

Benefit Section

Pathfinder House, St Mary's Street
Huntingdon PE29 3TN
Tel: 01480 388308



Council Tax - Second adult rebate application form

Name: Address: Daytime telephone number:
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Reference number:	<input type="text"/>
Date issued:	<input type="text"/>
Date received:	<input type="text"/>

Please complete and return this form immediately as delays could lose you benefit

IMPORTANT NOTICE:

If the gross income of the Second Adult(s) is £231.00 or more you will not qualify for the rebate.

Before you fill in this form, please read the notes below and at the back of this form.

Please answer ALL questions in ink, writing NIL or NONE against any questions which are not relevant.

YOU MUST PROVIDE ORIGINAL DOCUMENTS CONFIRMING:

- Your National Insurance Number(s)
- Your Identity (two different types should be provided)
- All Income for each second adult
- All Investment Income on capital held for each second adult

Details of acceptable original documentation are listed in the notes on the back page.

If original documents are not yet available, please still return the form. The outstanding documents can be sent at a later date. However, please try and ensure any outstanding documents are provided within 14 days of the claim being made. If this is not possible, contact us for more help.

REMEMBER:

Benefit will normally be granted from the Monday following receipt of your form at this office.

Please ensure you sign the declaration at the back.

Once you have completed this form any changes in your circumstances should be notified to this office immediately.

For more details on this refer to the notes at the back.

If you have any information on suspected Housing, Benefit or Council Tax Benefit fraud ring the hotline. Information will be treated in strict confidence.



FAILURE TO SUPPLY THE REQUESTED INFORMATION WILL DELAY THE ASSESSMENT OF YOUR CLAIM

A. About you - the claimant

Please answer the following questions about you and any partner you have.
 We use partner to mean: a person you are married to or a person you live with as if you are married to them, or a civil partner or a person you live with as if you are civil partners

EVIDENCE YOU MUST SUPPLY

If you are applying for benefit for the first time or for your new address you must provide at least two items of identity/residence for your claim address e.g. BIRTH CERTIFICATES, VALID PASSPORT, HOUSEHOLD UTILITY BILLS. Also proof of you and your partners National Insurance Numbers. More details of what we can accept as evidence is outlined in the notes at the back of this form.

	You	Your Partner
1. Title (Mr/Mrs/Miss/Ms etc)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
2. Full christian names or forenames	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
3. Surname	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
4. Marital status (single/married etc)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
5. Age and date of birth	Age <input style="width: 30px;" type="text"/> Date of birth <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/>	Age <input style="width: 30px;" type="text"/> Date of birth <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/>
6. National Insurance Number	<input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/>
7. As the council tax payer, please tick which applies to you: An owner occupier <input type="checkbox"/> A tenant in private rented accommodation <input type="checkbox"/> Other <input style="width: 150px;" type="text"/>		
8. Are you responsible for the Council Tax at this address with someone else? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, who is/are the other person(s) <input style="width: 500px;" type="text"/>		
9. Is this property where you normally live? Yes <input type="checkbox"/> No <input type="checkbox"/>		
10. When did you move in? Please give date <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/>		
11. Please give your previous address: <input style="width: 550px;" type="text"/>		
12. Did you own your previous address? Yes <input type="checkbox"/> No <input type="checkbox"/>		
13. Are you currently in receipt of Housing Benefit, Council Tax Benefit and/or Second Adult Rebate? Yes <input type="checkbox"/> No <input type="checkbox"/>		
14. Have you ever applied for Housing Benefit, Council Tax or Second Adult Rebate Benefit before? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, state when <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> / <input style="width: 30px;" type="text"/> and at what address: (If this address was with another authority we may need to check certain information with them) <input style="width: 400px; height: 40px;" type="text"/>		
15. Have you come to live in the United Kingdom, the Republic of Ireland, the Channel Islands or the Isle of Man in the last two years? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, what is your nationality? <input style="width: 550px;" type="text"/> (We may need to contact you and/or the Home Office for further information in order to confirm eligibility to Benefits)		
16. Are you or your partner receiving one of the Council Tax Discounts which are listed on page 6? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, which discount do you or your partner receive? <input style="width: 400px;" type="text"/>		

B. Other adults in the household

Please tell us about all other people living in the property aged 18 or over. Remember – you will need to provide details to confirm the income and capital of each adult. If you have more than two adults, please attach a separate sheet giving the same details below for the other adults.

