

Application for Discretionary Housing Payment (DHP) and/or Exceptional Hardship Fund Award (EHF)



About this form

How to complete this form

- Read the information below before completing this form.
- Answer all of the questions asked as fully as possible, this will speed up your application.
- Remember to include evidence to support your application.

How to return this form

- Post the form to the address shown at the bottom of the next page, or visit us with the completed form (the details are shown over the page).

How to get help

- Please see our contact details on the next page.

Information

What are Discretionary Housing Payments?

Discretionary Housing Payments (DHPs) can provide help if:

- Your Housing Benefit or Universal Credit is less than the full amount of your rent and you cannot meet this difference from your income.

We are also able to offer DHPs for rent in advance or rent deposits for a new home, if you are currently getting Housing Benefit and living in the East Devon area. If you would like to make a claim please contact us for further information and an application form.

Continued on next page

To request this information in an alternative format or language please call 01395 517446 or email benefits@eastdevon.gov.uk
We consider requests on an individual basis

We **cannot** give you a DHP to help with:

- Service charges that do not qualify for benefit, for example, meals, heating, lighting, hot water or water rates
- Increases in rent to cover arrears
- Any reduction in benefit due to a sanction being imposed
- Any benefit being suspended

If your application is successful it will normally be for a short period of time to give you an opportunity to seek alternative solutions. DHPs will be paid together with your normal Housing Benefit payment.

DHPs are different from Housing Benefit, so there is no independent right to appeal against a decision the Council has made. But you can ask us to look at the decision again.

The DHP fund is cash limited.

What are Exceptional Hardship Fund awards?

Exceptional Hardship Fund (EHF) awards can provide help if:

- Your Council Tax Support is less than the full amount of Council Tax you need to pay and you cannot meet this difference from your income.

We **cannot** give you an EHF award to help:

- Where we consider that you have unnecessary expenses/debts and that you have not taken reasonable steps to reduce these
- To cover any previous years Council Tax arrears
- When there is a reduction in Council Tax Support due to a sanction being imposed
- When your Council Tax Support has been suspended

The EHF is cash limited.

EHF awards will be made directly to your Council Tax account.

What happens once I have completed and sent my application to the Council?

We will consider each claim on an individual basis, but we cannot guarantee that you will get an award. Please send in all proof with your application, as this will speed things up, however, if we need extra information we will contact you.

We work in partnership with Homemaker Southwest, who are an independent money advice charity. Before an award is given to you, or as part of the condition of an award, we may ask you to attend an appointment with Homemaker to discuss your finances and how to maximise your income. We may also share your information with Homemaker before an award is considered.

We will usually let you know our decision within 14 days of receiving all the information we need.

The council processes information with the Data Protection Act 1998. We may use it in the administration of any of our services. We may also share information for the purposes of preventing and detecting fraud. If you want to know more about how we hold, or use, information about you, please contact the Data Protection Officer at East Devon District Council, Knowle, Sidmouth, EX10 8HL or visit our website at www.eastdevon.gov.uk/national_fraud_initiative.

How can I contact East Devon District Council about my claim?

Online: www.eastdevon.gov.uk

Phone: If you live in the Exmouth, Lypstone or Budleigh Salterton area or any village nearby, please call your Benefits Team on 01395 571750. For all other areas including Sidmouth, Axminster and Honiton please call 01395 571770.

Email: benefits@eastdevon.gov.uk

Visit: ■ East Devon District Council, Knowle, Sidmouth
EX10 8HL

(Monday to Friday 8.30am to 5pm)

■ Exmouth Town Hall, St Andrews Road, Exmouth
EX8 1AW

(Monday, Tuesday, Thursday, Friday 9am to 4.30pm)

■ Come and see us at one of our regular surgeries in Honiton, or by appointment in Axminster or Seaton (please call 01395 517446 for opening times).

Write: Revenues and Benefits Section, East Devon District Council, Knowle, Sidmouth EX10 8HL.

Section 1: About you

Your details

Full name:

Current Address (including postcode):

Daytime telephone number:

Email address:

My benefit reference number:

Section 2: About your claim

What would you like help with?

