

Application for a Discretionary Housing Payment

Name	Telephone Number
Address	Home:
	Mobile:
	Email address:
National Insurance Number	
Housing Benefit Reference Number	

Please tell us how long you will need this help for: _____

Are you affected by:

- Benefit Cap
 Personal circumstances causing hardship
 Changes to Local Housing Allowance
 Social Size Criteria (Bedroom Tax)

What is a Discretionary Housing Payment (DHP)?

It's money that could help you if the Housing Benefit you get is not enough to pay your rent.

It can only be paid for a **short term period** and is meant to help provide time for you to look at how you will meet the cost of your rent.

Who can claim DHP?

Anyone who gets **Housing Benefit can be considered for a DHP** unless the Housing Benefit you get already pays all of your rent.

How do I claim a DHP?

You will need to complete this application form and return it to Nottingham City Council, Admail 4270, Nottingham, NG1 9YZ

You must tell us how much money your household has coming in, how much you spend and what you spend it on. It is important that you are realistic about how much you spend and if you don't know the actual amount, that you provide a sensible estimate. It is also important that you tell us why the DHP is needed and for how long you might need the DHP support.





1. INCOME AND EXPENDITURE FORM

How much money do you have coming in?

	You (£)	How often is this paid?	Your Partner (£)	How often is this paid?
Wages/Salary				
Income Support or Jobseekers Allowance				
Statutory sick/maternity pay/ Company sick pay				
Working Tax Credits				
Child Tax Credits				
Child Benefit				
Maintenance				
Employment Support Allowance/ Incapacity Benefit				
State Pension Credit				
State Retirement Pension				
Private / Occupational Pension				
Disability Living Allowance Care Component				
Disability Living Allowance Mobility Component				
Attendance Allowance				
Personal Independence Payment (PIP) Daily Living Component				
Personal Independence Payment (PIP) Mobility Component				
Carers Allowance				
Money from other adults in the household/Boarders/Lodgers				
Money from friends or relatives				
Any other income or benefits, please specify				
			TOTAL	



1. INCOME AND EXPENDITURE FORM

How much are you paying out?

	You (£)	How often is this paid?	Your Partner (£)	How often is this paid?
Rent				
Mortgage				
Council Tax				
Household shopping including Food, Toiletries etc				
Electric				
Gas				
Water Rates				
Home and Contents Insurance				
Health or medical expenses (Glasses, prescriptions etc)				
Travel Expenses (Bus, Train, Taxi etc)				
Car – Petrol				
Car Tax				
Car Insurance				
Car Maintenance				
Cigarettes / Alcohol				
Entertainment / Takeaways / Leisure / Newspapers / Magazines				
Phone – Landline				
Phone – Mobile. If on a contract, when did this start and how long is it for?				
TV Licence				
Sky / Cable / Digital TV. If on a contract, when did this start and how long is it for?				
Internet / Broadband				



1. INCOME AND EXPENDITURE FORM

How much are you paying out continued?

	You (£)	How often is this paid?	Your Partner (£)	How often is this paid?
Payments to Catalogues				
Fines and Court Orders				
Maintenance / CSA Payments				
Loan Repayments				
Credit Card Repayments				
Hire Purchase / TV Rental				
Social Fund Repayments				
Clothing including School Uniform				
School Dinners				
Childcare fees				
Life or Medical Insurance				
Pet food and other pet products What Pet(s) do you have? How many?				
Anything else you are paying out that is not covered above?				
			TOTAL	

We may ask you to supply evidence of your household expenditure.



2. HOUSEHOLD DETAILS

Are you or any member of your household registered as disabled?

YES

NO

If YES, please provide the following details:

Name:

Date of Birth:

Relationship to you:

If YES, do you or any member of your household receive care?

YES

NO

Do you have a spare bedroom to allow a carer to stay overnight?

YES

NO

Do you have any costs that relate specifically to providing care for you or your partners disability / care needs?

YES

NO

If YES, please provide details in the section below.

Costs associated with care needs:

Is your property adapted to help you or any member of your household with their disability? (for example adapted bathroom / wet room etc.)

YES

NO

If YES, please describe what the adaptations are:

3. HOUSEHOLD REQUIREMENTS

Do you need to live where you are for a reason? i.e. to be close to school or work?
Please give details

Are you a Foster Carer? If yes, are you paid by the local authority for your fostering? If yes, how much?

Are you a parent who has child/children who come to stay with you under child access arrangements and you require an additional bedroom for them? If yes, please give details.

If you have been awarded a DHP before, please explain what you have done to improve your situation since your last application?

Do you have any predicted or known future changes (within the next 6 to 12 months) that could affect your household or income? If yes, please provide details.

Please use this space to tell us anything else that may be relevant in supporting your application:-

4. RENT AND TENANCY

How much extra help per week do you think you need from a DHP?	£
Could you afford the rent on your property when you first moved in and how did you pay your rent deposit (if applicable)?	
Are you in arrears with your rent? If yes, how much? Is any action being taken against you?	
When and why did you leave your last address?	
How did you find your current home?	
How long is your current tenancy i.e. 6 months / 12 months?	
Do you have to give your landlord notice if you want to leave? If yes, how much?	

Did you check how much the Local Housing Allowance rate would be before accepting your tenancy (if applicable)? If no, please tell us why not? If yes. Please tell us why you accepted the tenancy?

Have you tried to negotiate a lower rent with your landlord? If no, please tell us why not? If yes, was your rent reduced?

Have you considered moving or tried to move to cheaper accommodation? Please give details.

Are you registered with any Housing Associations or Nottingham Homelink? If no, please tell us why not? If yes, have you bid on any properties?

5. Bank Account Details

If you are receiving Universal Credit, we would normally pay any Discretionary Housing Payment to your bank account.

Please provide the bank details the payment is to be made to:

Sort Code:		Bank/Building Society Name:	
Account Number:		Bank/Building Society Address:	
Roll Number:			
Account Name:			

6. SIGN AND DECLARATION

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.

■ **I understand** that you 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 organisations, such as government departments, local authorities and private-sector companies such as banks and organisations that may lend me money, if the law allows this.

■ **I know** that I must let you know in writing about any change in my circumstances which might affect my claim.

■ **I declare** that the information I have given on this form is correct and complete. I have checked the information myself or have had it read back to me.

■ **I understand** that if I give information that is incorrect or incomplete, you may take action against me. This may include court action.

■ **I agree** that you will use the information I have provided to process my claim for Discretionary Housing Payment. The council may check some of the information with other sources as allowed by the law.

Signature
of person
claiming

	Date
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Partner's
Signature

	Date
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This form has been filled in by someone other than the person claiming.
You can explain the reasons here.

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I declare that as far as possible, I have confirmed with the claimant that the answers I have written on this form are correct.

Name of the person who filled in the form

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Signature

	Date
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Relationship to the person claiming

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Telephone number (helpful if we have a query)

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