Adult 1:

Full name Date of birth / /

Relationship to you National Insurance No.

Is this person a disregarded person for Council Tax as listed on page 6? Yes No

If Yes, which discount do they receive?

Do they pay rent to you? Yes No (e.g. do they have a rent book/tenancy agreement or pay for board and lodgings)

Income Details (Please indicate what type(s) of incomes they receive)

Gross Wage (Including overtime, bonuses etc.) Period (Weekly/fortnightly/monthly)

Other Income (e.g. Pensions, Benefits etc.)

Source of income	Amount (£)	Period (Weekly/fortnightly/monthly/annually)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Income from investments (This means all interest paid on capital held)

Source of income	Amount (£)	Period (Weekly/fortnightly/monthly/annually)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Adult 2:

Full name Date of birth / /

Relationship to you National Insurance No.

Is this person a disregarded person for Council Tax as listed on page 6? Yes No

If Yes, which discount do they receive?

Do they pay rent to you? Yes No (e.g. do they have a rent book/tenancy agreement or pay for board and lodgings)

Income Details (Please indicate what type(s) of incomes they receive)

Gross Wage (Including overtime, bonuses etc.) Period (Weekly/fortnightly/monthly)

Other Income (e.g. Pensions, Benefits etc.)

Source of income	Amount (£)	Period (Weekly/fortnightly/monthly/annually)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Income from investments (This means all interest paid on capital held)

Source of income	Amount (£)	Period (Weekly/fortnightly/monthly/annually)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Declaration

Please read the declaration below very carefully **before** signing the form.

I understand:

- If I give information that is incorrect or incomplete, the council may take legal action against me and will get back any benefit if I get paid too much.
- The council may use any information I have provided to process my claim for Second Adult Rebate. The Council may check some of the information with other sources within the council, rent offices, other councils and the Department for Work and Pensions.
- The council may use any information I have provided in connection with this and any other claim for Social Security benefits that I have made or may make. The Council may give some information to other government organisations, if the law allows this.

I **know** I must tell the council in writing straight away about any changes in my circumstances that might affect my claim. I **declare** the information I have given on this form is correct and complete. Where it has been completed by another person I have read it fully or the entries have been read back to me and I agree that the details are correct and complete. All the income, capital and bank accounts have been declared for all the adults that live at my address.

Signature of person claiming (This includes Power of Attorney and Appointees)

Date

Telephone number (You do not have to give this but it may help to speed up the processing of your claim)

D. Forms filled in by someone other than the claimant

This section must be completed if the claim form has been filled in by someone on your behalf.
(This includes an agent, relatives or friends).

Declaration:

I have filled in this form with the details given to me by the claimant. I confirm that the claimant has read all the entries or they have been read back to them including the declaration in Section 6 and they are correct.

Name of the person that filled in the form

Relationship to claimant

Signature of person who filled in the form

Date

The entries on the form have been read back to me and I agree they are correct.

Claimant's signature

Please provide the Power of Attorney document if you have one. If you wish to act as an appointee, please contact this office for further details.

E. Data Protection Policy – Privacy Disclaimer – Fair Processing Notice

The information collected by Huntingdonshire District Council on this form and from supporting evidence including when you email us, will be used to process your Housing and/or Council Tax Benefit claims. The information may be passed to The Department for Work and Pensions and the Inland Revenue as permitted by law.

