

# Housing Benefit & Council Tax Benefit



Document Type	
C/Tax ref no	

## Change of circumstances form

Only fill in this form if your or your partner's state benefits, earned income, other income, capital or rent details have changed since the last decision made on your Housing Benefit and Council Tax Benefit claim.

If you've changed address within Rochdale Borough or had other changes in circumstances, other than those above, contact us - our details are on the back of this form.

### Important:

- Fill in this form with the information requested and return it immediately. We can then continue to pay the Housing Benefit and Council Tax Benefit you're entitled to.
- Provide original documents where requested - if proof is required you'll see this symbol.

If you cannot return the form immediately, contact us - our details are on the back of this form.

**Note:** The law says you must tell us if there's any change to the information we've used to decide whether you're entitled to Housing Benefit, Council Tax Benefit or both.

You must tell us straightaway even if you're waiting to hear from us about your claim, and even if you've already told someone else like Jobcentre Plus or your landlord.

If you deliberately fail to tell us about a change in circumstances, you could be liable to be prosecuted.

### Part 1 About you and your partner

Address

Postcode

Phone number

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Email address

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Do you have a partner who normally lives with you?

Yes  No

First name	Last name	Mr/Mrs/ Miss/Ms	Date of birth	National insurance number
You			/ /	
Your partner			/ /	

Have you or your partner recently made a **new** claim for Income Support, income-based Jobseekers Allowance, Employment Support Allowance or Guaranteed Pension Credit?

If 'Yes', only fill in parts 1, 2 & 9 and sign the declaration.

Yes  No

Have you or your partner recently become a student or self employed? If 'Yes', we'll write to you about this.

Yes  No

## Part 2 Change in circumstances

Tell us what has changed and the date of change.

My circumstances have changed because

Date of change     /     /

continue on a separate sheet if necessary

## Part 3 Working for an employer

Who's started work?

**You**

**Your partner**

Start date

   /     /

Who's wages have gone up?


**Your's**

**Your partner's**

Date wages went up

   /     /

If you or your partner have just started work or changed jobs since your last claim, answer **all** questions in part 3.

If your or your partner's wages have gone up, **only** answer the above question and provide proof of earnings. 

Original documents must be provided, **photocopies cannot be accepted**, proof of earnings can be:

- 5 payslips - if paid weekly;
- 2 payslips - if paid monthly;
- 3 payslips - if paid fortnightly; or
- A letter from your employer which shows how much you will earn.

**Don't delay returning this form, proof of earnings can be sent at a later date.**

Name & address of employer

Postcode

Employers phone number

**Weekly pay** before deductions?

£

Average **weekly** hours worked

Pay period

**Weekly**

**Fortnightly**

**Monthly**

Will you pay into a company pension scheme? 

**Yes**

**No**

Do you or your partner do any other paid work?  
If 'Yes', tell us on a separate sheet.

**Yes**

**No**

Who's working?

If you've both started new jobs you'll need to provide either your or your partner's details on a separate sheet.

If both your wages have gone up we need to see wage slips for you and your partner.

## Part 4 Other income (State pensions, tax credits, benefits and allowances)

If you or your partner have started to get a state pension, tax credits, benefits or allowances or if any of these incomes have gone up or down since your last claim, answer **all** questions in part 4.

We '**don't**' need proof as we'll check the information you give with the relevant department.

Have you or your partner started to get another income or has your other income gone up or down?

Yes  No (go to part 5)

Who's other income has changed or started?

You  Your partner

Date your or your partner's other income changed or started?

/  /

### Pensions

	You	Amount	Your partner	Amount
State Retirement Pension	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Widows Pension	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
War Widows Pension	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
War Disablement Pension	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Pension Credit (Savings part)	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>

### Tax Credits

Working Tax Credit (Including disabled Working Tax Credit)	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Child Tax Credit	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>

### Benefits

Incapacity Benefit	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Industrial Injury/Disability Benefit	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>

### Allowances

Contribution-based Jobseekers Allowance	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Contributory-based Employment Support Allowance	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Disability Living Allowance	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>

If you or your partner get Disability Living Allowance, does anyone claim Carer's Allowance for looking after you?


You  Your partner

Who gets the Carer's Allowance for looking after you or your partner?

Attendance Allowance	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Carer's Allowance	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>
Severe Disablement Allowance	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	£ <input type="text"/>

## Part 5 Other income (Work or private pensions)

If you or your partner have started to get a work or private pension or if either of these incomes have gone up or down since your last claim, answer **all** questions in part 5.

Have you or your partner started to get a work or private pension? 

Yes

No (go to part 6)

Who's work or private pension has gone up or down?

