

Request for Discretionary Housing Payment

PRIVATE & CONFIDENTIAL

_____ (Name)

_____ (Address)

Claim Ref no:

Date of Issue:

Discretionary Housing Payments (DHP) are available for people who receive Housing Benefit or Universal Credit which includes a housing element towards rental liability and have a need for further help to meet their rent payments. A DHP is only intended as a short term measure to help you whilst you take steps to improve your circumstances.

A DHP can be claimed for help with:

- Any shortfall between your Housing Benefit or the housing costs part of Universal Credit and your full rent e.g. benefit cap, spare room subsidy or Local Housing Allowance restrictions
- Rent in advance
- Rent deposits
- Other lump sum costs associated with housing needs such as removal Costs

You cannot receive a DHP towards any reduction in your Housing Benefit as a result of ineligible service charges, such as heating, lighting, fuel, insurance, meals, etc. You also cannot receive a DHP for help towards your Council Tax payments or deductions made in benefit due to overpayments or non-dependant deductions.

Please note a DHP payment is short term only depending on your financial circumstances. We may need to ask you to supply supporting documentary evidence.

This is a discretionary scheme and there are no rights of appeal against the refusal of an award, the sum of any award or the period over which any award is granted. However to ensure fair and consistent treatment if you feel that our decision is incorrect, you can request that the decision is looked at again within one calendar month of the date of our decision.

About you

I wish to make an application for a DHP for: *(please tick all that apply)*

Help with my weekly rent:

Help with a deposit on a property I am moving to:

Help with removals costs:

Other housing costs (tell us what):

Please tell us all the people who live with you at the address above, how old they are, and what relationship to you they are.

Name (please print)	Age	Sex	Relationship to you

Please provide us with your contact details

Mobile/Phone _____ Email _____

For any Non-dependants who live with you, what is their income?

What address do you currently live at?

Postcode: _____

If you are asking for help to move, please tell us the address you're moving to: _____

Postcode: _____

If you require DHP support to help with moving or rent in advance, please provide details of the date you move, how much rent in advance is required, a description of any other costs you need help with and provide evidence to support these costs.

Your DHP may be delayed if you do not provide evidence straight away

How much is the full rent your landlord charges you, and how often?

£ _____ (amount of rent)	Every _____ Week? Fortnight? Month? Four weeks?
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What is your landlord's name and address?

Landlord's contact details _____

If we're paying your DHP to your landlord, we will need to contact your landlord about it.

Do you have any rent free weeks? Yes No

Do you share your rent with anyone apart from your partner? Yes: No:

Does your rent include any of these service charges?

- | | | | | | |
|-------------|-----|--------------------------|----|--------------------------|--------------------------|
| Water rates | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| Meals/food | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | If it does, which meals? |
| Electric | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| Gas | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| Cleaning | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |

If your rent includes any service charges please send us a rent breakdown from your landlord saying what services are included and how much they charge you for each service.

Is the housing costs part of your Universal Credit paid to your landlord?

Yes No

If yes, why is this?

Please give us the bank account details you want your Discretionary Housing Payment paid into:

Account-holder's name (person or company)	
Bank name	
Account number	
Sort code	
Roll number if there is one	

If you want your DHP paid to your landlord or to anyone else, tell us who you want it paid to, and why this is:

If you claim Universal Credit please send us evidence of how much rent your landlord charges you. For example, your rent book, current tenancy agreement, signed and dated letter from your landlord, etc. This needs to be signed by your landlord, or printed by them if they are a company/letting agent.

When did you move to your current address? (If you moved in the last 12 months, please state your previous address.)

Were you able to afford the rent when you moved in? If yes, please tell us how you were able to afford it (for example, you were in work, etc):

Have you asked the landlord to reduce the rent? Yes No

If 'Yes', what was the outcome? If No please explain why.

Do you have any rent arrears? Yes No

If 'Yes' please state how much is outstanding and the period this covers and if you are making payments towards these:

Have you tried to find cheaper accommodation? Yes No

If 'Yes', what was the outcome? If 'No', please explain why

Is there any reason why you could not move if you found cheaper accommodation?

How much notice would you have to give if you chose to terminate your tenancy? _____

Have you signed up for Gloucestershire Homeseeker? Yes No

If you are over accommodated, are you actively bidding to find more suitable accommodation? Please explain what steps you are making or reasons why not:

Has your home been substantially adapted to meet the needs of someone in your household with a disability? If 'Yes' what are the adaptations, and who are they for?

Do you, or a member of your family, have any disabilities or health problems? If 'Yes' please provide details. Also tell us if they receive Disability Living Allowance (DLA) or Personal Independence Payment (PIP).

Please tell us if any of the following apply to you or a member of the household?

- Is living in Supported Accommodation Yes No
- Has a student child who is away from home but the main residency remains with their parents Yes No
- Has suffered a bereavement in the last 12 months, which has led to under occupation of the property Yes No
- Is an approved foster carer and have fostered a child within the last 12 months, or has become a registered foster carer in the last 12 months Yes No
- Has an adult child in the Armed Forces who continues to live with parents, but is away on operational duty Yes No
- Qualifies for state pension Yes No
- Is in temporary accommodation Yes No

Do you and your partner have any savings or capital? Yes No
If 'Yes', please state how much:

Income and Expenditure

It is really important that you provide us with as much details possible so we can calculate your entitlement accurately.