We may check information provided by you, or information about you provided by someone else, with other information held by us. We may also get information from certain third parties, or give information to them to check accuracy of the information, to prevent or detect crime, or to protect public funds in other ways, as permitted by law. These third parties include government departments and other councils.

Huntingdonshire District Council is registered as a Data Controller under the Data Protection Act 1998 for the purpose of processing personal data in the performance of its legitimate business. Any information held by the Council will be processed in compliance with the principles set out in the Act.

The Council is responsible for ensuring the confidentiality of personal data it holds. It also has a duty to protect the public funds it administers and to this end may use

the information you have provided to us to prevent and detect fraud. This may include sharing information for these purposes with other persons or bodies involved for example in administering or auditing public funds or appointed as collection agencies responsible for collecting taxes on behalf of the Council or used for credit referencing or for data matching.

If you have concerns about the processing of your personal data by Huntingdonshire District Council you may contact the Data Protection Officer at Pathfinder House, St Marys Street, Huntingdon, PE29 3TN or the Office of the Information Commissioner at Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF.

The Councils policies on Data Protection, Privacy Notices and Data Matching can be found at www.huntingdonshire.gov.uk

And Finally, thank you for filling in this form. Your benefit will be worked out based on the information you have given us. If your family circumstances or the income of your Second Adult(s) change you must tell us straight away. Any overpayment of benefit made to you will have to be paid back. Please return this completed form to:

Benefit Section

Huntingdonshire District Council, Pathfinder House, St Mary's Street, Huntingdon, PE29 3TN

Tel: 01480 388308 **Email:** benefit@huntingdonshire.gov.uk

Normal opening hours: Monday to Thursday 9am to 5pm, Friday 9am to 4.30pm

Additionally you can take this form and supporting details to our Customer Services Centres at:

Civic Centre, The Priory, St Neots: Mon-Thur 9am to 4.30pm, Fri 9am to 4.30pm

Town Hall, Market Square, St Ives: Mon, Thur and Fri only - 9am to 1pm and 1.30pm to 4.30pm

Unit 7, Broadway Shopping Centre, Yaxley: Mon-Fri 9am to 12.30pm and 1pm to 4.30pm

Ramsey Project Centre, 39 Great Whyte, Ramsey: Mon-Fri 9am to 12.30pm and 1pm to 4.30pm

REMEMBER

If you don't provide any of the evidence requested, the council will not be able to pay you any benefit

**DON'T DELAY RETURNING THIS FORM
DOCUMENTS CAN BE SENT AT A LATER DATE IF NECESSARY**

F. Guidance notes

This form must be completed by the person liable to pay Council Tax and not the "Second Adult".

The liable person may be eligible to claim second adult rebate if:

- You are a single person OR
- You are a couple and one of you is ignored for Council Tax Discount purposes (See below) AND
- You share your home with other adults e.g. grown up children who do not pay Council Tax.

The "Second Adult(s)" is:

- Not a partner or spouse.
- Not a joint owner or tenant who is liable to pay Council Tax with you.
- Must be aged over 18.
- Must not be paying rent to you as a sub-tenant or for board and lodgings.
- Is not a discounted person for Council Tax purposes. (See below)

If the gross income of the Second Adult(s) is £231.00 or more, you will not qualify for the rebate.

Council Tax Discounts

A husband, wife or other person aged 18 or over living in your address may be discounted for Council tax purposes if they meet one of the following qualifying conditions: If you want more information about discounts please contact us on 01480 388030.

1. Aged 18 and child benefit is still payable for them.
2. Education Leavers aged under 20 - applies only to school leavers from 1 May to 31 October inclusive each year. It means anyone who leaves the type of education described in 3 or 4 below within that period. It lasts until the person becomes aged 20 or to the 31 October, whichever comes first.
3. Students under 20 at School or College - the person must be aged under 20. Studying up to (but not above) A level, ONC, OND or equivalent and is on the course of at least three months duration and is normally required to study at least 12 hours per week in term times. Students should not also fall within categories 4 to 6 below.
4. Full time students in Further or High Education - the student must be attending a course of further or higher education (eg college or university). The course is of at least one academic year or one calendar year in duration and the student is normally required to study at least 21 hours per week for at least 24 weeks per year.

