



# Housing Benefit & / or Council Tax Reduction Application Form for Applicants of Pension Age

**PLEASE READ NOTES ON PAGE 11 BEFORE COMPLETING THIS FORM IN BLOCK CAPITALS**

Name

Address

Postcode

Telephone

Email

Are you? (Please tick all that apply):

An Owner Occupier

A Council Tenant

A Private Tenant

A Joint Owner/Tenant

### About this form

This form is for people who have reached the age to get a State Pension or State Pension Credit. If you are not of pension age then please complete the application form for applicants of working age. If you do not have all the information we ask for to hand, you **MUST** still make the application straight away. You normally have a calendar month to bring us other information needed to support your application. If you want to apply for Alternative Maximum Council Tax reduction then you need only complete sections 1, 2 and 7 of this form and the separate supplementary form 'Pensioners with non-dependants'.

**Return your claim to:** Revenues & Benefits Team  
 William Patrick Library  
 2 - 4 West High Street, Kirkintilloch, G66 1AD  
 Telephone enquiries: **0800 901 057**  
 E-mail: [benefits@eastdunbarton.gov.uk](mailto:benefits@eastdunbarton.gov.uk)

If you know anyone who is stealing from the system contact us on 0141 578 8220 or call the National Benefit Fraud Helpline on 0800 328 6340.

### For official use only

Date issued  /  /  Issued by  Location

Reference  Date received  /  /  Date first contact  /  /

## Part 1 About you and your partner

By partner we mean someone of the opposite or same sex that you are married to (including Civil Partnerships), or live with as if you were married.

If you have a partner you must answer all questions about them as well as for yourself. Please provide all information asked for, or give as much information as possible.

### Part 1A. Personal Details

	You	Your partner
Title (For example Mr, Mrs, Ms)	<input type="text"/>	<input type="text"/>
First name(s)	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
Any other names you have used	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>
National Insurance Number	<input type="text"/>	<input type="text"/>

Please provide two proofs of identity - for the applicant and any partner for example passport, driving licence, birth/marriage certificate, UK residence permit, EEC Identity Card.

Please provide one proof of National Insurance Number for the applicant and any partner - for example National Insurance Card, payslip, P45/P60.

### Part 1B. Have you come to live or returned to live in Scotland, England, Northern Ireland, Wales, the Republic of Ireland, the Channel Islands or the Isle of Man in the last five years?

- Yes Please provide all information asked for, or give as much information as possible
- No
- Are you a British Citizen?  Yes - Go to Part 1C
- No - Enter details below

	You	Your partner
Nationality	<input type="text"/>	<input type="text"/>
Date entered the UK	<input type="text"/>	<input type="text"/>
Expected length of stay	<input type="text"/>	<input type="text"/>
Reason for stay	<input type="text"/>	<input type="text"/>

Please provide your passport(s) / immigration documents. We will contact you if we need any more information

### Part 1C. When did you move to this address?

Please provide all information asked for, or give as much information as possible.

If you are unable to give exact dates then please give approximate dates

Date bought  OR Date tenancy started

Date moved in  OR Move in date to follow

If you have not moved into your address when you submit the application then please give written or email confirmation of the date that you do move in and ask the Revenues & Benefits Team for more advice.

## Part 1 About you and your partner (continued)

### Part 1D. Previous address?

Please give as much detail as possible about your last address. If you are unable to give exact dates then please give approximate dates.

Last Address

  

Date moved in

Date moved out

Have you told the Council you have moved? No  Yes

Were you? A Council Tenant  A Private Tenant  An Owner Occupier  A Non-Householder

Did you receive Housing Benefit/Council Tax Reduction at this address? No  Yes

If YES Which Council paid your Benefit?

## Part 2. About Health & Circumstances

Please answer all of the questions below and enter any details asked for.

**Part 2A. Are you or your partner living away from home for any reason?**

- No  
 Yes - We will contact you about this

**Part 2B. Are you/your partner unable to share a bedroom because of a disability?**

- No  
 Yes - We will contact you about this

**Part 2C. Do you or your partner require overnight care?**

- No  
 Yes - We will contact you about this

**Part 2D. Are you or your partner registered blind?**

- No  
 Yes - Please provide your registration card(s).

**Part 2E. Does anyone get Carer's Allowance for looking after you or your partner?**

- No  
 Yes - Please give name and address

Name

Address

  

**Part 2F. Do you or your partner have any children that live with you?**

- No  
 Yes - Please complete the supplementary form 'Pensioners with Children'.

