

If you contact us, use this reference:



Department
for Work &
Pensions

Office stamp

www.gov.uk

Telephone:

Textphone:

Date:

Your Pension Credit

Extra money

You may be able to get extra money with your Pension Credit because you are getting

- Attendance Allowance
- the middle or highest rate of the care component of Disability Living Allowance, or
- the daily living component of Personal Independence Payment

Before we can decide if you can get this, we need some more information.

Use this form to tell us about your circumstances from:

What to do now

Please answer the questions on this form.

Some of the questions are about Carer's Allowance. Carer's Allowance is a social security benefit to help people who look after someone who gets

- Attendance Allowance, or
- Constant Attendance Allowance, or
- Disability Living Allowance, or
- Personal Independence Payment

Please send this form back to us by / /
at the latest.

Use the envelope we have sent you. It does not need a stamp.

Where to get help and advice

For more information about your case, get in touch with us. Our phone number and address are at the top of this letter.

PC10 01/14

About you

Please fill in this form with BLACK INK and in CAPITALS.

Does anyone get Carer's Allowance for looking after you?

Their full name

Their National Insurance (NI) number

Address

Their daytime phone number

No

☐

Yes

☐

Please tell us about the person who looks after you.

Letters

Numbers

Letter

Code

Number

Has anyone claimed Carer's Allowance for looking after you, but has not yet been paid?

Their full name

Their National Insurance (NI) number

Address

Their daytime phone number

No

☐

Yes

☐

Please tell us about the person who has claimed.

Letters

Numbers

Letter

Code

Number

Are you registered blind or severely sight impaired?

No

☐

Yes

☐

Do you live with a partner?

We use *partner* to mean:

- a person you are married to or a person you live with as if you are married to them, or
- a civil partner or a person you live with as if you are civil partners.

No

☐

Go to **About other people who live with you.**

Yes

☐

Go to the next question **About your partner.**

About your partner

Does your partner get Attendance Allowance, or Constant Attendance Allowance, or the care component of Disability Living Allowance, or the daily living component of Personal Independence Payment?

No ☐

Yes ☐ If they get Disability Living Allowance, please tell us if the care component is at the highest, middle or lowest rate.

Highest rate ☐

Middle rate ☐

Lowest rate ☐

If they get Personal Independence Payment, please tell us if the daily living component is at the enhanced or standard rate.

Enhanced rate ☐

Standard rate ☐

Does anyone get Carer's Allowance for looking after your partner?

No ☐

Yes ☐ Please tell us about the person who looks after your partner.

Their full name

Their address

Their daytime phone number

Code	Number
------	--------

Has anyone claimed Carer's Allowance for looking after your partner, but has not yet been paid?

No ☐

Yes ☐ Please tell us about the person who has claimed.

Their full name

Their address

Their daytime phone number

Code	Number
------	--------

Is your partner registered blind or severely sight impaired?

No ☐

Yes ☐

About other people who live with you

Does anyone live with you?

Do not include anyone who just shares a bathroom, toilet, hall or stairway with you. If more than 4 people live with you, use a separate sheet of paper to answer these questions.

Their surname

Other names

Relationship to you

For example, son, aunt, tenant, landlord, lodger, none.

Do they get Attendance Allowance or Constant Attendance Allowance?

Do they get the care component of Disability Living Allowance or the daily living component of Personal Independence Payment?

Their date of birth

Does anyone get Child Benefit for this person?

Are they registered blind or severely sight impaired?

Do they pay you or your partner any money for rent?

No ☐ Go to the **Declaration**.

Yes ☐ Please tell us about them below and on the next 2 pages.

Person 1

Person 2

No ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐ What rate is paid?

Lowest ☐

Middle ☐

Highest ☐

Enhanced ☐

Standard ☐

No ☐

Yes ☐ What rate is paid?

Lowest ☐

Middle ☐

Highest ☐

Enhanced ☐

Standard ☐

No ☐

Yes ☐ Who gets the Child Benefit for this person?

