## Housing Benefit Application for payments of Local Housing Allowance to be paid to the landlord



### What is this form for?

The Benefits Service has to make all payments of Local Housing Allowance (LHA) to the tenant, but we can consider making payments to the landlord when the tenant will have difficulty managing their own affairs or is unlikely to pay the rent.

#### Who should complete this form?

The tenant should complete this form, but the following people can also complete it on behalf of the tenant:

- family or friends
- a carer
- an advice or welfare agency
- the landlord or letting agent
- another service within the council

Written evidence needs to be provided to support the information given in this form. This can be from various sources depending on a person's individual circumstances.

Tenant's first name:	
Daytime phone number:	

Tenant's last name:

E-mail address:

Address of tenant :

Postcode:

Benefit claim number:

If you are completing this form on behalf of the tenant, please tell us your name and your relationship to the tenant:

Your name:

Relationship to the tenant:

Declaration: \*Please delete as appropriate

I **declare** that the information I have given in this form is correct and **I authorise** you to make enquiries to check any of the information or evidence I have provided.

I **understand** that you may need to contact the tenant/landlord/other\* and that you will need to tell them about the information I have given you.

Signature:

Date:	1	/
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Please tick the box or boxes that apply and provide the evidence required.

Tick if applicable	Reason payment of LHA to the tenant is a problem	Examples of information and evidence required
	Unable to open a bank or building society account	Letters from banks, building societies and credit unions.
		Letters from debt/money advisors.
	This will help the tenant keep or get a tenancy	Letter from landlord or letting agent
	Cannot read, write or speak English	Written evidence from support organisations
	Addiction to drugs, alcohol or gambling	Written evidence from care worker, GP, support organisations, government departments
	Fleeing domestic violence	Written evidence from women's refuge, support organisations, care workers, social services
	Recent care leavers or receive help from a support organisation	Written evidence from care workers, social services, support organisations
	Mental health problems	Written evidence from care worker, GP, other qualified medical practitioners, social services, government departments
	Just left prison following a long sentence	Written evidence from The Probation Service
	Severe debt problems or recent County Court Judgments	Letters from banks, building societies and credit unions. Letters from debt/money advisors or solicitors
		Copy of court order
	No experience of paying rent, or have difficulty in doing so	Written evidence from support organisations
	Undischarged bankrupt	Copy of court order
	Learning disabilities	Written evidence from care worker, GP, other qualified medical practitioners, social services, government departments
□ None o	of the above apply, but payments of LHA will	cause problems because:

# Housing Benefit BACS Payments

To have your Housing Benefit paid direct to your bank or building society account by BACS transfer, please fill in this form.





Unfortunately, we are not able to pay into some accounts, such as Individual Savings Accounts (ISAs), Post Office Card Accounts and some Savings Accounts. If you are not sure about the account you want to use, please ask your bank or building society.

If you close your account, or change bank accounts, please tell us as quickly as possible, or your payments could be delayed.

First name:	Last name:
Daytime phone number:	E-mail address:
Address:	
	Benefit claim number or landlord reference:
Posto	code:
Are you a: Tenant Landlor	d If you are the landlord, please tell us your tenant's name and address on the back of this form.
Name of your bank or building society:	
Address of your bank or building society:	
	Postcode:

Names as they appear on the account:			 		 		 	 
Branch sort code:		_		_		 	 	 ]
Account number:								
Building society account/roll number:								

If you are the landlord, please tell us the name and address of the tenant:

Tenant's first name:

Tenant's last name:

Tenant's address:					
				Postcode:	
Your signature:					
Date:	[ ]	/	,		

## Once you have filled in this form and signed it please return it to your Local Authority:

Canterbury City Council Benefits Service Military Road Canterbury, Kent CT1 1YW www.canterbury.gov.uk Dover District Council Benefits Service White Cliffs Business Park Dover, Kent CT16 3PJ www.dover.gov.uk

Thanet District Council Benefits Service PO Box 9, Cecil Street Margate, Kent CT9 1XZ www.thanet.gov.uk