Change of address within Hammersmith & Fulham

For all types of tenants and homeowners

This form is for claimants who are or have been receiving housing and/or council tax benefit immediately before moving from home.

FRAUD. The benefits service is committed to tackling all benefit fraud because fraud creates poverty by reducing the total amount of money that is available to those who genuinely need it. Benefit fraud is a criminal offence and, if it is in the public interest to do so, we will prosecute the offenders to make sure that they are punished.

For office use only		
Team		
Date stamp		

III prosecute the offenders to make sure that th	ley are punished.		
New address	Previous address		
Postcode	Postcode		
Date moved in	Date moved out		
(This must not be a date in the future)	Benefit reference no.		
Do you own this property? Yes No	benefit reference fig.		
1. ABOUT YOU & YOUR PARTNER			
You Mr Mrs Miss Ms	Your partner Mr Mrs Miss Ms		
First or given names	First or given names		
Surname or family name	Surname or family name		
Address	Address		
Postcode	Postcode		
Tel no. (home)	Tel no. (home)		
Email	Email		
National Insurance number	National Insurance number		
Letters Numbers Letter	Letters Numbers Letter		
Do you or your partner receive: (please tick 🗸 if a lncome based	applicable) Pension Employment Support		
Support Jobseeker Allowance	Credit Allowance		

2. PEOPLE WHO LIVE WITH Y	OU			
Please list the names of other people (new address. If none please write 'nor		han your pa	rtner) who normally li	ve with you at your
Name	Date of	f birth	Relationship to you	Weekly income
Please list the names of anyone who h	as left y	your househ	nold since your last cla	iim
Name	Date m	noved out	Forwarding address	
		,		
3. CHANGES OF CIRCUMSTA	NCES			
Please give details of any changes to y pensions, earnings, self-employment, b your last claim for Housing & Council	bank bu Tax Ben	uilding socie efit.	ty, capital, savings and	d investments since
Please provide proof for each char	nge, w	e need to	see original docum	ents (not copies)
You and your partner Details of changes of circumstances fo	r vou			
or your partner. If none please write 'r		Name of p	person change relates	to Date changed
Other household members	r other			
Details of changes of circumstances fo people in household. If none write 'no		Name of p	person change relates	to Date changed
		'	<u> </u>	

If you need more room for your answers please continue using the space in section 9.

4. PRIVATE TENANTS, LODGERS AND PEOPLE LIVING IN HOSTELS We need to know the name and home or business address of the landlord of the property you live in. We cannot accept a 'care-of' address. If you pay your rent to an agent, we also need their address. Landlord or housing association I pay rent to: Agent Telephone number Name Address Postcode Are you, your partner or children related to your landlord or agent, or to your landlord's partner or the agent's partner? 'Related' includes related through marriage, even if the marriage has ended. Yes No If **yes**, what is the relationship? Does your landlord live in the property? Nο About your tenancy What date did your tenancy begin? Don't know Is the tenancy an assured shorthold tenancy? Yes No If **yes**, for what period? to Nο Does anyone share the rent payment with you except your partner? Yes If **yes**, please give the names of the people who you share the rent payments with: About where you live Have you or your partner ever been the owner or joint owner of the property? What type of property do you live in? Detached house Semi-detached house Terraced house Flat in a house Room(s) in a house/hostel Bungalow Flat in a block Maisonette Flat over a shop Caravan or mobile home Residential nursing or care home How many floors are there in the whole property? Which floor do you live on? Front Centre Where is your room in the property? Back Do you have central heating? No

Is the landlord responsible for decorating the inside of your home? Yes No			
Is the property furnished by the landlord? Yes No			
If yes , does the landlord provide:			
Very little furniture Some furniture Most of the furniture			
How many of the following rooms are in the property? Bedrooms Bed sitters Kitchens Bathrooms dining rooms Other			
Bedrooms Bed sitters Kitchens Bathrooms dining rooms Other No. of rooms in the whole flat			
No. of rooms in the whole list			
No. of rooms for your sole use only			
No. of rooms you share with people who are not part of your household			
Tick the box if you share that			
room with your landlord			
Do you let or sublet any rooms? Yes No If yes , how many rooms?			
How many rooms do only you live in? How many rooms does only the subtenant live in?			
5. ABOUT YOUR RENT			
You must provide proof of your rent, such as a rent book, a tenancy agreement, or a letter form you landord or thier agent.			
You must provide original documents, which show all of the details on this list. You may need to send us more than one document to give us all the proof we need.			
✓ Your landlord's or agents name and business address			
✓ The amount of rent you are charged✓ How often your rent is due			
✓ Date your tenancy started			
✓ What is included in your rent (e.g. fuel, water)			
Do you share your rent with other people?			
If yes , with how many people (including yourself)?			
How much is your share of the rent?			
How much is the total rent?			
How often should you pay (weekly, monthly etc)			