**Part 2G. Do any other adults usually live with you and your partner?**

- No  
 Yes - Please complete the supplementary form 'Pensioners with Non-Dependants'.

**Part 2H. Do you or your partner do any paid work for an employer?**

- No  
 Yes - Please complete the supplementary form 'Pensioners who are Working'.

**Part 2I. Are you or your partner self-employed?**

- No  
 Yes - Please complete the supplementary form 'Pensioners who are Self employed'.

## Part 2. About Health & Circumstances (continued)

**Part 2J. Are you or your partner a student?**

- No  
 Yes - We will contact you about this

**Part 2K. Are you liable to pay rent to the Council?**

- No  
 Yes

**Part 2L. Are you liable to pay rent to a private landlord or Housing Association?**

- No  
 Yes - Please complete the supplementary form 'Pensioner Private Tenant'.

## Part 3. About Income

Please give as much information as you can. We must see proof of all Benefits you or your partner receive. If you, or your partner, are awaiting the outcome of any claim for State Benefit(s) then please complete Part 3B.

**Part 3A. Do you or your partner get any State Benefits? (continued)**

- No - Go to Part 3B  
 Yes - Enter details below

Amounts given should be the amount paid into your account **before** any deductions.

Benefit	You			Your Partner			Office Use
	Amount?	How often?	Account paid into?	Amount?	How often?	Account paid into?	
Attendance Allowance	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	AA
Carer's Allowance	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	CA
Disability Living Allowance (Care Component)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	DLACX
Disability Living Allowance (Mobility Component)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	DLACM
Industrial Death Benefit	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	IDB
Industrial Disablement Benefit	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	IIB
Pension Credit (Guarantee Credit)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	PCGC
Pension Credit (Savings Credit)	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	PCSC
PIP Daily Living Component	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	PIP DL
PIP Mobility Component	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	PIP M
State Pension	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	SRP
War Disablement Pension	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	WDP
War Widow's Pension	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="text"/>	<input type="text"/>	WP

**Part 3B. Are you or your partner awaiting the outcome of a claim for any Benefits?**

- No - Go to Part 3C  
 Yes - Enter details below

Benefit(s) claimed

Date(s) claimed  /  /   /  /   /  /

Please provide your award letter(s) when received.

## Part 3. About other income

We need to know about **any other** income you, or your partner, receive. Please provide all information asked for, or give as much information as possible. You must provide proof of all other income received as detailed at the end of each part. If you do not have the evidence asked for, then please contact the Revenues & Benefits Team for advice.

### Part 3C. Do you or your partner receive a pension from a former employer?

No - Go to Part 3D

Yes - Or Awaiting enter details below

Please also include any pension received by you from a late partner's employer. If you are awaiting payments from a pension, then please fill in as many details as possible and provide your payment details when received.

You	Your Partner
Pension received from <input type="text"/>	Pension received from <input type="text"/>
Start date <input type="text"/>	Start date <input type="text"/>
How much <input type="text"/>	How much <input type="text"/>
How often <input type="text"/>	How often <input type="text"/>
Account paid into <input type="text"/>	Account paid into <input type="text"/>
Date of last increase <input type="text"/>	Date of last increase <input type="text"/>
Date of next increase <input type="text"/>	Date of next increase <input type="text"/>

Please provide your most recent Pension statement.

### Part 3D. Do you or your partner receive any other income? (continued)

No - Go to Part 4

Yes - Or Awaiting enter details below

Please include any other income not already declared. Other income includes private pensions, payments from the Financial Assistance Scheme, annuities, payments from other people, money from a trust fund or **any other income not specifically mentioned**.

If you are awaiting payments then please fill in as many details as possible.

You	Your Partner
Type of income <input type="text"/>	Type of income <input type="text"/>
Received from <input type="text"/>	Received from <input type="text"/>
Start date <input type="text"/>	Start date <input type="text"/>
OR date claimed <input type="text"/>	OR date claimed <input type="text"/>
How much <input type="text"/>	How much <input type="text"/>
How often <input type="text"/>	How often <input type="text"/>
Account paid into <input type="text"/>	Account paid into <input type="text"/>
Date of last increase <input type="text"/>	Date of last increase <input type="text"/>
Date of next increase <input type="text"/>	Date of next increase <input type="text"/>

Please provide your most recent payment statement, award letter or bank/building society account statement.

