

# Renting your property to a relative or friend who is claiming Housing Benefit



This form must be filled in by someone who is renting their property to a relative or friend who is claiming Housing Benefit

## About you

First name

Last name

Daytime phone number

Email address

Your address

Postcode:

Address of the property you're renting to your friend or relative

Postcode:

Benefit claim number (if known)

## Reason for purchase

Why did you buy the property?

Have you rented the property to anyone else before?

Yes

No

Was the property advertised publicly?

Yes

No

Why are you renting this property to your relative or friend?

Do you have any other properties that you rent out?

Yes

No

If yes, please give details

**Tenancy details**

Is there a written tenancy agreement?

Yes

No

If no, please give details of the agreement that you have reached with your tenant

How was the amount of rent charged decided?

Would the amount of rent charged be different if the tenant didn't claim Housing Benefit?

Please give details of the deposit paid and where this is deposited

## Payment of rent

Please give details of all rent payments made to date

Is the tenant in arrears with their rent?

Yes

No

If yes, what arrangements have been made to clear these arrears?

Is the rent charge reduced if the tenant isn't working?

Yes

No

Are there any rent-free periods

Yes

No

Will you allow the tenant to stay in the property if Housing Benefit is refused?

Yes

No

## Tenancy terms

Who is responsible for the upkeep of the property?

Who pays for the buildings and contents insurance for the property?

Who pays the other utility bills?

Do you hold the keys for the property?

Yes

No

Are you able to enter the property without your tenant's permission?

Yes

No

When was the last gas safety check carried out?

**Please provide a copy of the current Gas Safety record.**

**Please provide the Energy Performance Certificate for the property.**

**Declaration**

Please make sure you have filled in all parts of this form and signed it.

I declare that the information I have given is correct. I understand that if I give information that is false, I may be prosecuted.

Your signature

Date:

The section below must be filled in if someone has filled in the application form for you. This includes an agent, appointee, relative or friend.

I have filled in this form on behalf of

As they can't fill in the form because

I am (block capitals please)

Relationship to the person applying

As far as possible, I have confirmed with the person applying that the answers I have written on this form are correct.

Your signature:

Date:

**Once you have filled in this form and signed the declaration please return it to your local authority**

Canterbury City Council  
Benefit Payments Section  
Military Road  
Canterbury, Kent  
CT1 1YW  
[www.canterbury.gov.uk](http://www.canterbury.gov.uk)

Dover District Council  
Benefit Payments Section  
White Cliffs Business Park  
Dover, Kent  
CT16 3PJ  
[www.dover.gov.uk](http://www.dover.gov.uk)

Thanet District Council  
Benefit Payments Section  
PO Box 9, Cecil Street  
Margate, Kent  
CT9 1XZ  
[www.thanet.gov.uk](http://www.thanet.gov.uk)