Victoria Forms

Benefits Forms Catalogue



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Introduction—About Us

Established in 2003, Victoria Forms is a leading provider of intelligent, web-based electronic forms software and workflow solutions. Our eForms solutions can be used within an organisation or made available to external users, applicants or claimants via the Cloud or server-based infrastructure. Our software is currently being used with **over 75 Local Authorities in the United Kingdom**.

Standard Benefits Form Library

Our standard Victoria Forms Benefits Form Library is continuously growing. This catalogue showcases our current **36 standard benefits** forms in our standard benefits forms library.

Standard Form Pages

All of our eForms contain a Status and System Page (front and back pages).

Someone who is completing a form will always see the Status Page as the first page. The Status Page has one main function, to draw information from a database about the Local Authority for which the form is being completed. This page displays any relevant information as decided by the Local Authority; such as opening hours, contact details and how to complete the online form. This information is which can be set within our 'branding' files, and is fully customisable for anything that the local authority wishes to add to the start page of their forms.

The System Page will never be seen by anyone completing the form or by anyone at the Local Authority; this page simply acts as our control page to set the intelligence within the form.

Back Office Integration

In administering forms, data collected is often manually keyed into a back-office system. With Electronic forms, the wastefulness of having to key information twice is being addressed – back-office systems are increasingly opening up to receive data electronically. Some of our Benefits Forms (Change of Circumstances and the Main Claim form) are already set up for back office integration straight into Capita, Civica and Northgate.



Accommodation Details

Application to inform the Local Authority about an individual's accommodation details. Includes: where they are living and how much they are paying to live there.

Accomodat	ion Details Form
HIS SECTION MUST BE COMPLETED BY ALL HOUSING NSWERED.	BENEFIT CLAIMANTS. ALL QUESTIONS MUST BE
all details are not provided your claim will be delayed	
Benefit Claim No.	
Prop Ref No.	
Surname:	
Other Names	
Address	
Postcode	
Telephone number	
Email Address	
How much rent are you charging for the property?	
How often?	
Date tenancy began	
Date moved in	
Date tenancy due to end	
If this has changed in the last 12 months, please enclo	se proof of rent, e.g. your lease.
you wish payments to be made direct to your lanlord	
No	
Yes	
as your rent been registered with the Rent Office?	
Yes	
re you or anyone who lives with you related to your la No	nlord?

This form is comprised of sections on:

- The person completing the form
- Rent paid
- In depth details of the property they are living in, including how many rooms and floors etc.
- How the applicant would like their benefit paid
- Declaration

Length: 4 pages

Declaration: Signature

Some Local Authorities using this form: Wigan, Basildon, Scarborough

Additional Bedroom Overnight Carer

Application for an increase in Housing Benefit where a property has a room for a carer to sleep in when they are providing overnight care to someone in the property.

This form is comprised of sections on:

- The person completing the form
- The person receiving overnight care
- Benefits received
- Is the bedroom just for carer?
- Carer Details including start date and time spent
- Extra Information Section
- Declaration

Length: 2 pages

Declaration: Signature

Page 2 - Additional Bedroom for Overnight Carer		
Please Note: This applies to Private Tenants, Council Tenants and Housing Association Tenants		
Title		
Surname		
Other Name(s)		
In Respect of (Address)		
Postcode		
Claim Reference		
1. Please give the name of the person requiring and receiving	g overnight care:	
Surname		
Other Name(s)		
Please Note: The additional bedroom provision can only apply whe requiring or receiving overnight care.	ere the Housing Benefit claimant or their partner is the person	
2. Please confirm that the person named above is in receipt	of the relevant Benefit by ticking the box:	
Disability Living Allowance (Care Component) at the High or		
Middle Rate (not Low Rate) Attendance Allowance		
Please confirm, by ticking the box, that there is a bedroom specifically set aside for the use of an overnight carer and that the bedroom is not used by anyone else:		
Confirm		
Please give the name of the overnight carer, or carers, or the name of the Agency that provides the overnight carers, and their address. We also require written confirmation from the care provider outlining the care provided.		
Surname		
Other Name(s) Address	Victoria	
Address	TIGULIA	
	Lorme	

Appeals / Scottish Appeals

Use these forms to submit an appeal against a Housing Benefit or Council Tax Reduction (formerly Council Tax Benefit) decision.

What would you like us to do? Please tick <u>one</u> of the following Send you a statement of reasons		
We will send you a full written explanation of our decision within 1 calendar month	h.	
Look at your claim again We will look at your claim again and revise our decision if we think it is wrong. We will aim to do this within 1 calendar month.		
Refer your case to the Tribunals Service We will look at your claim again and if we cannot change it, we will forward your p Service. If this is the case, we need a handwritten signature from you. You will nee return it by post. If you do not have access to a printer we will issue you with a cop HM Courts and Tribunal Service is an agency of the Ministry of Justice and is whol take several weeks for your case to be heard.	ed to print this form and sign it and by of the form to sign.	
These forms are comprised of sections on:	Length: Both forms are 3 pages in	
What is being appealed against? (Housing Benefit	length	
or Council Tax Reduction or Both)	Declaration: Checkbox	
Date of decision appealing against	Some Local Authorities using this form:	
Action the Council should take	St Albans, Tower Hamlets, ARP, Basildon,	
The person completing the form	SRP, Harrogate, Medway, Scarborough,	
If the applicant is being helped to make the appeal	Wigan	
A large amount of space to say why the applicant thinks the decision is wrong		
Declaration		
Extra Information Page		
About the Decision		
Please state which decision you are Housing Benefit Counc	cil Tax Reduction 🔲 Both	
Date of the letter about the decision		
Year Democration and		
Your Request/Appeal ■ Use this space to say why you do not agree with the HB/CTR Ref No:		
decision.	Rel No.	
You must say why you think the decision is wrong.		
	Victoria Forms	
	Forms	

Authority to Disclose

Authority to Disclose Form used to provide personal details held third parties to the Council.