6. PAYING HOUSING BENEFIT

From 7th April 2008, under the Local Housing Allowance (LHA) scheme, benefit payments will normally be sent direct to tenants. If you think that receiving direct payments will cause you serious problems, please complete this section of the application form and provide the evidence we need.

Please tick the box or boxes that apply to you and provide the evidence required.

Reason direct payment is a problem	Evidence required			
I have learning disabilities that make it difficult to manage my finances	Written evidence from Social Worker Support Worker, GP, etc.			
I have a medical condition or mental health problem which makes it difficult to manage my finances	Written evidence from Social Worker, Support Worker, GP, etc.			
I have serious difficulties with reading and writing	Written evidence from Support Organisations			
I am dealing with addiction to drugs, alcohol or gambling	Written evidence from Support Organisations GP, Social Services, Hospital, Care Workers, etc.			
I am fleeing domestic violence	Written evidence from Support Organisations Social Services, etc.			
I have recently been released from prison	Written evidence from the Prison or Probation Service			
I have severe debt problems	Court Orders, CCJs, evidence from help groups, Solicitors, creditors, debt advisers, etc.			
I am an undischarged bankrupt	Copy of Court Order			
I am unable to open a bank account	Letters from banks or money advisors			
I have a history of homelessness	Evidence from Support Organisations, Homeless Charity, etc			
None of the problems above apply to me, but	direct payments will be difficult for me because:			
Please use this space to tell us anything else you wou	uld like us to consider:			
If this form has been completed by someone of complete section 12.	other than the tenant, please remember to			
We can pay your Housing Benefit into your bank or k	ouilding society or your landlord's bank account.			
Please pay my Housing Benefit into:				
My account My landlords account				
 if you want your Housing Benefit paid into your account please give your account details below if you want your benefit to be paid to your landlord please give their details below if you have 				

them. However do not delay sending in the form if you do not have your landlord's bank details.

Your details	Your landlords details		
Name of bank or building society	Name of bank or building society		
Name of account holder	Name of account holder		
Branch address	Branch Address		
Postcode	Postcode		
Branch sort code number (this is the	Branch sort code number (this is the		
number at the top of your cheque)	number at the top of your cheque)		
Account number	Account number		
Type of account	Type of account		
Please see the enclosed guidance notes for the building societies and types of accounts we pay into.			
IMPORTANT: Post Office Benefit card accounts currently only accept payments from the Department for Work and Pensions (DWP). If this is the only bank account that you have please contact the benefits service.			
7. SHARING INFORMATION WITH YOUR	R LANDLORD		
Sometimes sharing information with your landlord and reduces the risk of you falling behind with you will only share information with your landlord if you paid directly to your landlord.	ur rent because of your claim being delayed. We		
Under the Data Protection Act we need your perm	ission to share information. If you give us		

permission, we would be able to tell your landlord:

- Whether or not you had claimed Housing Benefit and, if so, whether we have made a decision on your claim or not; and
- If we need more information to make a decision on your claim and, if so, what information this is.

There may be other information about your claim that we need to check with your landlord, such as the date your tenancy started, before we can make a decision on your claim. If this is the case, we have to ask your landlord even if you have not given permission to discuss your claim with them. But unless you have given us permission by signing this form, we will not discuss anything else with your landlord. H&F Direct will not give your landlord any information about your personal or household circumstances; or financial circumstances.

If you do not give us permission to discuss your claim with your landlord, it will not affect your

claim. If you give tact us and let us	us permission but then change your mind know.	I, we will follow your wishes. Just con-
•	ct permission to share my information ith my landlord or representative.	n about the progress of my Housing
Your signature		Date

8. DWP INFORMATION

The Department for Work and Pensions (DWP) collects information for social security benefit purposes. The information we collect depends on the nature of our customer's business with us.

