

## Westmorland & Westmorland and Furness Council Council

## **Request for Discretionary Housing Payments (DHP)**

## Important Information - Please Read Carefully Before Completing This Form

(The information that you give on this form will be held in strict confidence). You have asked Westmorland and Furness Council to provide you with further payments to help pay your rent. These are called Discretionary Housing Payments and are **not** part of Housing Benefit. Any award is made at the discretion of Westmorland and Furness Council. **Please read and answer each question as fully as possible as this will speed up your application.** 

Section	1 - About Yourself
553511	
Name	Benefit Ref.
Address	Date of birth / /
	Postcode National Insurance
Section	n 2 – About your application
Lwish to:	apply for Discretionary Housing Payments (DHP) for help towards my
i wisii to	apply for Discretionary Flousing Flayments (DFIF) for help towards my
Rent sh	nortfall Rent in advance Deposit Moving costs
Rent ar	Please tick as appropriate.
Housing	re applying for DHP for help towards your rent shortfall you may be entitled to additionage Benefit without the need for DHP. Please tick all the following boxes that apply to you write to you separately for details.
	*You have a disabled child who needs a separate bedroom
	You live in a housing association y and it is supported accommodation
in recei	tick the box if you have applied for Universal Credit or are currently ipt of Universal Credit and would like to claim Council Tax Reduction not have to tick the box if you are already receiving Council Tax Reduction)
example before in	give us permission we can share details of your application with your landlord, for le, we can confirm you have made an application and how long it is likely to take it is assessed. We will <b>not</b> discuss your financial circumstances. If you want to ermission for us to share details with your landlord please tick this box

Section 3 – Applying for a deposit, rent in advance or help with moving costs							
If you are applying for help with <b>rent in advance</b> , then please confirm the amount that you are required to pay							
What period does it cover?	to						
If you are applying for help with a <b>rent dep</b> amount that you are required to pay	osit, then please confirm the						
Did you pay a deposit when you moved into yo	our current property? Yes No						
If yes, will this be returned to you? Yes	No How much is it? £						
Please note that you will need to send proof of be your new tenancy agreement if you have it,	•						
<ol><li>If you are applying for help with your movin amount that you will need</li></ol>	ng costs, please estimate the £						
What are the moving costs for?							
Moving costs are paid directly to the removal company; if you qualify for DHP, then please send us the invoice once the move has taken place. The invoice should include the removal company's bank details.							
How much have you saved up to put towards to	these costs yourself?						
How much money are you receiving from anyon for example crisis loans, family, friends, downs	· · · · · · · · · · · · · · · · · · ·						
Who are you receiving this from?							
If you are requesting DHP for 1, 2 or 3 then what is the address that the costs apply to?							
	Postcode						
What date are you moving?	/ /						
What will the rent be at the new property?	£ per						
How many bedrooms does the new property have?							
What is the name and address of your new landlord?							
	Postcode						

Section 4 – Applying for help with your rent shortfall				
Have any disabled adaptations been made to your property?  yes, please tell us what these are	Ye	es	No	
2. Were you able to afford the rent when you moved in?	Ye	es 📗	No	
yes, how were you able to afford it, eg working. If no, before council / DWP how much rent would be used when working out you credit housing costs? If you didn't enquire, what was the reason for	ır Hous	sing Bene	•	
3. Do you use a spare bedroom for the storage of medical	Yes		No	
equipment or because you and your partner need separate bedrooms for medical reasons or you have shared custody of a child?				
f yes, please give details				
4. Have you asked your landlord to reduce your rent?	Yes		No	
yes, what was the outcome?				
5. Have you tried to find cheaper accommodation?	Ye	es	No	
s there any reason why you could not move if you found cheaper a	ccomm	nodation?		
How much notice would you have to give on your current property	?			
When does your current tenancy end?		1		

Section 4 – Applying for help with your rent shortfall (continued)
6. Are you registered with Choice Based Lettings and actively bidding on properties?
Please give details below
7. Have you sought advice from the Citizens Advice Bureau or Housing Advice Team?
If yes, what was the outcome
8. Do you have any relatives or friends who could help you out? Could they provide you with accommodation, if only temporarily? Could they, or anyone who lives with you, help you with the rent / council tax or any other household bills?
9. Do you, or a member of your household, have any disabilities or health problems?
Please give details and state how they affect your ability to pay your rent and/or move to a cheaper accommodation
10. Have you recently been bereaved? (please give details)