You

Your partner

Date you or your partner started to get a work or private pension or the date either of these incomes went up or down?

How much is paid?

£

How often is it paid?

Every

Who pays this pension?

## Part 6 Any other income

If you or your partner have started to get another income, or your other income has gone up or down since your last claim, answer **all** questions in part 6.

Other income includes training allowances, maternity/paternity/statutory sick pay and maintenance payments. If you're not sure, contact us - our details are on the back of this form.

Have you or your partner started to get another income? 

Yes

No (go to part 7)

What is the other income?

How much is paid?

£

Who's it paid to?

You

Partner

How often is it paid?

Every

## Part 7 Money you pay out

If you or your partner now pay childminding/childcare fees we may be able to make an allowance against your income for these fees where childcare is provided by a registered childminder, nursery or in some cases by a school. (For example after school club)

Give details of children you pay childcare fees for.

Have you or your partner started paying childcare fees? 

Yes

No (go to part 8)

Childs full name	Age	Name & address of childcare provider	Amount paid	Pay frequency


Have you or your partner started paying into a private pension scheme? 

Yes

No

## Part 8 Bank and building society accounts, capital, savings and investments

If you or your partner have opened a bank, building society or Post Office accounts, answer **all** questions in part 8.

Have you or your partner opened any bank, building society, Post Office accounts, or received any capital savings or investments? 

Yes

No (go to part 9)

Date you or your partner opened the new account, received the capital, savings or investments?

You	Your partner	Bank or building society name	Account number	Account balance
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>

Have you or your partner received any other capital, savings or investments? If 'Yes', tell us on a separate sheet.

Yes

No (go to part 9)

## Part 9 Housing costs

Has your rent gone up or down since your last claim? 

Yes

No (go to part 10)

Has there been any other changes to your rent since your last claim?  
If 'Yes', tell us on a separate sheet.

Yes

No

**If the rent has gone up or down or there's been other changes to your rent, for example the landlord has changed then you must provide proof, this can be a new tenancy agreement or a letter from the landlord.**

## Part 10 Your declaration

**Please read this declaration carefully before you sign and date it. It's an offence to give false information.**

**I/we understand the following.**

- If I/we give information that's incorrect or incomplete, you may take action against me/us.
- You'll use the information I/we have given to process my/our claim for Housing Benefit, Council Tax Benefit or both. You may check some of the information with other sources within the council, rent offices and other councils.
- You may use any information I/we have given in connection with this and any other claim for social security benefits that I/we have made or may make. You may give some information to other government departments, if the law allows this.

**I know I/we must let you know immediately about any changes in my/our circumstances that may affect the claim.**

- I/we understand that it's a criminal offence not to tell you about any changes in my/our circumstances.

The information I/we have given on this form is correct and complete.

**This is my/our claim for Housing Benefit, Council Tax Benefit or both.**

Your signature

Date

Your partner's signature

Date

## How to contact us

If returning the form by post, the form and supporting evidence should be returned to the council's 'designated office' for Housing Benefit and Council Tax Benefit; at

### Customer and Communities Service, PO Box 490, Rochdale, OL16 9AJ

You can report your change of circumstances or get more information on Housing Benefit and Council Tax Benefit by calling us on:

**0845 121 2970**, Monday to Friday, 8am to 8pm or Saturday, 9am to 1pm.

Information on Housing Benefit and Council Tax Benefit can be found on our website: **www.rochdale.gov.uk**

You can also report a change of circumstances by email to the following address, please remember it's important that you provide details of the change, the date of the change and proof where appropriate.

**revenues.benefits@rochdale.gov.uk**

If you need other help you can contact the **citizens advice bureau** (check the phone book for details).

## Equal opportunities monitoring

Rochdale Council is committed to promoting equal opportunities and fair treatment for all in providing our services.

**You don't have to provide this information** - but it would help us if you do. It will not affect your application in any way.

We will use this information only to measure our performance against our equal opportunities standards.

### Gender

Male  Female  Transgender

### Your age

Under 20  21 - 40  41 - 59

60 - 79  Over 80

**Disability** (If you consider that you have a disability, please tick one box)

Hearing disability  Physical disability  Visual disability

Learning disability  Mental health issue  Other disability

### Ethnic Origin

#### White

White British  White Irish  Any other white background

#### Asian or Asian British

Pakistani  Bangladeshi  Kashmiri

British Asian  Any other Asian background

#### Black or Black British

Black Caribbean  Black African  Black British  Any other Black background

#### Dual or Multiple Heritage

White and Black African  White and Black Caribbean  White and Asian

Any other dual or multiple heritage

#### Chinese or other Ethnic Group

Chinese  Any other Ethnic background