In the following section we have provided you with a broad list of the key income types and general day to day expenses that most people have. To keep the application form easy to complete for everyone this does not cover all costs you may have so you will need to spend time to ensure you don't miss anything.

Don't forget to think about other regular (or one-off) large or small purchases you may make and detail them all in the following tables. Some examples may include – newspapers you may buy regularly, buying bread and milk outside of your weekly shop or haircuts for your family.

Remember – Discretionary Housing Payments are **not a long term solution** and you must make attempts to improve your circumstances in order to continue receiving them. Gloucester City Council may stop granting awards to those who do not:

- Seek help with budgeting, debts or financial assistance if recommended
- Maximise benefit take-up
- Take extra steps to look for work or increase your hours
- Downsize or move to reduce your rent costs
- Take any other necessary or relevant steps to manage financially without discretionary housing payments

****Universal Credit claimants please note****

If you are claiming Universal Credit in most cases we are unable to confirm your income from our records as this benefit is administered by The Department of Work and Pensions.

Please provide us with a breakdown of your entitlement by sending us your latest award letter or a screenshot / email of your universal credit journal to benefits@gloucester.gov.uk

Advice Agencies only: we will accept a fully completed Standard Financial Statement as detail of income and expenditure; the remainder of the DHP application form must be completed

Income

Please provide details of all monies coming into your household per week. Please include income received by your partner and any non-dependants who contribute towards the household.

	You £ (per week)	Your Partner £ (per week)
Wages/Salary		
Universal Credit		
Income Support / Jobseeker's Allowance / Employment and Support Allowance		
Working Tax Credit		
Child Tax Credit		
Child Benefit		
Child or Spousal Maintenance		
Disability Living Allowance/ Personal Independence Payment		
Attendance Allowance		
Carer's Allowance		
State Retirement Pension		
Pension Credit		
Private Pension, works pension, annuity		
Non-Dependents income contributions		
Income from Investments		
Housing Benefit		
Other income (please state)		
Total Income (A)	£	£

Expenditure

Please provide details of your weekly expenditure below and include a breakdown of any arrears of payments. Please adjust the cost types accordingly if you see an expense is not listed.

Costs	£ (per week)
Rent	
Rent arrears	
Council Tax	
Water Rates	
Electricity	
Gas	
Other fuel	
Food / Groceries	
TV Licence	
Internet	
Cable/Sky or other provider	
Telephone	
Mobile Phone	
Petrol / Diesel	
Motoring costs (eg road tax, insurance)	
Public Transport costs	
Clothes	
School Meals	
Childcare Costs	
Maintenance Payments you pay	
Insurances including life, building, contents etc	
Lottery/gambling	
Cigarettes/alcohol	
Other expenses (please state what)	
Total Expenses (B)	£ per week

Loans

Please provide details of loans and other weekly payments including non-priority debts.

	Weekly Payment
Mortgage	
Personal Loan	
Other loan (please say what)	
Court Fines	
Credit Card 1	
Credit Card 2	
Catalogue	
Hire Purchase	
Store Cards	
Other Loan (please say what)	
Total loans and non-priority debts (C)	£ _____ per week

Total Income (A) £ _____ per week

Total Expenses and loans (B+C) £ _____ per week

25. If you have detailed loans and non-priority debts above, what steps have you taken to reduce any of your debts/loans outstanding?

26. Have you taken any independent debt advice e.g. Money Advice service, Citizen's Advice Bureau etc? If yes, what was the outcome?

Do you require your application to be backdated? Yes No

If Yes, please explain your reasons and provide the dates you wish us to consider:

Dates _____

Reason _____

Is there anything else you want to tell us that you feel is relevant to your application?
(Please provide details on a separate sheet if you need more space.)

Declaration

I confirm that :

- The information I have given on this form is true and complete.
- I will let you know if any of my circumstances or changes in the circumstances of anyone else in my household.
- I understand you may check any of the information I have given. This may include my bank, building society, and the Job Centre Plus/Department for Work and Pensions.
- I understand that if I give false or incorrect information I will be asked to repay any overpayment and I may be prosecuted.
- The Council must protect the public funds it handles and so may use the information provided on this form to prevent and detect fraud. The Council may also share this information, for the same purposes, with other organisations that handle public funds; this includes other departments of the Council.
- You will use the information I have provided for my Housing Benefit or Council Tax Support claim and the information on this form to process my DHP application. You may check some of the information with others, as allowed by law.
- I agree you can contact my landlord about my DHP application.

Signature: _____

Date: _____

Tel no. _____

If someone else has filled in this form on your behalf, please say why and ask them to sign and date this form

Name: _____

Signature: _____

Contact Details: _____

Reason: _____

I agree that you can discuss my application for DHP with this person YES/NO (please delete)

Further advice and guidance can be found at www.gloucester.gov.uk/resident/benefits-and-grants

Or alternatively by phone – 01452 396440 or email benefits@gloucester.gov.uk