Students at a further education college count as "full time" if they are normally expected to undertake more than 16 hours of guided learning

per week. All students on sandwich courses count as full time.

5. Foreign Language Students - must be registered with the Central Bureau for Educational Visits and Exchanges.
6. Students on Nursing and related courses - Students undertaking nursing, midwifery or health visitors courses (if they also fall within category 4 above) count as students.
7. Student Nurses studying for their first Nursing Registration - Students studying for a first inclusion in Parts 1 to 6 or 8 of the nursing register.
8. Youth Training trainees aged under 25 - applies to people on an approved Youth Training or Youth Credit course who are in receipt of an allowances as a trainee (not as an employee).
9. Apprentices studying on NCVQ/SCEC courses - applies to people in employment, and who are studying for a qualification accredited by the National Council for Vocational Qualifications (England and Wales) or Scottish Vocational Education Council, and receives a reduced rate of pay because of being an apprentice, and their gross pay is not more than £160 per week.
10. People who are severely mentally impaired - severe mental impairment is classed as loss of intelligence or social functioning (however caused) which appears to be permanent (a medical certificate is required to confirm this). Also one or more of the following must be in payment to the person deemed severe mentally impaired:
 - The highest or middle rate of the Care component of Disability Living Allowance or
 - Attendance Allowance, Constant Attendance Allowances or certain equivalent additions to Industrial Injuries or War Pension
 - Incapacity Benefit or Severe Disablement Allowance or
 - Disability Working Allowance but only if he or she was receiving Incapacity Benefit or Severe Disablement Allowance in the eight weeks before the Disability Working Allowance was awarded.
 - Income Support or Job Seekers Allowance (Income Based) but only if it includes a disability premium awarded for the persons' incapacity.

F. Guidance notes (continued)

11. Carers - applies if the carer is providing care or support for at least 35 hours per week and they reside with the person receiving care or support. The person receiving care must not be the partner of the carer or a child aged under 18 of the carer and must be in receipt of the highest rate of the care component of Disability Living Allowance or a higher rate of Attendance Allowance or certain equivalent additions in Industrial Injuries or War Pensions or is a carer provided by an official charitable body and who are engaged to provide care for 24 hours per day for no more than £36 per week.
12. People in prison or other forms of detention including bail hostels.
13. Members of religious communities - applies to a member of a religious community whose principal occupation is prayer, contemplation, education, the relief of suffering or any combination of those and has no income (other than an occupational pension) or capital and relies on the community for his or her material needs.
14. Diplomats and members of international bodies or of visiting armed forces.

START DATE OF BENEFIT

Benefit will normally be calculated from the Monday following the date that your benefit form is received in this office.

If you fail to submit your claim at the appropriate time when making a claim you can ask for your benefit to be backdated. To apply for backdating you must write to the benefit section stating the period for which you wish benefit to be granted and giving the reasons why you failed to submit your claim at that time.

WHAT DOCUMENTS DO I NEED TO PROVIDE?

All evidence you send must be original documents. Photocopies are not acceptable and the lists below are not exhaustive.

EVIDENCE OF NATIONAL INSURANCE NUMBERS

Both you and your partner must supply your National Insurance Numbers along with evidence confirming those numbers belong to you. The numbers can be found on items such as:

- P45
- P60
- Wage/Salary statements

- Pension/order books issued by the Department of Social Security
- Letters issued by the Department of Social Security
- Letters issued by the Inland Revenue
- National Insurance number card

If you are not able to send any of the above, please contact the office.