Section 5 -Rer	nt arrears						
1. Do you have	rent arrears?			Yes		No	
If yes, please co							
the amount of th		£					
the period they	cover		to				
the reason they	have accrued						
			0.Dl				
-			tion? Please specify				
<ul> <li>Notice to</li> </ul>	quit / Notice see	king possess	ion	Yes		No	
<ul> <li>Court Su</li> </ul>	mmons for Posse	ession		Yes		No	
Court Or	der for Possessio	on		Yes		No	
<ul> <li>Any other</li> </ul>	r			Yes		No	
landlord or a let the period they	tter from your la have accrued o	ndlord. This	his can either be a should show the a				
Section 6 – Pay							
need your bank		alify for help v	and you receive Uni with your <b>deposit</b> or				
Please complete	e the payment de	tails section b	pelow.		_		
Account name	You		Account name	Y	our land	llord	
				<u> </u>			
Name of bank or building society			Name of bank or building society				
Address of bank or building society			Address of bank or building society				
Sort code			Sort code				
Joil Gud			Joil Code		<u>-</u>		
Account number			Account number				

## **Section 7 – Your income and expenditure**

of your capital?

Please confirm your weekly / monthly income below, if you do not receive it weekly or monthly (eg 4 weekly) then put the amount and frequency in the notes field

Income	Weekly	Monthly	Notes
Claimant			
Partner			
Total la como (office una culta)			
Total Income (office use only)			
What is the total amount of your capital?	-		nts for all of the accounts you

Please confirm your weekly / monthly expenses below, if you do not pay these weekly or monthly then put the amount and frequency in the notes field

hold, showing the last eight weeks transactions

Essential Expe	enditure	Weekly	Monthly
Rent (after HB	deducted)		
Council Tax			
Electricity			
Gas			
Water Rates			
Other Fuel e.g.	Coal, oil etc		
l lava alva amin m	Food		
Housekeeping	Household items		
	Loan / Finance		
Cor / Vahiala	Road Tax		
Car / Vehicle	Insurance		
	Petrol / Diesel		
Б	Buildings		
Property	Contents		
Television Lice	nse		

Essential Expenditure (cont)	Weekly	Monthly	Notes
Sky/Netflix/Cable TV			
Telephone (landline)			
Mobile phone			
Broadband/Internet			
Clothing			
Pets			
Loans / HP payments / Credit Cards			
*Care costs			
Travel costs eg bus, train fares			
Prescriptions			
Other			
Emergency / Contingency			
Total Expenditure (office use only)		•	
*If you pay care costs, please can	vou tell us who	these are pa	aid to and what they are for?
If any of your expenses are unusual special dietary requirements or you and from hospital. We may ask fo	u have high pe	trol expenses	
Any other information that you belie	eve may help y	our claim.	

Please note that when we look at your expenses we have to decide whether we think that they are reasonable or not taking into account your financial situation.

Declaration:						
Read this part carefully and then you and your partner m Westmorland and Furness Council to pursue all fraudule	_	ow (It is the policy of				
The information I have given on this form is true and comple	te.					
I will let you know in writing if any of my circumstances changed Discretionary Housing Payment again. (Failure to report change)		•				
You may check any of the information I have given. This mabuilding society, the Benefits Agency, the Employment Servi	•	•				
If I receive too much Discretionary Housing Payment because my circumstances or I do not move into the property I have r for, I realise I will have to repay the monies.						
If I give false information, I realise I may be prosecuted. (The Council must protect the public funds it handles and so may use the information you have provided on this form to prevent and detect fraud. The Council may also share this information, for the same purposes, with other organisations which handle public funds).						
Claimant's Signature:	Date:	/ /				
Partner's Signature:	Date:	/ /				
What is the best way of contacting you: Telephone	Email	Post				
Your telephone number:						
Your email address:						
If we need to clarify any of the details on this form then a Co you or visit you at home (We will call you to arrange the visit you to let you know if you are entitled to Discretionary Housi	t). The Counc	•				
Thank you for completing this form. Please return it to: Ber Barrow in Furness, Cumbria LA14 2LD	nefits, Town I	Hall, Duke Street,				
If you have any queries you can telephone Customer Service benefits1@barrowbc.gov.uk	es on (01229)	404242 or email				
Office use only						
Benefit ref: Date of i	ssue:	/ /				