Rent (Discretionary Housing Payment). **Please complete all sections of this form, apart from Section 5 About your Council Tax**

Council Tax (Exceptional Hardship Fund award). **Please complete all sections of this form, apart from Section 6 About your rent.**

Rent (Discretionary Housing Payment) and Council Tax (Exceptional Hardship Fund award). **Please complete all sections of this form.**

What date do you need this help from?

Please tell us how long you need this help for:

4 weeks 8 weeks 12 weeks 26 weeks

If longer than 26 weeks, please tell us how long and why this would help:

Section 3: Your financial assessment

We need to know how much money you have coming in and how much money you have going out each week. We also need to know about any debts that you or your partner have and any money you or your partner has in a bank or building society. Please give details below. It is important that you take your time to fill this in fully and list everything, including all essential and non-essential outgoings. It may delay your claim if this is not completed and you do not send in supporting information with this form.

Please give details of money held in Bank or Building Society Accounts (including current account), stocks, shares or other investments that you and your partner have. Even if these accounts are overdrawn please include their balance.

Bank/Building Society Name and Account Number	Account Name (You, your partner or joint account)	Current balance

Are you setting aside any of this money for a special reason or purpose?

Yes No

If Yes, please give details below:

Outgoings

	Amount:	Weekly (W) or monthly (M)?	Arrears (if any):
Mortgage			
Rent			
Council Tax			
Water Rates			
Gas/Oil/Coal			
Electricity			
TV Licence			
Satellite/Cable TV etc			
Internet			
Telephone (including internet)			
Mobile Phone			
Maintenance payments			
Child Care			
Food/Housekeeping			
Launderette			
School/Canteen Meals			
Pocket Money			
Entertainment			
Home Contents Insurance			
Life Assurance/Savings Plan			
Pets			
Car expenses			
Petrol			
Travel expenses			

Outgoings continued	Amount:	Weekly (W) or monthly (M)?	Arrears (if any):
Medical charges/Dentist			
Clothing/Shoes/School uniform			
Nappies/Wipes/Formula			
Haircuts			
Birthdays/Christmas			
Membership/Subscriptions			
Sundry expenses and Emergencies			
Total outgoings			

Income

	You:	Your partner:	Weekly (W) or monthly (M)?
Wages/Salary			
Working Tax Credit			
Child Tax Credit			
Child Benefit			
Housing Benefit			
Council Tax Support			
Universal Credit			
Jobseekers Allowance			
Income Support/ Pension Credit			
Employment and Support Allowance			
Disability Living Allowance/PIP			
Attendance Allowance			
Carer's Allowance			
Maintenance Received			

Income continued	You:	Your partner:	Weekly (W) or monthly (M)?
Retirement Pension			
Other 1			
Other 2			
Total income			

Money owed

	Balance owed	Weekly repayments
Mortgage arrears		
2 nd Mortgage arrears		
Rent arrears		
Council Tax		
Gas		
Electricity		
Water charges		
Court fine/Court fees		
Maintenance arrears		
Social Fund loan		
Benefit overpayments		
Hire purchase arrears		
Other 1		
Other 2		
Other 3		
Other 4		
Other 5		

Have you tried to renegotiate any of your debts or reduce the regular payments?

Yes No

If Yes, please say which ones and the outcome:

Section 4: About you and your family

Please let us know if you or a member of your family has any health problems or disabilities. Provide details of how this affects you financially and enclose supporting evidence (for example a doctors' letter):

Please tell us about any recent or future changes affecting you (or a member of your family) that we should take into account (for example, changes in your income, having or expecting a baby, a recent bereavement, a rent increase, relationship breakdown, someone leaving your household or starting or leaving work):

Section 5: About your Council Tax

Do you have any Council Tax arrears?

Yes No

If Yes, how much?

What period do they cover? _____ to _____

Is there anyone else in your family or household who can help meet the shortfall in your Council Tax?

Not counting the Council Tax Support you receive, how much do you think you can afford to pay towards your Council Tax? £

Have you gone to Citizens Advice Bureau, Homemaker or any other money advice service?
 Yes No

If Yes, please give details including dates, which organisation you saw and the details of the advice given to you:

Section 6: About your rent

About your last home

Where did you live before?

Why did you leave your last address?

Was the property rented?
 Yes No

If Yes, how much was the rent, and how long did you live there:

About your home now

What rent are your being charged?: £ _____ how often: _____

Why did you move to your current home?