EVIDENCE OF IDENTITY

You should supply two different items of identity such as:

- UK Passport (current and valid)
- Driving licence in paper or photo format
- Birth certificate (full or short)
- Marriage certificate
- National Insurance number card or medical card
- Benefit payment book (current and containing uncashed orders)
- Bank/building society statements (dated within the last four weeks of the claim)
- Household bills for the last quarter paid in your name (eg electricity, gas, telephone)
- Divorce/Annulment papers
- Wage slips from current employer showing your name and current address
- Letter from solicitor, social worker, probation officer or Inland Revenue
- Life assurance/Insurance policies
- UK Residence Permit
- Certificate of employment in HM Forces

If you are not able to send any of the above, please contact the office.

EVIDENCE OF INCOME

All income shown on this form must be confirmed by original documentation, such as:

BENEFITS AND PENSIONS

- Child benefit letter.
- Benefit award letters (must show current rates of benefit and all pages of the letter should be sent).
- Bank/ building society statements (must be current and show payment of benefit/ pension received).
- Letter or credit advice of any private/ occupational pension.
- Original documents as any other proof.

If you are not able to send any of the above, please contact the office.

EARNINGS

- Wage / pay slips
(please send five consecutive slips if weekly paid, two if monthly paid and three if fortnightly paid).

F. Guidance notes (continued)

- Certificate of earned income form (form must be completed and authenticated by employer).
- Letter from your employer (must be on official headed paper).

If you are not able to send any of the above, please contact the office.

SELF-EMPLOYED EARNINGS

- Latest completed accounts and latest Income Tax Assessment.
- Self Employed Earnings form (available from this office).

OTHER INCOME

- Latest payment slips.
- Latest full bank statement which shows amounts being received.
- Court order notices.
- Child Support Agency notifications.
- Letters from absent parents confirming maintenance payments made.

If you are not able to send any of the above, please contact the office.

CAPITAL

- Current bank/building society statements which show the latest interest paid on the account. (A slip showing the balance is not acceptable).
- Letter from the bank/building society which details the type of account held, account numbers and latest interest.
- Original documents showing proof of ownership, e.g. dividend statements, certificates, bonds, unit trusts, stocks and shares etc.

If you are not able to send any of the above, please contact the office.

CHANGE OF CIRCUMSTANCES

You must tell us of any changes in your circumstances which may affect the amount of benefit you are entitled to. You have to tell us within a month of the change happening or you may lose benefit. Here are some examples of the changes we need to know about, are listed below:

- If you start or finish work or your earnings go up or down
- If your Income Support/Job Seekers Allowance stops or starts
- If you are awarded any other benefits e.g. Child Tax

- Credit, Working Tax Credit, Incapacity Benefit
- If your savings go up or down or you receive an inheritance
- If you move address
- If your rent changes
- If someone comes to live with you
- If someone living with you moves out
- If the income of someone living with you goes up or down

The important thing to remember is to tell us all about any changes - not just the ones listed here - as soon as they happen.

DEALING WITH CLAIMS

Our aim is to deal with all claims for benefit within 14 days of receiving all the returned information. To help us deal with claims, please try and provide any outstanding documents within 14 days of the claim being made or the date we request the information. If this is not possible, please contact the office for further help as claims which remain incomplete may be disallowed.

VISITING OFFICERS

Visiting Officers are available who will call to assist you if you are elderly or disabled and cannot get into the offices.

Should you need help in completing a benefit form please contact us.

CHECK LIST (please tick boxes)

Have you provided the following details and enclosures? If these are unavailable please send them later.

- Your full name and address in the box provide
- National Insurance Numbers for both you and your partner, along with evidence confirming they belong to you
- Proof of your identity
- Date of birth for claimant, partner and all second adults
- Proof of earnings in respect of the Second Adult(s) who live with you (Wages/Salary slips/ Certificate of Earned Income)
- Proof of all other income in respect of the Second Adult(s) who lives with you
- Proof of savings including interest and dividends paid for each Second Adult(s)
- Do not forget to read and sign the declaration