## Part 4. About Bank / Building Society Accounts, savings and investments

We need to know about **all** the capital that you and your partner have. This means **all** bank/ building society/Post Office accounts (including those that have zero balances or are overdrawn), cash savings, Premium Bonds, National Savings Certificates, ISAs, Income Bonds, stocks shares or **and all other** types of investments not specifically mentioned. If you have **any** capital then please complete **all** sections of part 4 - even if you are answering 'no' or 'none'. If there is not enough space for all accounts/investments then please tell us about these on a separate sheet of paper.

### Do you or your partner have any current accounts, savings accounts, any other type of account, cash savings, shares or any other investments?

No - Go to Part 5

Yes

## Part 4. About Bank / Building Society Accounts, savings and investments (continued)

### Bank Accounts

**You**

None  1 or more  give details below.

Name account is in

Name of Bank

Account number

Sort code

Balance held £

Name account is in

Name of Bank

Account number

Sort code

Balance held £

**Your Partner**

None  1 or more  give details below.

Name account is in

Name of Bank

Account number

Sort code

Balance held £

Name account is in

Name of Bank

Account number

Sort code

Balance held £

### Building Society Accounts

**You**

None  1 or more  give details below.

Name account is in

Name of Building Society

Account number

Sort code

Balance held £

Name account is in

Name of Building Society

Account number

Sort code

Balance held £

**Your Partner**

None  1 or more  give details below.

Name account is in

Name of Building Society

Account number

Sort code

Balance held £

Name account is in

Name of Building Society

Account number

Sort code

Balance held

### Post Office Accounts

**You**

None  1 or more  give details below.

Account number

Benefit Direct Account  Yes  No

Balance held

**Your Partner**

None  1 or more  give details below.

Account number

Benefit Direct Account  Yes  No

Balance held £

### Cash Savings

**You**

None  Amount held

**Your Partner**

None  Amount held £

### Premium Bonds

**You**

None  Amount held

**Your Partner**

None  Amount held

## Part 4. About Bank / Building Society Accounts, savings and investments (continued)

### National Savings Certificates

You

None  Amount held

Your Partner

None  Amount held

### Stocks & Shares

You

None  Number held  give details below.

Name of company

Number held

Value £

Name of company

Number held

Value

Your Partner

None  Number held  give details below.

Name of company

Number held

Value £

Name of company

Number held

Value £

### ISA / Income Bond / Unit Trusts

You

None  1 or more  give details below.

Type

Company

Value £

Type

Company

Value £

Your Partner

None  1 or more  give details below.

Type

Company

Value £

Type

Company

Value £

### Other investments

You

None  1 or more  give details below.

Type

Company

Value £

Type

Company

Value

Your Partner

None  1 or more  give details below.

Type

Company

Value £

Type

Company

Value £

### Lump sums received/to be received.

You

None  1 or more  give details below.

Type

From

Date received

expected  Amount

Your Partner

None  1 or more  give details below.

Type

From

Date received

expected  Amount

Please provide full statements for all accounts held for your last 2 months of transactions, or your most recent quarterly or annual statement; Certificates for Shares, ISAs, Premium Bonds, National Savings or any other investments; or any other official documentation you receive that details the amount of investment held and any interest/dividend paid.

## Part 5. About land and property

### Part 5. About Land and Property

We need to know about any other land or property you, or your partner, have in either the UK or abroad. Please provide all information asked for, or give as much information as possible. We will write to you if we need more information as not all land or property is included in the assessment of your award of Benefit / Reduction

**Other than the home that you live in, do you or your partner own (or partly own) property or land in the UK or abroad?**

- No - Go to Part 6  
 Yes - Enter details below

You	
Type(s) (For example plot, shop, flat)	<input type="text"/>
Location / address	<input type="text"/> <input type="text"/>
Value	<input type="text"/>
Mortgage/Loan outstanding	<input type="text"/>
Is the property up for sale?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the property repossessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the property occupied?	
No	<input type="checkbox"/> Date unoccupied from <input type="text"/>
Yes	<input type="checkbox"/> Name of occupant(s) <input type="text"/>
Relationship to you	<input type="text"/>
Is the property rented out?	
No	<input type="checkbox"/>
Yes	<input type="checkbox"/> Amount of rent received <input type="text"/>
How often	<input type="text"/>

