have you recently had a change of circumstances? For example moving, starting or stopping work, a change in your household, a bereavement.	<b>Yes</b>	<b>No</b>
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If yes, please give details.

Please give details of saving/current accounts held by you/your partner and provide the last 3 months statements for each account.

Name	Account Number	Balance

Are you engaged with other agencies ie, social services, support workers etc?

If so, please give details.

If you were awarded Discretionary Housing Payments and are in receipt of Universal Credit, would you like the payments to be paid direct to your landlord?

If so, please give details.

Is there anything else you think we should know?

**Please complete the attached Personal Budget sheet.**

<b>PERSONAL BUDGET SHEET</b>		
<b>YOUR INCOME</b>	<b>Weekly</b>	<b>Monthly</b>
Wage or salary (after deductions)		
Partner's wage or salary (after deductions)		
Non-dependent financial contribution		
Statutory sick pay (SSP)		
<b>Total wage or salary</b>		
<b>YOUR BENEFITS</b>	<b>Weekly</b>	<b>Monthly</b>
Child benefit		
Jobseeker allowance		
Income support		
Employment support allowance (ESA)		
Incapacity benefit		
Disability Living Allowance		
Personal independence payment		
Carer's allowance		
Working tax credit		
Child tax credit		
Maintenance or child support		
Attendance Allowance		
Housing benefit		
Council Tax Support		
Universal Credit (provide award letter)		
Other		
<b>Total benefits</b>		
<b>YOUR PENSIONS</b>	<b>Weekly</b>	<b>Monthly</b>
Your state pension		
Partner's state pension		
Private pension 1		
Private pension 2		
Pension Credit		
<b>Total pension income</b>		
<b>TOTAL INCOME</b>		
<b>LIST OF PRIORITY DEBTS</b>	<b>Amount owed</b>	<b>Repayment</b>
Rent arrears		
Mortgage arrears		
Council tax arrears		
Utility arrears (Gas, Electricity, Water)		
Maintenance or child support arrears		
Others		
<b>Total arrears</b>		
<b>NON PRIORITY DEBTS</b>	<b>Amount owed</b>	<b>Repayment</b>
Loan 1		
Credit card 1		
Credit card 2		
Catalogue and store cards		
Other		
<b>Total debts</b>		

<b>OUTGOINGS</b>		
<b>ESSENTIALS</b>	<b>Weekly</b>	<b>Monthly</b>
Rent		
Mortgage		
Second mortgage or secured loan		
Council tax		
Water		
Gas		
Electricity		
Oil, coal, Calor gas		
TV licence		
Building and/or content insurance		
Pension and/or life insurance		
Childcare costs/Maintenance		
<b>Total essentials</b>		
<b>HOUSEKEEPING</b>	<b>Weekly</b>	<b>Monthly</b>
Food & milk		
Cleaning & toiletries		
Nappies & baby items		
Cigarettes		
Alcohol		
Clothing & footwear		
Pet food		
Pet insurance		
Vet fees (annual booster)		
<b>Total Housekeeping</b>		
<b>PHONE</b>	<b>Weekly</b>	<b>Monthly</b>
Home phone		
Mobile phone		
Cable, Satellite, and internet		
<b>Total Phone</b>		
<b>TRAVEL</b>	<b>Weekly</b>	<b>Monthly</b>
Public transport including taxis		
Car insurance		
Road tax		
Petrol		
Car maintenance & MOT		
Breakdown & recovery		
<b>Total travel</b>		
<b>Other spending</b>	<b>Weekly</b>	<b>Monthly</b>
Health costs (dentist, glasses. Prescriptions)		
School meals and school trips		
Lottery		
Newspapers & magazines		
Hobbies & leisure		
Gifts (birthdays & Christmas)		
Bank charges		
<b>Total other spending</b>		
<b>TOTAL OUTGOINGS (including debts)</b>		

## Declaration and signature

- I declare that all the information that I have provided on this claim form is true and complete.
- I understand that any of the information supplied on my Housing Benefit form may be used in respect of this application.
- I will notify the Council immediately if any of the information supplied on this form changes.
- I am aware that if I fail to notify you of a change I may have to repay any money I am not entitled to receive.

### To deliberately give false information may result in prosecution.

Claimant's signature: ..... Date: .....

Partner's signature: ..... Date: .....

## Disclosure and exchange of information

In order for us to help you as much as we can, we may need to obtain details from people to whom you have given information in confidence, including landlords or mortgage lenders, employers and/or previous employers, HMRC, Job Centre Plus, Citizens Advice Bureau, Age UK, support workers and/or your social worker, utility companies, your GP and/or other local health services and West Oxfordshire District Council Housing Services. Please note that this is not an exhaustive list.

If you are happy for us to approach such bodies, please sign the statement below. If you are not prepared to do this, please tell us why on a separate piece of paper and we will record your reasons. Whether you give your consent or not, we will be prepared to continue considering your application.

**I give my consent to the Revenues and Benefits Service, West Oxfordshire District Council to obtain information held about me for the purpose of investigating and assessing my application.**

**Signature:** ..... **Date:** .....

**Name:** .....

The Council are the Data Controllers for the purposes of the Data Protection Legislation. We will only use your personal information in accordance with the Legislation and for the purposes of the Revenues & Benefits. We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows us to.