This form is comprised of sections on:

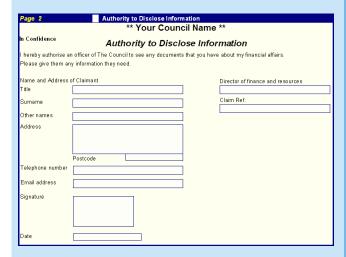
- The person completing the form
- Declaration

Length: 1 page

Declaration: Signature

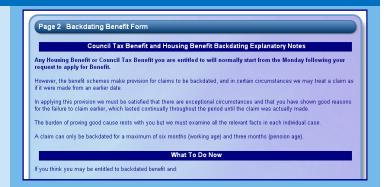
Some Local Authorities using this form:

Fareham, Scarborough



Backdating

Housing Benefit and/or Council Tax Reduction is normally awarded from the Monday after the day you made your claim. However, sometimes councils can pay from an earlier date. There must be a 'good' reason why the claimant has not claimed sooner, and a maximum of 6 months can be backdated.



This form is comprised of sections on:

- Explanatory Notes
- Details of person completing the form
- Reason why they want it backdated
- Declaration

Page 3 Backdating Benefit Form		
Backdating Council Tax Benefit and Housing Benefit Form		
If you wish to apply for backdated benefit, please use this	form.	
You MUST apply in within six weeks of the date of the ben		
Surname		
Other Names Title		
Address		
Postcode		
National Insurance Number		
Telephone Number		
Email address		
I wish to apply for my Housing Benefit/Council Tax Benefit to be backdated to (Date)		
The reason for this is as follows		
The reason for this is as follows		

Length: 2 pages

Declaration: Signature or Checkbox

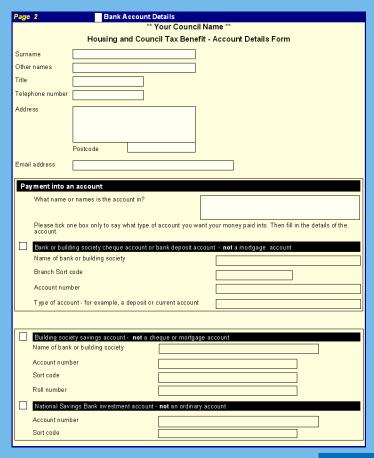
Some Local Authorities using this form: ARP,

Wigan, SRP, Luton, Tower Hamlets, Scarborough, St Albans, Wycombe



Bank Account Details

This form allows users to complete their bank account details for any Housing Benefit they may be entitled to.



This form is comprised of sections on:

- The person completing the form
- Name account is in
- Details of either;
 - Bank or Building Society Account
 - Building Society Account
 - National Savings Bank
- Declaration

Length: 1 Page

Declaration: Signature or Checkbox

Some Local Authorities using this from: ARP, SRP, Wyre Forest, Scarborough, Wycombe

Page 2		
Certificate of Benefits		
Select as appropriate: I am the :		
Claiment		
Partner	H	
Non-dependant		
Surname		
Other names		
Title		
Address		
Postcode		
Telephone		
Email		
Benefit Claim Number		
National Insurance Number		
Date of Birth		
Today's date		
l agree that you can ask about the benefits I get from the Department for Work and Pensions or the Employment		
Services Note to the Department for Work and Pensions or Job centre Plus Office Will you please help this person by filling in the information below and returning it to the relevant office		
Type of Benefit:		
Jobseekers Allowance (C.B.) Yes/No		
Income Support (JSA/IB) Yes/No		
State Retirement Pension Yes/No		
Pension Credit/Guarentee Credit Yes/No		
Savings Credit Yes/No		

Certificate of Benefits

This form is a complete record of the benefits received by an individual completing the form, and how often they receive each of the benefits.

This form is comprised of sections on:

- The person completing the form
- Declaration
- Details of benefits received, date they started and date they will end, and weekly amount received.
- Declaration

Length: 1 Page

Declaration: Signature or Checkbox

Some Local Authorities using this from:

Scarborough



Certificate of Earnings

If a claimant is unable to provide their payslips they can ask their employer to complete a Certificate of Earnings.

Page 2		
Housing and Council Tax Benefit - Certificate of Earnings		
Private and Confidential		
Use this form if you, your partner, or any other adult who live Please return the completed form to:	es with you cannot provide payslips for their work.	
To be filled in by the employee Title		
Surname		
Other names		
Address		
Postcode		
Email address		
Telephone number		
Employee or works number		
National Insurance number		
Claim Reference if known		
Your job		

This form is comprised of sections on:

- Employee Details
- Pay Details (completed by their employer)

Length: 1 page

Declaration: Signature (completed by

employer)

Some Local Authorities using this from:

ARP, Fareham, St Albans Scarborough, Medway

Change of Address

This form is to be completed if someone has or is moving house, within, into or out of the district to let the Council know as soon as possible. We have **two** versions of this form. They have the same content but one is in landscape view.