Under the Department's legislation, customers making a claim to an income-related benefit, eg Income Support, Pension Credit, Jobseeker's Allowance, Housing Benefit, are required to give us information on any children or other adults living with them, as this may affect the amount of benefit that is paid to them. This is because other adults (non-dependants) are expected to make a financial contribution towards housing costs, depending on their personal circumstances.

Local Authorities (LAs) administer Housing Benefit/Council Tax Benefit on behalf of the DWP and the law permits the DWP to share information about non-dependants with local authorities for Housing Benefit/Council Tax benefit purposes. Information will be passed to the relevant local authority so that they can calculate the correct amount of Housing Benefit/Council Tax Benefit to pay to our customer.

The DWP customer making the claim for benefit has provided us with the information we hold about you. If you would like to check the information, and if you live in a house that is rented by our customer, please contact your local council. In all other cases, please contact your local DWP office.

We may check that information that we have been given about you, which has been provided by the person making the claim for benefit, with other information, held by us.

We will not disclose information about you to anyone outside DWP unless the law permits us to. The DWP is the Data Controller for the purposes of the Data Protection Act. If you want to know more about what information we have about you, or the way we use your information, you can contact any of the Department's offices and ask for the leaflet GL33. Or you can find a copy of the leaflet on our website: www.dwp.gov.uk.

Please note, you are required to notify both H&F Direct and the DWP of any relevant changes.

9. FURTHER INFORMATION

Use this section to tell us about anything you did not tell us about elsewhere on the form, for example, if you ran out of space. If you know that the details you have given on this form will change in the future, tell us about it here. If you need more room please attach an extra sheet.

Has the rent officer registered your rent as a fair rent? Yes No				
Do you have any rent-free weeks when you don't have to pay rent?			Yes No	
If yes, how many weeks a year do you not have to pay rent?				
We need to know if any service by bill or by meter, or if you p		•	•	
If you answer YES to any of the pay if you know it.	e followir	ng questions, v	we need to k	now how much you
Are any of the following included	in your re	nt?		How much do you pay?
Heating	Yes	No No	Don't know	
If yes , does your landlord provide central heating?	Yes	No		
Lighting	Yes	No L	Don't know	
Hot water	Yes	No	Don't know	
Meals	Yes	No D	Don't know	
Water rates	Yes	No No	Don't know	
Council Tax	Yes	No L	Don't know	
Gas or electricity for cooking	Yes	No No	Don't know	
Personal laundry	Yes	No No	Don't know	
Garage or parking space	Yes	No L	Don't know	
General welfare and counselling	Yes	No L	Don't know	
Other (say what and how much)				
What?				
If meals are included in your rent, tell us about your meal arrangements below. Please tick one box for each part of your family. By full board we mean you get at least three meals a day.				
Full board	l get	My par	tner gets	My children get
Breakfast only	l get	My par	tner gets	My children get
Other meal arrangement	l get	My par	tner gets	My children get

Remember to tell us about any changes straight away. Remember to answer all questions and send in the evidence.