Your Partner	
Type(s) (For example plot, shop, flat)	<input type="text"/>
Location / address	<input type="text"/> <input type="text"/>
Value	<input type="text"/>
Mortgage/Loan outstanding	<input type="text"/>
Is the property up for sale?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the property repossessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the property occupied?	
No	<input type="checkbox"/> Date unoccupied from <input type="text"/>
Yes	<input type="checkbox"/> Name of occupant(s) <input type="text"/>
Relationship to you	<input type="text"/>
Is the property rented out?	
No	<input type="checkbox"/>
Yes	<input type="checkbox"/> Amount of rent received <input type="text"/>
How often	<input type="text"/>

Please provide your mortgage/loan statement/schedule of sale/any rental agreement.

## Part 6. About Your Award

Applicants who have reached the qualifying age for State Pension and State Pension Credit can have an award considered for a maximum period of up to three months prior to an application being made.

Were your personal, household and financial circumstances different in the last 3 months to those detailed in the parts above?

- No - Go to Part 7  
 Yes - Details of difference(s)

  
  

Please provide any evidence that you have to support your application. We will contact you if we need any more information.

If you do not want to claim for an earlier period then please tell us why. For example, you may not want to claim from an earlier date because you were working, or did not live here, or had capital over £16,000.



## Part 7 Declaration

Please read this declaration carefully before you sign and date it. The declaration **must** be signed in order for your application to be assessed. Even if someone else has filled in this form for you, you must sign this declaration **if you can**. If you cannot sign the form then your **appointee must sign** Part 7A, and Part 7B if they were the person that helped you complete the application form.

### Part 7A.

To be completed by you and your partner if you have one.  
East Dunbartonshire Council is registered under the Data Protection Act 1998.

This authority is under a duty to protect the public funds it administers, and to this end will use the information you have provided on this form for the prevention and detection of fraud. It will also share this information with other bodies responsible for auditing or administering public funds for these purposes.

For further information, see the National Fraud Initiative guidance on the Council's website at [www.eastdunbarton.gov.uk/nfi](http://www.eastdunbarton.gov.uk/nfi)

- I declare that the information that I have given on this form is correct and complete.
- I agree that you will use the information I have provided to process my claim for Housing Benefit and/or Council Tax Reduction. I authorise you to check the information with other sources as allowed by law.
- I understand that the information I have provided may be used to prevent and detect fraud (which may include checks on undeclared cohabiters by fraud investigators), and may be shared with other sections within the Council, with other Councils, Government departments, the Rent Service Scotland, and Experian (a Credit Reference Agency) for the same purpose.
- I know that I must immediately report any changes in my circumstances which might affect my application to the Revenues & Benefits Team.
- I understand that if I give information that is incorrect or incomplete, or fail to report any changes which might affect my Housing Benefit / Council Tax Reduction award, I may be prosecuted or have to pay a financial penalty.

Signature of  
applicant

Signature of  
partner

Date

Date

### Part 7B.

If this form has been filled in by someone other than the person(s) applying, then the person who filled in the form **must** complete this section.

Name of the person who filled in this form

Address

Telephone number

Relationship to applicant(s)

Please tell us why you  
have filled in the form  
for the applicant(s)

Are you the applicant and/or their partner's appointee? No  Yes  Please provide proof (For example Power of Attorney).

Should all correspondence be sent to you? No  Yes

I declare that I have asked the applicant(s) all the questions on the form and that the answers noted on this form are as provided to me.

Signature

Date

Lined writing area for notes.

**Please take a few minutes to read these notes before you fill in your application form. This section is for you to tear out and keep for your future reference.**

### Before you begin

Please don't be put off by the size of the application form as you may not need to complete every part of it. Please use ink to fill in the form - don't worry if you make a mistake, just cross it out and write your answer again.

If a part or section **does** apply to you then please ensure you give all details asked for - or as much information as you can. If a part or section **does not** apply to you then please select "no" or "none" as your answer where asked to do so.

Further details are given in each part of the form. However, if you need any advice or help to fill in your application form then please contact the Revenues & Benefits Team. Full contact details are on the first page of the form.

### Evidence needed to support my application

Each part of the form tells you if any proof is needed, and gives examples of the proof that we can accept.