These forms are comprised of sections on:

- Applicant/Applicant's partner old/new address details
- Other occupants
- Location details
- About rent
- Change in circumstances details
- Backdating benefit
- Declaration
- Evidence checklist
- How payments are made
- Bank details
- Landlord payment agreement (print and sign)
- End of form page (Checkbox only)

Length: 12 pages

Declaration: Checkbox

Page 4 - Main Form About where you live -	contd.
Mich floor/s do you live on? Please tick the bowboxes that apply to you)	Attic Third Floor Second Floor First Floor Ground Floor Basement
low many rooms are there in your property?	In the whole Just for you and That you share building your household with other people
Living rooms	building your nodes not will other people
Bedsitting rooms	
Bedrooms	
Bathrooms or shower rooms	
Toilets	
Kitchens	
Other rooms	
Do you use your home for business?	No Yes
Do you have a main home somewhere else? fyour main home is somewhere else in the UK or abroad, select the Yes' option, even if you do not payrent for it.	No Yes Tell us about it below. What is the address?
Do you pay rent on your main home?	Postcode

Some Local Authorities using these forms: ARP, Medway, SVP, Waveney, Ashford, SRP, Basildon, Castle Point, Scarborough, Wandsworth,

Fareham, St Helens, Fife, Luton, St Albans, Welwyn Hartfield



Change in Circumstances Form to allow Council Tax Reduction/Housing Benefit claimants to notify Local Authorities of any change to their circumstances.

Length: 1 page

Declaration: Signature

We have three versions of a Change in Circumstances form.

1. Short Change in Circumstances

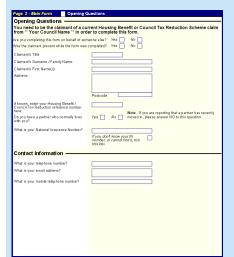
This form is comprised of sections on:

- Details of person completing the form
- Checkbox for the change in circumstance
- Large information box for what

has changed

Declaration

** Your C	ouncil Name **		
CHANGE OF CIRCUMSTANCES FORM			
Title	Address		
Surname			
First names			
Housing Benefit Reference	Postcode Your daytime phone number		
National Insurance No.:	Tour payone professiones		
Email address			
Important Information The last even a rough of this form as you must let us know immediately if your circumstances change or if the circumstances any other member of your hausehold change while you are getting benefit. These changes might include the following. Please tick the approviate boxes to the use about any changes in your circumstances.			
A child has left school or I no longer get Child Benefit fo			
You have had another child.	Someone you look after has stopped getting Attendan Allowance.		
Anyone has moved into or out of your home (include lodgers and subtenants).	Your rent has changed.		
Your income, or the income of anyone living with you, has changed. This includes changes to benefits and taccredits.	You have moved. You or anyone living with you are going to be away fro home for more than a mouth.		
Your savings or investments have changed.	You or anyone living with you has started work.		
You, or anyone living with you, have become a student started a youth training scheme, gone into hospital or a			
nursing home, gone into or come out of prison, or have got, changed or left a job.	Change in bank details		
You, or someone living with you, have started or stopped getting any state benefit.	Anything you have told us about has changed. Please give more details in the box below.		
This is not a full list an please ask us fire advice if you are not sure. You must bell us about any changes in writing on it form - a phone calls in ent enough. Do not rely on someone else to pass the message on. If you do not tell us about a changes, you may less money you are entitled to or we may pay you too much benefit. It is an offence not to tell us about a changes, you may less money you are entitled to or we may pay you too much benefit. It is an offence not to tell us about a change of the proof			
Please tell us whose circumstances have changed.	Please tell us when they changed.		
	Please tell us when they changed.		
Please tell us what has changed.			



Length: 5 pages

Declaration:

Signature or Checkbox

2. Regular Change in Circumstances

This form is comprised of sections on:

- Guidance Notes
- Checkbox for the change in circumstance
- Details of person completing the form
- Changes
- Declaration

3. Advanced Change in Circumstances

This form is comprised of sections on:

- Checkbox for the change in circumstance
- In depth sections to complete details on all possible changes
- Additional Forms
- Summary of answers given
- Checklist of evidence
- Declaration

Length: 37 pages **Declaration:** Checkbox

What change in circumstances do you need to tell us about? (You may tick MORE THAN ONE of these options if you have more than one change in circumstance to report)		
You are changing address		
A partner has moved in or moved out of the household (including the death of a partner)		
A child / children have moved in or moved out of the household (including the birth of a new baby and death of a child)		
An adult / adults (other than a partner) have moved in or moved out of the household (mobile) the death of an adult)		
Am ember of the household will be temporarily absent from the property (for example: a stay in hospital, residential care or prison)		
Your income has changed		
Your partner's income has changed		
The income of someone else in the household has changed		
Your capital (savings / in vestments) has changed		
Your partner's capital (savings / investments) has changed		
There has been a change to your rent or landlord at your current address		
You would like your payments to be made to a new/different bank account.		
You have become a student		
Your partner has become a student		
Other / none of the above options		

Some Local Authorities using these forms:

ARP, Medway, SVP, Waveney, Ashford, SRP, Basildon



Change of Tenant

Between tenants, the owner is liable for Council Tax and it is the owner, landlord or letting agents' responsibility to notify the Local Authority of any change in tenancy within 21 days.

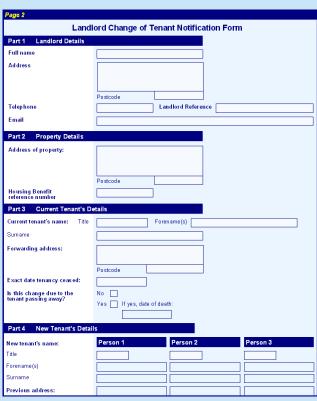
This form is comprised of sections on:

- Details of the Landlord
- Details of the property
- Details of the Current Tenants
- Details of the New Tenants
- Details of the New Owners
- Declaration
- Extra Page Length: 4 pages

Declaration: Signature

Some Local Authorities using this form: St

Albans, Inverclyde, Scarborough



Housing and Council Tax Benefit Confirmation o	
ill in the top part of this form and give it to your Childea Surname or family name	ne Frovider to mi in the remainder
Other names	
Title	
Address, including room number if you have one.	
Postcode	
Your email address	
Your daytime phone number	
Date	
Claim Number	
How many children? Name of Child/Children	
Business name Business address	
Postcode	
Registration number	
Phone number	
confirm the information given is true and complete Name	
Tunio .	

