

## Financial Services

Director: Nick Eveleigh C.P.F.A.



Chelmsford City Council  
Benefits Section  
Civic Centre, Duke Street,  
Chelmsford, CM1 1JE

Benefit enquiries: 01245 606400

### **Housing Benefit and Council Tax Support – Self Employed Form**

Claim No:

Date issued:

Claimant name:

Claim address:

- This form gives us the extra information we need to work out your Housing Benefit and/or Council Tax Support. You/your partner must complete one self-employed form for each self-employed work and/or business activity you do. If you have any other source of income, please make sure that you have included all the details on your claim or changes in circumstances form.
- Please read the questions carefully and fill in all sections in BLOCK CAPITALS using a pen. You must complete the form in full if you do not have accounts prepared by an accountant. If you have prepared accounts then ignore the Income and Expenses Declaration (pages 3-5) but complete the rest of the form, and provide the prepared accounts. If you need any help, or you have any questions, please contact us at the above address, or telephone us on the above number.
- You must provide documentary proof of your income to support your claim. You must provide your last two months consecutive bank statements for all your business accounts. If you do not have a separate business bank account, you must provide the last two months consecutive bank statements for the account that you use for your business.
- **You must also provide:**
- 
- Send your documentary proof as soon as you can and no later than 1 month after returning this form. If you cannot do this please contact the benefit office on the above telephone number or your claim may be deemed defective.
- **Do not delay returning this form or you may lose money.**

**Please return this form to the above address. Remember to sign on the last page.**

## Housing Benefit and Council Tax Support – Self Employed Form

|  |                       |  |  |
|--|-----------------------|--|--|
| Title:<br>Mr, Mrs, Miss, Ms etc  |                       | Surname:                                     |  |
| First name(s):   |                       |  |  |
| Full address:  |                       |  |  |
| Business address and postcode:   |                       |  |  |
| What kind of self-employed work do you do?   |                       |  |  |
| Tell us the date you started this self-employed work. Do not include the time when the business was being set up and not yet trading.  |                       |  |  |
| If you have temporarily stopped this self-employed work, tell us the date you stopped, the reason why, and the date that you think that you will start again.  |                       |  |  |
|  |                       |  |  |
| How many hours each week on average do you work?<br>You must count the total time you spend on all your self-employed / business activities, such as travelling for work, visiting wholesalers, research, training, book-keeping, administration, etc. |                       |  |  |
| Tell us about all the work-related activities you do each week for this self-employed work / business.   |                       |  |  |
|  |                       |  |  |
| Is your business registered with Companies House?  |                       | Yes / No                                     |  |
| Are there any other partners in the business?  |                       | Yes / No                                     |  |
| Name:  | Address and postcode: | What percentage of profit or loss is theirs? |  |
|  |                       |  |  |

|   |   |       |                              |
|---|---|-------|------------------------------|
|   |   |       |                              |
|   |   |       |                              |
| Do you or your partner pay into a pension scheme?<br>If Yes you must provide evidence of this.                              |   |       | Yes / No                     |
| How much and how often?   | £ | every | Week / month / year / other: |
| Do you work as a subcontractor?<br>If 'Yes' please provide wage slips.  |   |       | Yes / No                     |
| Do you work as a childminder? If 'Yes', you only need to provide details of your income and proof of your registration.     |   |       | Yes / No                     |
| Do you or your partner get payments from the New Enterprise Allowance? If Yes you must provide the letter about this award. |   |       | Yes / No                     |
| How much and how often?   | £ | every | Week / month / year / other: |

### Income and Expenses Declaration

If you do not have accounts prepared by an accountant, or cannot provide them, you must fill in the Income and Expenses section below. If you have prepared accounts and are sending them with this form you do not need to complete the section.

|   |          |
|---|----------|
| Do you expect to have accounts prepared by an accountant? | Yes / No |
| If Yes, when will you have these?                         |          |

### Business Income and Expenditure

Please tell us the exact period (from and to dates) that these income and expenses are for.

