

Telephone enquiry
01392 265440

For office use only
Logged:
Office Stamp
Reference:

Change of Address

Return this form in person at:
Civic Centre
Paris Street
Exeter
EX1 1JN

Part 1

Do you have a partner? Yes No

Mail to: FREEPOST HOUSING BENEFIT

Your details

Your partner's details

Surname		Surname	
Title (Mr,Mrs,Miss)		Title (Mr,Mrs,Miss)	
Forenames		Forenames	
National Insurance Number		National Insurance Number	
Date of birth		Date of birth	
NEW address Include room / flat no.			
		Postcode	
E-mail address			
Phone number: Home		Mobile	
What date did you / do you plan to move into this address?			
Do you wish to claim Council Tax Support at your new address?			Yes <input type="checkbox"/> No <input type="checkbox"/>

At your new address are you: (Please tick one box only)

Renting from a private landlord	Renting from a Housing Association or the Council	Renting room/s from the home owner	Paying ground / site rent	Owner Occupier
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Part 2

Changes in your household

Are you a joint tenant/owner at the new address?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes how many joint tenants/owners are there?	<input type="text"/>
Has there been any change in who lives with you at the new address?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Tell us more in the space below Please go to Part 3	
Give us the name of anybody who has left your household If anybody has joined your household at the new address, please tell us their name, date of birth, National Insurance number, their relationship to you and what their income is including how many hours a week they work			
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.....			
.....			

Part 3**Rent Details**

Landlord name		Phone number	
Landlord address			
Email			
Are you or your partner or any children related to your landlord or their partner?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Does your landlord live in the same building?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Do you have a written tenancy agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>	What type of tenancy do you have?	
		Period of tenancy?	
When did your tenancy start?		Was your last tenancy with the same Landlord?	Yes <input type="checkbox"/> No <input type="checkbox"/>
How much is your rent?	£	How often?	week / month / 4 weeks / quarter / annual
Do you receive any rent free weeks?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes how many do you get each year?	

Was the property let to you as: (Please tick box that applies) Unfurnished Furnished

Does your rent include any of the following?			
	Yes	No	How much
Garage or parking space			£
Personal Care & support			£
Emergency alarm system			£
Meals:			
Breakfast			£
Lunch			£
Evening meal			£

Which type of accommodation do you live in? (tick one applicable)					
House		Flat		Room/rooms in a house	Other: give details in Part 6

PLEASE SUPPLY YOUR NEW TENANCY AGREEMENT OR HAVE YOUR LANDLORD COMPLETE AND RETURN A PROOF OF RENT FORM

Part 4**Sharing information with your Landlord.**

If you have asked for your benefit to be paid direct to your Landlord we will tell them when a decision has been made and how much benefit you are entitled to and for what period benefit can be paid. However if benefit is paid to you, under the Data Protection Act we normally need your permission to share information about your claim. If you give us this permission, we would only tell your landlord:

- If a decision has been made on your claim
- If we need more information to make a decision
- What rent allowance you are entitled to and for what period benefit can be paid.

We will not give your landlord any information about your personal circumstances or your financial circumstances without your express permission unless required to by law.

Do you give us permission to share information with your Landlord Yes No

Part 5

Please complete this Part if you are still liable to pay rent for your previous address after the date you moved out

Please note that you will be required to provide evidence of the date your notice expires at your old address

Why did you have to move before the notice period ended at your previous address?	
What date were you offered the new address?	
What date did you accept the offer?	
What date did you give notice at your old address?	
When does your notice expire at your old address?	

If there was any delay between you accepting the tenancy for your new address and giving notice, tell us why.

Part 6

Please give us any extra information that you feel may help us when we work out your benefit

Additional Information	

Payment of your Housing Benefit can usually only be made to you

If your landlord is Exeter City Council we will pay your Housing Benefit directly to your rent account.

Please fill in the details below so we can pay directly to your account

Name of Bank / Building Society:															
Address of Bank / Building Society:															
Name of account holder:															
Your account number:										Your bank's sort code:					

Tick here if you wish us to make payment direct to your landlord?

This cannot be done in all cases. We will need you and your landlord to complete an additional form.

Declaration - Please read the statements carefully & sign below. We cannot deal with your claim if you haven't signed this declaration.

I understand the following:

- The information I have given on this form is correct and complete.
- If I give information that is incorrect or incomplete, you may take action against me; this could include prosecution.
- You will use the information I have provided to process my claim for Housing Benefit and or Council Tax Support.
- Exeter City Council is under a duty to protect the public funds it administers, and to this end, may use information I provide for the prevention and detection of crime. It may also share this information with other bodies responsible for auditing or administering public funds, who may in turn share the information with organisations including credit reference agencies, to check the accuracy of the information, prevent or detect crime and to protect public funds.

I know I must let Exeter City Council know about any change to my household or financial circumstances.

Your Signature:	Date:
Your Partners Signature:	Date:

If someone other than the person claiming has filled in this form, please explain below

<p>Name of person who filled in the form:</p> <p>Relationship to person claiming:</p> <p>I was asked to complete this form because:</p> <p>I confirm that I have read each question to the person claiming benefit and I have accurately recorded their answers.</p> <p>Signature:</p>
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DO NOT DELAY IN RETURNING THIS FORM

Even if you are waiting for more information to complete your claim