Confirmation of Childcare

Form for applicants or their partners who work full -time and pay child-minding costs to a registered child-minder, a registered nursery or play-scheme, or an after-school club.

This form is comprised of sections on:

- The person completing the form
- Declaration
- Child-minding dates/hours and charges filled in by the Child-minder
- Business Address
- Child-minders declaration

Length: 1 page

Declaration: Signature (Parents and Child-minder)

Some Local Authorities

using this form: ARP, SRP,

Scarborough, St Albans



Discretionary Housing Payment

A Discretionary Housing Payment (DHP) could help top-up housing benefits if applicants are facing hardship, including if they have been affected by housing benefit changes.

This form is comprised of sections on:

- 2 Pages of Guidance Notes
- The person completing the form
- Details of circumstances
- The household income, expenditure, debts / arrears, repayment of debts, capital
- Extra Page
- Declaration
- Form Completion Page

Page 4 - Main Form Discretionary Housing Payment Application Fo

Length: 12 pages

Declaration: Signature or Checkbox

ı		
ı	About You	
	Title	
	Surname or Family name	
	Other Names	
	Benefit Claim Number/ Ref	
	Address, inlouding room number if you have one	
	Postcode	
	Email Address	
	Telephone Number	
	Mobile Number	
ı	Have you been told that your Housing Benefit Award has been, or will b	e reduced for any of the following reasons:
	Your landlord is the council or a housing association and you have been told that you are over-accommodated (this is often referred to as a bedroom tax)	
	You have been affected by the changes to the Local Housing Allowance Provisions (If you are unsure the Housing Benefity service will be able to give you more information.)	
	You have been told that your Housing Benefit will be reduced because the total amount of state benefits you are recovering is too high. (This is known as the overall benefit	
	cap). None of the above apply to me.	

Discretionary Housing Payment and Exceptional Hardship Payment

This form allows claimants to apply for DHP and EHP at the same time.

Page 7 - Main form Discretion	nary Housing / Exceptional	Hardship Payment Application Form
Use our calculator to convert amo	unts to weekly and monthly	values for household income:
Amount	Frequency	Weekly amount Monthly amount
Your and	equals	
Do you have a partner who lives with you?	No 🔲	
	Yes	
Household Income	You	Your Partner
	Weekly Monthly	Weekly Monthly
Wages / Salary - Gross		
Wages / Salary - Net		
Income Support or Jobseeker's Allowance		
Statutory Sick / Maternity Pay / Company Sick Pay		

This form is comprised of sections on:

- 2 Pages of Guidance Notes
- Details of person completing the form
- Details of circumstances
- Details of household income, expenditure, debts / arrears, repayment of debts, capital
- Extra Information Page
- Declaration
- Form Completion Page

Length: 12 pages

Declaration: Signature or Checkbox

Some Local Authorities using these forms:

Brentwood

With requested amount

This form includes a section allowing claimants to input a requested amount to claim.

1. How much would you like to claim?

Some Local Authorities using these forms: ARP, Ashford, SRP, Basildon, Medway, Fife, Southwark, Reigate and Banstead, St Helens, Tower Hamlets



Direct Payment to Landlord

Page 2	Paying benefit to your landlord form				
	** Your Council Name **				
	Direct Payment to Landlord Form				
	If you want us to pay your benefit straight to your landlord, you must sign this declaration.				
Your declaration					
Please pay my Housing Bene	etit straight to my landlord. Iways tell you about, any change in my circumstances.				
	ot tell you about any change in my circumstances and you pay me too much benefit because of ik the extra benefit.				
	e prosecuted if I do not tell you about any change in my circumstances.				
Address					
	Postcode				
Surname					
Other names					
Title					
Telephone number					
· ·					
Email address					
Signature	Date				
Your landlord's declaration					
Surname					
Other names					
Company Name (if applicable)					
Address					
Address					
	Postcode				

Where Local Housing Allowance Scheme payments are normally made to the tenant, in certain circumstances Local Housing Allowance can be paid directly to the Landlord.

This form is comprised of sections on:

- The person completing the form
- Declaration
- The Landlords Details
- Landlords Declaration

Length: 1 page

Declaration: Signature or Checkbox

Some Local Authorities using this form:

Scarborough, St Helens, St Albans

Declaration

A Declaration that needs to be printed and signed by the claimant and the person completing the form (if different)

Financial Information Form

This form can be used to submit income and expenditure details to the council for the purpose of making an offer for payment.

This form is comprised of sections on:

- The person completing the form
- Employment Details
- Details of Partner
- Partners Employment Details
- Any other income, assets debts, expenses, loans/credit cards
- Declaration

Length: 3 pages

Declaration: Signature

Some Local Authorities using this form:

Medway

Financial Information Form	
- mandar-information rottin	
u are required to complete rhis form to enable	a full assessment of your means. the income information required on this form
Personal Details	the income miormation required on this form
Sumame	
Firstname	
Title	
Address	
nuuress	
Postcode	
Date of birth	
Daytijme telephone number	
Home telephone number	
National Insurence Number	
Number of dependant children	
Please Specify their age(s)	
e you: Employed	
Self Employed	
Jnemployed	
Partners Details	
Sumame	
First Name	
Fitle	
Address	
Postcode	Victoria
No. of the last	