10. EVIDENCE CHECKLIST

see s	e tick to tell H&F Direct what evidence you are providing with this form. H&F Direct must signed original documents, not copies. Please do not send valuable items through the If you can, bring them to our reception. We will take the details we need and give you the ments back straightaway. If you cannot get into the office, phone us for more advice.
-	do not provide all the evidence we need, we might not be able to pay you any benefit. We need ame evidence for your partner, if you have one, and for any other adults living in your home.
send	cannot let us have the evidence we need at the moment, send the form back to us now and the evidence within one calendar month. We can start to process your claim, but we will not ble to pay you any benefit until we have all the evidence.
	Evidence of identity : Passport, National ID card, Any Home Office document that includes your photograph, current photo driving licence, Birth, adoption or marriage certificate, Divorce or annulment papers, National Insurance number card, Medical card with NHS number, Cheque or credit card, Bank statement or building society passbook, A letter from a solicitor or social worker or probation officer confirming how long they have known you, Current benefit book or notification of award with National Insurance number, Form B79 Notification of discharge from prison, Disability Freedom Pass, Valid UK residence permit, Life assurance or insurance policy documents, Tax certificate or a letter from the Inland Revenue
	Evidence of National Insurance number : Such a National Insurance number card, payslips or letters from Social Security or the Tax Office.
	Evidence of private rent and tenancy : Such as a rent book, rent receipts, a tenancy agreement or a letter from your landlord.
	Evidence of household : Child Benefit book, bank statements showing payments of Child Benefit, wageslips, Benefit books or any other income proof for anyone else in your household.
	Evidence of capital, savings and investments : Such as all your bank, building society or post office books, full bank statements, or certificates for premium bonds, National Savings Certificates, ISAs, stocks, shares and unit trusts. We need to see evidence of any interest or dividends you get on investments and savings. We need to see this evidence for children in your household as well. The evidence you send must show details for the last two months.
	Evidence of benefits, allowances or pensions : Such as current award notices or letters from social security confirming how much you get. If you do not have evidence, let us know straightaway. Please do not send order books through the post.
	Evidence of other income : Such as pension slips from a former employer or a letter from the court showing how much maintenance you are getting. We need to see evidence of any money people pay you for board and lodgings.
	Evidence of earnings : This means your last five payslips if you are paid every week, your last three payslips if you are paid every two weeks, or your last two payslips if you are paid every month. We will contact your employer if you do not have these payslips. If you or your partner are self-employed, we need to see your accounts for the last financial year or, if you have been trading for less than six months, a summary of your trading records so far.
	Evidence of money you pay out : Letter from a childminder, nursery or school, grant assessment letter or payment receipts showing payments for a daughter or son who is at university or college.

11. DECLARATION

You must read the following statements carefully and sign and date the form. If you have a partner, they must also sign the declaration.

This is my/our claim for housing benefit/council tax benefit. I/we declare that the information I/we have given on this form is correct and complete to the best of my/our knowledge.

I/we understand that H&F Direct must protect the public funds it handles and so may use the information I/we have given on this form to prevent and detect fraud.

I/we authorise H&F Direct to make any necessary enquiries to verify the information on this form. This includes my/my partner's employers and my/my partner's bank or building society. I/we understand that you may share this information with other organisations that handle public funds.

I/we authorise H&F Direct to cross check the information I/we have given with other sections within the council, rent officer, other councils and benefit authorities.

I/we authorise H&F Direct to make any enquiries that it thinks necessary and to visit me/us to check that the details of my/our claim are correct.

I/we understand that if I/we give information that is incorrect or incomplete or fail to report any changes which might affect my/our benefit I/we may be prosecuted, and that I/we must pay back any money that I/we are not entitled to.

I/we will tell H&F Direct straight away if my/our our claim details change including:

- if I/we stop getting Income Support or Jobseekers Allowance. I/we will do this even if it stops for a short time.
- if I/we go on holiday, leave the country or leave this address permanently or temporarily.
- if I/we take on a temporary or permanent job;
- if me/my partner's income, or the income of anyone else living with me/my partner, changes; or
- if there is any change in the number of people living with me/my partner.

By signing this form I/we are confirming that I/we have read and fully understood the above declaration. If you have a partner, they must also sign and date the form.

Your signature	Date
	Date
Your partner' s signature	Date
Has someone else filled in this form for you? If yes , this person must fill in the next section.	Yes No

LBHF is under a duty to project the public funds it administers and to this end may use the data you have supplied for you Housing/Council Tax Benefit claim and/or Council Tax account for the purpose of the prevention and detection of fraud. We may also share this information with other bodies responsible for auditing or administering public funds for this purpose. For more information, please see our website www.lbhf.gov.uk or email: cafs@lbhf.gov.uk.

If you have any questions or queries about your benefit please visit H&F Direct, contact 0845 803 1020. For email enquiries, please see our website www.lbhf.gov.uk.