**All** applicants must provide the proof asked for to support their application. The proof asked for is required within the terms of the relevant regulations, ensures that applicants receive the maximum possible award of Housing Benefit and/or Council Tax Reduction, and is also used to prevent and detect fraudulent applications.

Please provide **original documentation**. We will copy it and return all originals to you immediately.

If you are unable to provide all the proof straightaway then you should still return your application to the Revenues & Benefits Team as soon as it is completed. You will then have a calendar month to provide all the proof needed. If you cannot provide all the proof needed to support your application within a calendar month then contact the Revenues & Benefits Team **before the calendar month ends** to ask for advice.

**Please help us to help you** as we cannot pay you any Housing Benefit and/or Council Tax Reduction that you may be entitled to until you provide all the necessary information and evidence to support your application. As this is the case, **please complete the checklist on the other side of this page when you have completed the form** as it gives you a list of the proof we need to support your application. It can also be used to remind you of any proof that you still need to give to us to support your application.

### Housing Benefit prior to moving in or for an unavoidable overlap of liability

It may be possible to pay Housing Benefit before you move in to your home, or for two homes. However, this can only be awarded if you meet certain conditions **and** you can prove that the delay in moving into the property was reasonable, or that an overlap of tenancy dates could not reasonably have been avoided.

Please note that East Dunbartonshire Council has no discretion to make an award of Housing Benefit if you do not meet the conditions for an award of Housing Benefit in these circumstances. Please contact the Revenues & Benefits Team for advice.

Even if you do not qualify for Housing Benefit, you can still claim for Council Tax discount/exemption when you have an overlap of Council Tax Liabilities. Please contact the Revenues & Benefits Team on 0141 578 8190 for advice.

### What happens when you receive my application?

If we do not have all the information and/or evidence we need to support your application we will write to you. Once all information and evidence required is received we aim to process your application within fourteen days.

Please note that if you have sole or joint capital of over £16,000 you are not normally entitled to Housing Benefit and/or Council Tax Reduction. However you may be entitled to Alternative Maximum Council Tax Reduction. Please contact the Revenues & Benefits Team for advice.

Decision notice(s) will be issued to advise you of your award(s) and how we have reached our decision(s). You **must** check the decision notice(s) upon receipt and advise us **immediately** if you think that there are any errors or omissions in the information used to calculate your award/reduction. You have a calendar month from the date of issue of your decision notice(s) to make a written request for a further explanation regarding your award/reduction, a statement of reasons detailing how the award/reduction was calculated, to ask for the decision to be reconsidered, or to ask for a formal appeal.

If you are a Council Tenant, Housing Benefit will be paid directly into your rent account. If you are a Housing Association Tenant, payment will be made either to you or your landlord by cheque or bank credit. From April 2008, Housing Benefit (Local Housing Allowance) for most other Private Tenants will be paid to claimants unless the claimant meets specific criteria for payment to be made direct to their landlord.

If you receive Council Tax Reduction or Alternative Maximum Council Tax Reduction your Reduction will be paid directly in to your Council Tax account.

### What are my responsibilities when I am in receipt of benefit/Reduction?

Once your application has been decided upon the information given in your application form you **must tell us in writing immediately** if any of your personal, household or financial circumstances change.

If you do not tell us about changes in your circumstances you may receive Benefit/Reduction that you are not entitled to and will have to pay this back. You may also be prosecuted or have to pay a financial penalty.



### Other formats & Translations

This document can be provided in large print, Braille or on audio cassette and can be translated into other community languages.

Contact the Corporate Communications Unit at:

East Dunbartonshire Council,  
Civic & Corporate Headquarters  
12 Strathkelvin Place  
Kirkintilloch  
Glasgow  
G66 1TJ, Tel: 0300 123 4510.

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhith oirbh. Cuiribh fòn gu 0300 123 4510

अनुरोध करने पर यह दस्तावेज हिन्दी में माषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फोन कीजिए।

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਫ਼ੋਨ ਕਰੋ।

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ براہ مہربانی فون نمبر 0300 123 4510 پر رابطہ کریں۔

For further information about Housing Benefit & Council Tax Reduction, contact:

William Patrick Library, 2-4 West High Street, Kirkintilloch, G66 1AD

Tel: 0800 901 057 Email: [benefits@eastdunbarton.gov.uk](mailto:benefits@eastdunbarton.gov.uk) Visit: [www.eastdunbarton.gov.uk](http://www.eastdunbarton.gov.uk)