Habitual Residence Test

Page 2 Your Details			
Habitual Residenc	e Test Questionaire		
Title			
Surname			
Other name			
Address			
Postcode Date:			
Date:			
Telephone no			
Email address			
Lilian address			
About your claim and the Habitual Residence Test			
You told us on your claim form that you have come to the United information to decide if you are habitually resident in the UK.	Kingdom (UK) within the last 2 years. We need some more		
When deciding if you are habitually resident, we look at things like	re:		
Why you have come to the UK How long have you been here How long you intend to stay here Whether or not you have any links here.			
If you have previously lived in the UK we also look at why you left to decide if you are habitually resident.	. The answers you give to the questions in this form will help us		
If you need help with this form If you need help with this form please get in touch with us.			
What to do next When you have filled in the form completely, press SUBMIT to send the form to us electronically			
What happens next When we receive the form we will use it to make a decision. If we need any more information we will get in touch with you.			
Part 1 EVERYONE MUST COMPLETE THIS PART			
What is your nationality?			
You are required to provide evidence to support this, i.e. passnort	hirth certificate, certificate from the Home Office confirming the		

This form can be used to gather more information about benefits claimants who have only been living in the UK for 2 years.

This form is comprised of sections on:

- The person completing the form
- The move to UK
- Details about whether they have been to UK before
- Why the UK?
- Family and Move details
- Extra Information Space
- Declaration

Length: 5 pages

Declaration: Signature

Some Local Authorities using this form: SRP,

Basildon, Luton, Scarborough, St Albans

Non-Dependants Rent and Tenancy

This form allows non-dependants to inform their Local Authority of where they are living and how much they are paying.

This form is comprised of sections on:

- The property the claimant lives in
- Details of rent
- Details about their landlord
- How they want to receive any benefits (if awarded)
- Extra Information Page
- Declaration
- Sharing Information with Landlord form
- Direct Payment to Landlord form

Length: 11 pages

Declaration:
Signature, signed by both

landlord.

Some Local
Authorities

using this

claimant

and

form:

St Albans

About where you live						
Do you own your home or have a mortgage? Are you a council tenant?	No Go to the Yes Answer th Yes		uestion. stions below.			
What sort of building do you live in? Choose one box only	Detached house		Flat in a house		Caravan, mobile home	
	Semi-detached house	Ш	Flat in a block	ш	Houseboat	L
	Terraced house		Flat over a shop		Board and lodgings	
	Maisonette		Bedsit or rooms		Hotel	
	Detached bungalow		Studio flat		Residential nursing home	
	Semi-detached bungalow		Hostel		Residential care home	
			Other - give details			
Does your home have central heating?	No					
Does your home have a garden?	No					
Does your home have a garage?	No C					
Does your home have a parking space?	No					
Has your home been built or adapted for people with disabilities?	No D Yes D					
How many floors are there?						
Do you and your household occupy only part of the building you have ticked?	No Yes Where in		uilding do you live?		At the back	

	Declaration			
When the fo	rm data has been submitted to us, please print this page.			
Name of applicant				
Address for which claim	Type of occupancy			
is being made				
	Our Submission Reference:			
	Postcode			
Even if someone has filled in this for you, you must sign this declaration if you can. If you have a partner, it would				
be helpful if they sign below to confirm that all the details about them are correct, but they do not have to sign. Please read this declaration carefully before you sign and date it.				
	may use any information I have I declare that the information I have correct and complet			

Overlap Request

This form can be used in circumstances where someone has moved into a new home, but still has to pay rent for their old property due to the landlord's notice period. Claimants can apply for Housing Benefit on both properties. Housing Benefit can be paid to cover a maximum four week notice period at the old property even if their dual liability exceeds that period.

Page 2	Section 1 - About you
	** Your Council Name **
Overl	ap Request - Payment for Rent on Two Properties
Surname	Benefit reference number, if known
First Name	
	Tenancy start date
Title	Rent started from (give date)
Address	
	Date moved to this address
	Posteodo Date the new tenancy was
T. I I	Postcode Date the new tenancy was offered and accepted
Telephone number	
What is your email address:	
Section 2 - About previo	ous property
Previous property address	
D. d	Postcode
Date moved out of property	landlord to terminate the tenancy
Tenancy end date	What was the contractual notice on this property?
Have all of your personal belongings and other family	No If not, please provide details below:
members moved to the new	Yes
address	
You must provide as much i	information as possible when answering the following question and proof must be
provided of the rent you have	ze paid
I could not avoid having to p	pay rent for two properties because:
	ow me Housing Benefit to cover both rents during the overlapping period.
Claimants Date Confirmation	

This form is comprised of sections on:

- The person completing form
- Address of the new property
- Address of the old property
- Dates the property was left and when tenancy ends
- Details of why they couldn't avoid paying rent
- Declaration

Length: 1 page

Declaration: Signature or Checkbox

Some Local Authorities using this form: SRP,

Scarborough, St Albans

LHA to Landlord

Local Housing Allowance is normally payable to the tenant, in special circumstances it can be paid directly to the Landlord. This form allows Councils to decide whether this is possible under an individual's circumstances.

This form is comprised of sections on:

- The person completing the form
- About their circumstances
- Extra Information Space
- Declaration
- Landlord's Declaration

Length: 6 pages

Declaration: Signature or Checkbox

Some Local Authorities using this form: Flintshire,

St Helens Scarborough, Wigan

Page 3 - About Tenant	
rage 3 - About Tenant	
PPLICATION FOR PAYMENT OF LOCAL HOUSING ALLO yout Tenant Title of the tenant	WANCE DIRECT TO YOUR LANDLORD
enant's Surname	
Fenant's other names	
Housing Benefit reference	
「enant's address	
Postcode	
Felephone number	
this form completed by someone other than the tenant? No	
Yes	
stalls about the tenant's circumstances fills us about any learning difficulties that may cause you roblems in paying your rent. Fell us about any medical conditions or disabilities that may ause you difficulties in pay your rent.	
Fell us about any mental health problems that may cause rou difficulties in paying your rent.	
Are you dealing with an addiction to drugs, alcohol or gambling? If yes please give details.	
	Victori

Pensioners

A short claim form for people already claiming pensioners credit.