No ☐

Yes ☐ Who gets the Child Benefit for this person?

No ☐

Yes ☐

No ☐

Yes ☐

No ☐

Yes ☐ How much?

£

How often?

Every

No ☐

Yes ☐ How much?

£

How often?

Every

About other people who live with you continued

Do they pay you or your partner any money for food?

No ☐

Yes ☐ How much?

£

How often?

Every

Person 2

No ☐

Yes ☐ How much?

£

How often?

Every

Do you or your partner pay them any money for rent?

No ☐

Yes ☐ How much?

£

How often?

Every

No ☐

Yes ☐ How much?

£

How often?

Every

Did a charity or any other organisation arrange for them to live with you?

If the council arranged it, tick **No**.

No ☐ Go to **About where you live.**

Yes ☐ Do you pay for this service?

No

Yes

No ☐ Go to **About where you live.**

Yes ☐ Do you pay for this service?

No

Yes

Person 3

Person 4

Their surname

Other names

Relationship to you

For example, son, aunt, tenant, landlord, lodger, none.

Do they get Attendance Allowance or Constant Attendance Allowance?

No ☐

Yes ☐

No ☐

Yes ☐

Do they get the care component of Disability Living Allowance or the daily living component of Personal Independence Payment?

No ☐

Yes ☐ What rate is paid?

Lowest

Middle

Highest

Enhanced

Standard

No ☐

Yes ☐ What rate is paid?

Lowest

Middle

Highest

Enhanced

Standard

About other people who live with you continued

	Person 3	Person 4
Their date of birth	<div></div> / <div></div> / <div></div>	<div></div> / <div></div> / <div></div>
Does anyone get Child Benefit for this person?	<div>No</div> <div></div> <div>Yes</div> <div></div> Who gets the Child Benefit for this person? <div></div>	<div>No</div> <div></div> <div>Yes</div> <div></div> Who gets the Child Benefit for this person? <div></div>
Are they registered blind or severely sight impaired?	<div>No</div> <div></div> <div>Yes</div> <div></div>	<div>No</div> <div></div> <div>Yes</div> <div></div>
Do they pay you or your partner any money for rent?	<div>No</div> <div></div> <div>Yes</div> <div></div> How much? <div>£</div> How often? <div>Every</div>	<div>No</div> <div></div> <div>Yes</div> <div></div> How much? <div>£</div> How often? <div>Every</div>
Do they pay you or your partner any money for food?	<div>No</div> <div></div> <div>Yes</div> <div></div> How much? <div>£</div> How often? <div>Every</div>	<div>No</div> <div></div> <div>Yes</div> <div></div> How much? <div>£</div> How often? <div>Every</div>
Do you or your partner pay them any money for rent?	<div>No</div> <div></div> <div>Yes</div> <div></div> How much? <div>£</div> How often? <div>Every</div>	<div>No</div> <div></div> <div>Yes</div> <div></div> How much? <div>£</div> How often? <div>Every</div>
Did a charity or any other organisation arrange for them to live with you? If the council arranged it, tick No .	<div>No</div> <div></div> Go to About where you live. <div>Yes</div> <div></div> Do you pay for this service? <div>No</div> <div></div> <div>Yes</div> <div></div>	<div>No</div> <div></div> Go to About where you live. <div>Yes</div> <div></div> Do you pay for this service? <div>No</div> <div></div> <div>Yes</div> <div></div>

About where you live

Do you and another person share the rent or jointly own the property?
Include any close relatives.

Their full name

Are they related to you?

When did you and the other person start to pay rent or mortgage together?

Was this the date you first started to live in the property?

No ☐ Go to the **Declaration**.

Yes ☐ Please tell us about this.

No ☐

Yes ☐

No ☐

Yes ☐

Declaration

I declare
that the information I have given on this form is correct and complete as far as I know and believe.

I understand
that if I knowingly give false information, my benefit may be stopped and I may be liable to prosecution or other action.

Signature

Date