When did your move here?

Could you afford the rent when you first moved in?

Yes No

Did you know the amount of Housing Benefit you would be entitled to before moving in?

Yes No

Did you look at other properties before moving into this one?

Yes No

If Yes, please provide the addresses:

How did you find out about the property?

How much notice do you need to give your landlord?

Would your landlord consider reducing the rent if the Housing Benefit was paid directly to them?

Yes No

If Yes, would you like us to use the information provided on this form to see if we can pay your Housing Benefit directly to your landlord?

Yes No

Are you applying for DHP because you are affected by the size restriction rules for people living in council or Housing Association properties?

Yes No

If Yes, please explain what steps you have taken to help you find the rent shortfall. If you have taken no steps to help find the shortfall, please explain the reason for this:

Are you applying for DHP because you are affected by the Benefit Cap?

Yes No

If Yes, please explain what steps you have taken to start work, and if you are not able to start work the reason(s) for this:

Do you have rent arrears?

Yes No

If Yes, please say how much and what period they cover:

What action has your landlord taken to recover the rent arrears?
(Please send us proof of the action that has been taken.)

- | | |
|--|---|
| <input type="checkbox"/> Court action | <input type="checkbox"/> Notice to quit |
| <input type="checkbox"/> Notice seeking possession | <input type="checkbox"/> A letter |
| <input type="checkbox"/> A payment plan | <input type="checkbox"/> Other (please explain below) |

If No, please give details of how you have been meeting the full rent up to now:

Have you asked your landlord if the rent could be reduced?

Yes No

If Yes, what was the outcome?

If No, why not?

Please tell us how your accommodation is suitable for you (and your family). For example, do you need to live near a particular school, childcare provider, hospital or other service or has the property been adapted to accommodate the needs of a disabled member of your household?

Are there medical reasons why you or your partner or any members of your household, including children, need a separate bedroom?

Yes No

If Yes, please provide details and original supporting evidence of this medical condition:

Do you or your partner have a carer (other than your partner)?

Yes No

If Yes, who needs this care?

Do they need to stay overnight? Please give your carers name and address and how often they stay:

Do you have a spare bedroom the carer uses to sleep in overnight?

If you have children living with you for some of the time, please give their name(s), relationship to you and details of when they stay:

What have you done to try to find alternative accommodation?

Is there anyone else in your family or household who can help meet the shortfall in your rent?

Not counting the Housing Benefit you receive, how much do you think you can afford to pay towards your rent? £

Have you gone to Citizens Advice Bureau, Homemaker or any other money advice service?

Yes No

If Yes, please give details including dates, which organisation you went to and the details of the advice given to you:

Section 7: Extra information

Please use this space to tell us anything else about your special circumstances and why you believe you need a Discretionary Housing Payment and/or Exceptional Hardship Fund award. Tell us anything that is relevant, even if you think it is not important.

Section 8: Your declaration

Please read the following statements then sign and date the form in the space provided below to show that you have read and understood the declaration.

- ✓ This is my application for a Discretionary Housing Payment and/or Exceptional Hardship Fund award
- ✓ The information I have given is true and correct. I give you permission to check this information with my Housing Benefit and Council Tax Support claim and any information held by East Devon District Council, the Rent Officer, other councils or the Department for Work and Pensions.
- ✓ I give you my permission for the information on this application form to be shared with Homemaker Southwest for the purpose of dealing with my DHP/EHF application.
- ✓ I understand that the Revenues and Benefits Service may use the information I have given on this form to detect and prevent fraud, including sharing this information with other organisations and Government departments.
- ✓ I enclose proof of my outgoings to support my application.
- ✓ I will tell the Revenues and Benefits Section if any of the details on any letters you send me is incorrect.
- ✓ I understand that I may be prosecuted if I give information that is not correct or complete, which might affect my claim.
- ✓ I have read and understood this declaration

Your signature: _____ Date: _____

Your partner's signature: _____ Date: _____

If someone else has filled in this form on your behalf, please say why below and ask them to provide their name and signature.

Reason: _____

Name: _____

Signature: _____ Date: _____

Please return this form together with any necessary supporting evidence to:

Revenues and Benefits Section, East Devon District Council, Knowle, Sidmouth EX10 8HL.