This form is comprised of sections on:

- 1 page of guidance notes
- Personal Details
- Partner's Details
- Extra Information Page
- Declaration
- Evidence Checklist
- 2 pages of Evidence Details

Length: 9 pages

Declaration: Signature

Some Local Authorities using this form: ARP,

SRP, Scarborough, Wyre Forest

I	age 3 - Main Form	About you and your partner
Ī		** Your Council Name **
L	Housing Ben	efit and Council Tax Benefit for pensioners form
ŀ	his form can also be used for	claiming Second Adult Rebate
r	Are you just claiming Second	
l		Yes _
l	Do you have a partner who no	Yes Tif 'yes', you must answer all the questions about
Ŀ		them, as well as yourself.
г	Part 1 About you and	our partner
	Claim Reference number jf known)	
		You Your partner
1	Surname or family name	
ŀ	Other names	
	Any other names you have used	
ŀ	Title	
	Address, including room number if you have one	
l	Do not tell us your partner's address if it is the same as	
	yours.	Postcode Postcode
b	What date did you move to his address?	
ľ	nis address?	Enter dates directly by entering numbers separated by '/' or use the calendar menu.
ŀ	Your daytime phone number	
ŀ	What is this number?	Home Work Home Work
ı		Mobile Textphone Mobile Textphone
ľ	Date of birth	
ľ	National Insurance (NI) 😑	
ĺ	You can find this on letters from social security or the tax office. We cannot normally decide your claim if we do not have your NI number.	If you do not have an NI number, or cannot find it, tick this box.
	Your email address	

Pre-Tenancy Determination

Page 3 - Main Form Ap	pplication for a Pre-Ter	nancy Determination	
Please answer all the questions and give as much information as you can. You will need to ask the landlord or property agent to provide some of the information and to sign the form.			
number of the property you wan	ding any flat or room it a Pre-Tenancy	How often will you pay this amount? - every	
1. Please give the address including any flat or room number of the property you want a Pre-Tenancy Determination for. Postcode 2. Type of property detached house		iv) Is the accommodation furnished? Yes No If yes is it fully furnished? Partly furnished? If yes is it fully furnished? Partly furnished? No If yes is it fully furnished? Partly furnished? No If yes is it fully furnished? No If yes is it fully furnished? No If yes it fully furnished? No If yes it fully furnished? No If yes it fully furnished? Yes No If yes included within your rent? If YES please growed etails. Yes No If yes it fully furnished? Yes No If yes it fully furnished? No If yes it fully furnished? Yes If yes it fully fully furnished? Yes No If yes it fully furnished? Yes If yes it fully furnished? Yes If yes it fully furnished? Yes If yes it fully	
How many rooms do you have?	kitchen toilet Other	Please give your details Surname	
Sole use shared with others	WC	Other names Title Address	
Is there a central heating system? Is a garage included?	Yes No Yes No	Postcode	
Who is the landlord of the property Surname	?	Tel number Email address	
Firstname			
Address		Are you getting Housing Benefit Yes No at the moment? Please give your date of birth:	

Private tenants can find out the maximum possible housing benefit they can receive before signing a tenancy agreement. This means that they can avoid renting an expensive home where housing benefit will not meet all of the rent. Pre-Tenancy determination forms are completed by both the landlord and the tenant.

This form is comprised of sections on;

- 1 page of guidance notes
- Property Details
- Details of person completing the form
- Tenant Details
- Landlord Declaration
- Declaration

Length: 3 pages

Declaration: Signature

Some Local Authorities using this form:

Fareham, Medway, Scarborough, St Albans



Proof of Rent

If an applicant lives in a privately rented or Housing Association property the landlord/lady must complete this form as proof of rent costs, and they themselves must sign the declaration.

Page 2 Proof of tenancy & residency					
		Landlords Certi	ficate	Private and Confidential	
TO BE COMPLETED BY YOUR LANDLORD/LANDLADY OR THEIR AGENT Your tenant has asked you to complete this form					
Are you the la	ndlord or agent?	Landlord Agent	because they w	vant you to confirm how much rent se help your tenant by completing it.	
		urs and the Landlord's full name an	d address.	to note you terrain by completing a	
	dlord	Agent			
Surname]	
Forename]	
Address]	
D.,	tcode			ļ	
	tcode	Postcode		J	
Tel No.]	
Email					
Full name and	address of the tenant	you are completing this certif	icate for		
Surname		Please check this	with your tenant. Their	claim may be delayed if you	
Forename		do not supply this			
Title		When did the tena	*		
Address		When did the tena			
		When was the last How often do you			
		What is the total re	int you charge?		
Post	tcode	How is it paid?			
Does the rent is	nclude meals?	No Yes If Yes, plea	se tick below which me	eals are included:	
		full board	breakfast	lunch evening meal	
Are you related	to the tenant?	No Yes If so, how?			
Is this a joint te	nancy?	No Yes If yes, pleas tenants nam	e give nes.		
What is the da	te of the original tenanc	agreement?			
		ur tenant's rent? state how much	(if known)		
Cleaning/lighting shared areas	ng of No Yes	Porte	r 1	lo Yes	
Council Tax	No Yes	Satell	lite dish N	lo Yes	
Fuel for cooking	a (not No Yes	Coun	selling and support	No Yes	
just gas and el Water rates	ectricity) No Yes	servic Gara	es .	No Yes	
Heating	No Yes	Ward syste	len or alarm	lo Yes	
Hotwater	No Yes	Clear	ning N	lo Yes	
Electricity for I	ights No Yes	Wash	ning (eg bed linen)	No Yes	
Gas or electric	ity for No Yes	Any o	other services	No Yes	
cooking		eg. p	ersonal care or nursing	. (Please give details below)	
Declaration					
	I confirm that all the information I have given above is correct. I understand that if I give false information or fail to report a change in circumstances I may be prosecuted.				
Landlord's or A Signature	Landlord's or Agents Signature Please return the ** Your Council Address ** completed form to: ** Your Council Address ** Your Council Address **				
		Date			