12. IF SOMEONE ELSE HAS FILLED IN THIS FORM FOR YOU

You must fill in this section if you have filled in the form for the claimant. I have filled in the form for the claimant. I have read each question to the claimant and written down their answers. I understand that I may be prosecuted if I give information that I know is incorrect or incomplete. Your name Address Postcode Your relationship to the person that you filled in the form for (e.g., partner, brother, landlord, friend, advice worker, appointee)

13. TRANSLATIONS, LARGE PRINT & BRAILLE

The signature of the person who filled in the form

If you would like any part of this document interpreted into your own language, please phone 020 8753 4034

Albanian

Nëse e dëshironi cilëndo pjesë të këtij dokumenti të përkthyer në gjuhën tuaj, ju lutemi telefononi në numrin 020 8753 4034

Amharic

ማንኛውም ክፍል የዚህ ሰነድ ወደ ምታውቀው ቋንቋ እንዲተርጎምልህ ከፌልግህ፡ እባክህ በቴሌፎን ቀኁዋር 020 8753 4034 ደውል።

Arabic

إذا كنت ترغب بالحصول على أي جزء من محتويات هذه الوثيقة بلغتك الأم، يرجى الاتصال برقم الهاتف 4034 4030

Bengal

আপনি যদি আপনার নিজের ভাষাতে এই ডকুমেন্টের কোন অংশের অনুবাদ চান তাহলে দয়া করে 020 8753 4034 নম্বরে ফোন করুন।

Croatian

Ukoliko želite prijevod bilo kojeg dijela ovog dokumenta na jezik kojim Vi govorite, molimo nazovite telefonski broj 020 8753 4034

Farsi

لطفا اگر مایل هستید هر بخشی از این نوشتار به زبان شما ترجمه گردد، با شماره تلفن 4034 8753 020 تماس حاصل فرمایید.

French

Si vous souhaitez quelconque partie de ce document dans votre propre langue, appelez le 020 8753 4034

Polish

Jeśli życzą sobie Państwo, aby dowolna część tego dokumentu została przetłumaczona na Państwa język ojczysty, proszę zadzwonić pod numer 020 8753 4034

Portuguese

Se gostaria de ter qualquer parte deste documento traduzida no seu idioma, por favor telefone para 020 8753 4034

Serbian

Ако желите да било који део овог документа буде преведен на ваш материњи језик, молимо вас да назовете овај број телефона 020 8753 4034

Somali

Date

Haddii aad jeclaan lahayd in qayb walba oo kamid ah dukumintigan lagu turjumay luqaddaada, fadlan soo wac telefoonka 020 8753 4034

Spanish

Si desea que le interpreten alguna parte de este documento en su idioma, por favor llame al 020 8753 4034

Hrdu

اگراس دستاویز کے کسی بھی حصہ کا ترجمہ آپ اپنی زبان میں حاصل کرناچاہتے ہیں تو برائے مهر بانی 020 8753 4034 پر فون کریں۔

If you would like any part of this document produced in large print or braille please telephone 020 8753 4034.

14. EQUAL OPPORTUNITIES - HOUSING FOR ALL

Hammersmith & Fulham is a multi-racial community. We are determined to make sure that everyone has the same opportunities. We need to keep records to check that we are being fair. The questions below help us do this and will not affect the benefit you are entitled to. Completion of this section of the form is voluntary and is not part of your application for a benefit.

Why do we need to know your ethnic origin?

People who come to H&F Direct for help and services are sometimes worried that they are being treated unfairly because of their ethnic origin. By giving us information on your ethnic origin, you will help us to deal with people's worries properly. We also need to know whether we are treating everybody fairly because otherwise we may be breaking the law.

What will we do with the information?

H&F Direct will collect everyone's information together so we can see whether all the ethnic groups in the community are getting a fair service. We will not:

- pass on the information to anyone else
- do anything that identifies you or your ethnic origin to anyone outside the housing services department; or
- use the information to make a decision about your application.

We may use the information to tell you about other benefits that you could receive.

If you have difficulty completing this form (other than language) please contact H&F Direct.

15. ETHNIC MONITORING
I would describe myself as: (Please tick one box only or write in)
A. White
British
Any other white background (please write in)
B. Mixed
White and black Caribbean White and black African White and Asian
Any other mixed background (please write in)
C. Asian or Asian British
Indian Pakistani Bangladeshi
Any other Asian background (please write in)
D. Black or black British
Caribbean African
Any other black background (please write in)
E. Chinese or other ethnic group
Chinese Other (please write in)
What is your main language?

Please return this form to: London Borough of Hammersmith & Fulham, H&F Direct, 1st Floor, Town Hall Extension, King Street, Hammersmith, London W6 9JU Council tenants can return this form to their local area housing office