- In most cases this should be for the last financial year, **or**
- If your self-employment / business has started trading in the last year then the information you give must be for that whole period, **or**
- If your self-employment / business has just started trading then complete the form with information about what you expect your income and expenses to be for the next three months.

|            |  |          |  |
|------------|--|----------|--|
| Date from: |  | Date to: |  |
|------------|--|----------|--|

**Complete this part in full. Do not include any amounts that are for personal use. For example, if you use your car for business and personal purposes, only give the expense incurred for the self-employment / business activity.**

| Business Income  |   | Business Expense   |   |
|--|---|--|---|
| Total Gross earnings (or takings)                              | £ | Buying stock   | £ |
| VAT refunded   | £ | Tools / Equipment charges  | £ |
| Tips/ Gratuities   | £ | Special Clothing   | £ |
| Any other income for this business?<br>Please give details     |   | Wages paid to spouse / civil partner / partner   | £ |
|  | £ | Wages paid to others   | £ |
|  | £ | Rent for business premises   | £ |
|  | £ | Business Rates & Council Tax   | £ |
|  | £ | Fuel / Charges for Heating / Lighting / Water / cooking / power to machines & equipment. | £ |
|  | £ | Advertising  | £ |
|  |   | Subscriptions to trade publications and/or memberships                                   | £ |
|  |   | Printing & stationery  | £ |
|  |   | Postage  | £ |
| <b>Total Gross Income</b>                                      | £ | Telephone  | £ |
|  |   | Business Insurances  | £ |
|  |   | Bank charges   | £ |
|  |   | Interest on business loan  | £ |
| Purpose of business loan:                                      |   |  |   |
| Do you have a vehicle that is used for business purposes only? |   | Yes / No   |   |
|  |   | Car lease  | £ |
|  |   | Road tax (only if vehicle is for business use only.)                                     | £ |
|  |   | Petrol   | £ |

| Business Income  |  | Business Expense  |          |
|--|--|---|----------|
|  |  | Motor insurance   | £        |
|  |  | Motor repairs   | £        |
|  |  | Debts you can't claim back                                    | £        |
|  |  | Any other expenses for this business?<br>Please give details. |          |
|  |  |   | £        |
|  |  |   | £        |
|  |  |   | £        |
|  |  |   | £        |
|  |  | <b>Total Gross expenses</b>                                   | £        |
|  |  | Withdrawals (cash or stock)<br>you have made                  | £        |
|  |  | Repairing assets  | £        |
|  |  | VAT   | £        |
| Is it reasonable to assume that trading figures for the next three to six months will be similar to those shown above? |  |   | Yes / No |
| If No, please explain the likely difference and the reasons for this   |  |   |          |

## Declaration

**Even if someone else filled in this form for you, you must sign this declaration if you can.** If you have a spouse, partner or civil partner, it would be helpful if they sign below to confirm all the details about them are correct, but they do not have to sign.

Please read the declaration carefully before you sign and date it. I/we understand the following:

- If I/we give information that is incorrect or incomplete, you may take action against me/us. This may include requiring any resulting benefit overpayment to be repaid and/or criminal prosecution under the Social Security Administration Act 1992 or the Fraud Act 2006.
- You will use the information I/we have provided to process my/our claim for Housing Benefit or Council Tax Support, or both.
- You may check some of the information with other sources as allowed by law.
- You may use any information I/we have provided in connection with this and any other claim for other benefits that I/we have made or may make. You may give some information to other organisations, such as government departments, local authorities and private-sector companies such as banks and organisations that may lend me/us money, if the law allows this.
- I/we know I/we must let the council know about any change in my/our circumstances which might affect my/our claim promptly and in writing, and that if I/we fail to do so you may take action against us. This may include requiring any resulting benefit overpayment to be repaid and/or criminal prosecution under the Social Security Administration Act 1992 or the Fraud Act 2006. I/we declare the information I/we have given on this form is correct and complete.

Your signature: ..... Date: .....

Your partner's signature: ..... Date: .....

You may, if you want, give a phone number where we can contact you:

Daytime: ..... Evening: .....

If you did not fill in this form yourself, the person who filled it in for you must answer the following questions.

Name of the person who filled in the form: .....

Signature of the person who filled in the form: .....

How are you related to the person making this claim? .....  
(for example, son, daughter, brother, sister, appointee, agent, accountant, friend)

**Please return this form to the address on page 1.**

- **Have you enclosed all the proof we have asked for?**
- **Have you answered all the questions?**
- **Have you signed the declaration form above?**

**If not, there may be a delay in working out your claim.**