This form is comprised of sections on:

- Landlord Details
- Agents Details (where applicable)
- Tenancy information and Tenant's Details
- Declaration

Length: 1 Page

Declaration: Signature

Some Local Authorities using this form: ARP, SRP,

Scarborough, Waltham Forest

Preliminary

Initial form to note down very basic details of a claimant who will later be called back, to complete a further, more in depth application.

This form is comprised of sections on:

- The claimant's details
- The partner's details (if applicable)
- At least one phone number so a call-back can take place
- Whether they have any savings over £16,000
- Call back arrangements / Notes section

Length: 1 Page

Declaration: Signature

Some Local Authorities using this form:

Wigan, Waltham Forest, Tower Hamlets, Dudley, Medway

Preliminary Form - Customer Details

Does the customer have a partner?
No
Yes

Claimant
Surname of family name
First Names
Any other names

Title
Address

Postcode

Telephone Number - You must provide us with at least one number otherwise we can not call you

Work number
Mobile number
Date of birth
Do you have savings and investments of more than £16,000?
Callback arrangements / Case notes

Return to Work

If an applicant already claims Housing Benefit or Council Tax Benefit, they should use this form to tell the council if they stop claiming Income Support, Job Seeker's Allowance Income - Based or Guaranteed Pension Credits because they are returning to work.

Page 3 About You	
CHANGE IN CIRCUMSTANCE	ES / RETURN TO WORK FORM
PLEASE SUPPLY ORIGINAL DOCUMENTATION TO SUPPO	RT ALL REPORTED CHANGES TO YOUR CIRCUMSTANCES
First name:	THE REPORTED SHAMES TO TOOK SHOOMS THISES
Surname	
Address	
Postcode	
National insurance number	
Telephone number	
Your email address	
Do You have a partner No	
Yes	
Please Tick the appropriate box Own your home or pay a mortgage	
Pay rent to a Housing Association	
Pay rent to the council	
Pay rent to a private lanlord	
Other	
Section 2 - About people who live in your property	
Is there anyone else living with you?	
No	
Yes	

This form is comprised of sections on:

- **Data Protection Page**
- **Applicant Details**
- People who also live in the property
- Applicant's Work
- Partner's Work (if applicable)
- Other money coming in
- Bank accounts and savings
- Known future changes
- Extra Information Page

Declaration

Length: 8 Pages

Declaration: Checkbox

Some Local Authorities using this form:

Ashford, SRP, Basildon, Scarborough

Review

This form can be used to review a claimant's circumstances. It allows Local Authorities to minimise the risk of fraud and error in the benefits system by reviewing their current caseload of claims to ensure everyone is getting the correct amount of benefits.

This form is comprised of sections on:

- Help Information
- **Applicant Details**
- Partner's Details
- Other occupants
- Other income
- Savings and investments
- Changes
- Declaration
- **Employment Details**

Length: 6

Pages

Declaration:

Checkbox

Some Local **Authorities**

using this

orm: SRP,
Censington
ind Chelsea, St
Albans, East
lampshire,
Wyre Forest

Page 3 - Main Form Pa	rt 1 About you and your partner / Part 2
Housing	Benefit and Council Tax Reduction Review Form
Part 1 About you and your	partner
Have you got a partner who norm A partner means a person you are with, or a person you live with as if partner.	mally lives with you? No married to or have a civil partnership you were their husband, wife or civil
Benefit Claim Reference	
	You Your Partner
Surname	
Other names	
Title	
Address	
	Postcode Postcode
Phone number	
National Insurance (NI) number	
Your email address	
Part 2 About rent and serv	ices
Which of the following apply? Please select the appropriate	You own your home or pay a mortgage?
box or boxes.	You pay rent to a housing association? You pay rent to a private landlord?
	Other? Please give details
How much rent do you pay and I For example, every week, every for every four weeks or every month.	
Do you have any service charge	
How man	Yes Ny?
	Which Service? How Often?
	Victoria
	E O MINO

Page 2 Second Adult / Non Dependent Form	
Second Adult / N	lon-Dependent Form
This form should be used if you have indicated on your applicat Income Support/Job Seekers Allowance (Income Based) or Job	ion form that your second adult/non dependent is in reciept of Seekers Allowance (Contribution Based).
In order to correctly assess your claim, we need to have this fo to the Benefits Agency Office that pays their benefit, in or	rm, giving their authorisation. Then either send it or take this form der for them to complete the details.
Council Name	
Address	
Postcode	
Surname	
Other names	
Telephone number	
Email address	
TO BE COMPLETED BY THE SE	ECOND ADULT / NON DEPENDENT
	ed below regarding my Income Support or Job Seekers Allowance.
Name	
National Insurance No: Address	
Address	
Postcode	
TO BE COMPLETED BY	Y THE BENEFITS AGENCY
IS in receipt of Income Support / JSA (IB) / JSA (cont)	
from	
WAS in receipt of Income Support / JSA (IB) / JSA (cont)	
from	
to	

Second Adult Non-Dependant

This form can be used to inform the Local Authority of any Non-Dependants in an applicant's home, as this could reduce the amount of Housing Benefit they receive.

This form is comprised of sections on:

- Applicant Details
- Signed by Second Adult
- Completed by Benefits Agency
- Declaration

Length: 1 Page

Declaration: Signature by Non-Dependant,

Signature by Benefits Agency

Some Local Authorities using this form: St Albans

Second Home

This form can be used to inform the Local Authority of an applicant's two properties (or land).

This form is comprised of sections on;

- Applicant's Details
- Partner's Details (if applicable)
- Second Property / Land information
- Any Other Occupants
- Property Outgoings
- Proof that is needed to support the application
- Declaration

Length: 4 Pages

Declaration: Signature

Some Local Authorities using this form:

Ashford, Scarborough, St Albans

Page 2	Your details
	** Your Council Name **
This form a boundable a complete d Water	SECOND HOME FORM
they live. This includes properties ar	e claimant or their partner own any property or land, apart from the one in which nd land abroad, as well as in this country.
Claimant's surname	
Claimant's other names	
Title	
Telephone number	
Email address	
Case/ claim reference	
Partner's surname	
Partner's other names	
Claim address	
	Postcode
Second property or land	
Full address of second property/ lan	id .
	Postcode
Type of property	House, Bungalow, flat The number of bedrooms
	Block of houses/ flats
	Shop or warehouse
	Land The number of acres/ hectares
	Other Give details
Do you own this jointly?	** 5
Do you own this jointly?	No ☐ Yes ☐ Provide the names of the other owners.
Is there any agreement about selling	No 🗌
the property with the other owners?	Yes Provide details.
is the property up for sale?	No VICTOTI
	Yes Give date the pro
	Larme

Self Employed Earnings

This self employed earnings information form supplements the main claim form. This form allows claimants to give details of the income and outgoings of their business.

This form is comprised of sections on:

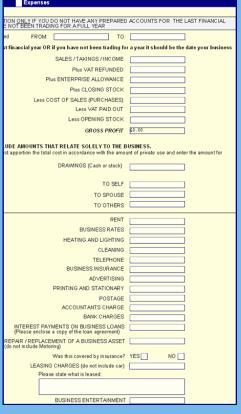
- **Applicant's Details**
- The Business Details
- **Business Income**
- **Business Expenses**
- Other Expenses
- Declaration

Length: 4 Pages

Declaration: Signature or Checkbox

Some Local Authorities using this form: ARP, Basildon, Luton, Stour Valley Partnership, Shared Revenues Partnership, St Albans,

Wigan,	Scar	borc	ugh
--------	------	------	-----



delayed.

Sharing Information with your Landlord

Sharing Information with Landlords helps Councils deal with claims quicker and reduces the risk of the claimant falling behind on rent due to the claim being

This form is comprised of sections on:

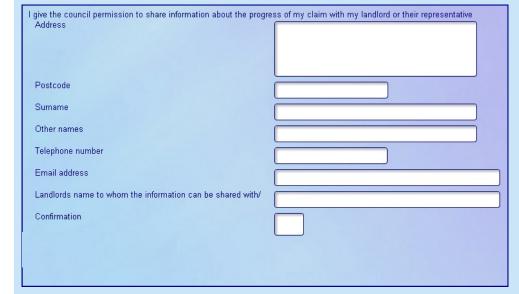
- Half a page of information about sharing information with the landlord
- Details of what will and will not be shared with the landlord
- **Address**
- **Full Name**
- **Contact Details**
- Landlord's Name
- Declaration

Length: 1 Page

Declaration: Checkbox

Some Local Authorities using this form: ARP,

Scarborough





Statement

This form can be used to inform the Local Authority of any changes or declarations the claimant needs to make.

This form is comprised of sections on:

- Applicant's Details
- Statement / Change of details
- Declaration

Length: 1 Page

Declaration: Checkbox

Some Local Authorities using this form:

Shared Revenues Partnership

Gurname		
Other names		
itle		
Address		
Postcode		
elephone number		
Email address		
Aobile number		
Benefit Claim Reference		
Date of birth		
Vational Insurance Number		
Statement / Declaration		
Statement / Declaration		

Visiting Officer Report

Page 1 of 2	Revenue & Benefit Services Home Visit Report Form
Officer's name:	Date of officer visit
Customer's surname:	PIN / Claim Ref / NINo:
Customer's forename:	Property / Account Ref:
Address:	pstcode
Information received / r	notes:

This form can be used and completed by a visiting officer when they are out in a claimant's household, to simply check and receive claim information to confirm the claimant is entitled.

This form is comprised of sections on:

- Visit Details
- Information Box
- Declaration by Customer

Length: 2 Pages

Declaration: Checkbox

Some Local Authorities using this form:

Dudley

Page 2 of 2
Revenue & Benefit Services Home Visit Report Form
Declaration by customer
The information recorded on this form has been read back or shown to me and it is accurately recorded.
I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.
Confirmation
Declaration by officer
The information recorded by me on this form is true and complete.
The information obtained from the customer has been read back or shown to them and they have confirmed it to be true and
complete.
Confirmation
To <u>submit</u> this form, click the Submit Form button and follow the instructions on the screen.
To <u>submit</u> this form, click the Submit Point bollon and follow are instructions on the screen.
Alli ot o vi o
Victoria
Larme



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Our Offices are open Monday to Thursday (excluding UK public holidays) 9.00am to 5.30pm, Fridays 9.00am to 5.00pm.

