

Discretionary Housing Payments Application Form

About discretionary housing payments

Discretionary housing payments are payments we can make on top of your housing benefit. We can only pay you extra towards your housing costs if your housing benefit does not meet the full cost of your rent (we call this a “shortfall”).

To apply, you must be getting housing benefit. Fill in this form, sign it, and return it to the LWP Team.

Apply straight away. Discretionary housing payments can usually only start from the date we get your form.

Send this form to:

LWP Team, Customer and Exchequer Service, PO Box 1661, Huddersfield, HD1 9SR

How to get more information and advice

Telephone: 01484 414782

Email: LWP@kirklees.gov.uk

Write: LWP Team, Customer and Exchequer Service, PO Box 1661, Huddersfield, HD1 9SR

Visit: Huddersfield Customer Service Centre, High Street, Huddersfield, or
Dewsbury Customer Service Centre, Walsh Building, Town Hall Way, Dewsbury, or
any Kirklees Library and Information Centre

About you

Your name _____

Your address _____

Your benefit claim number _____

Section 1: About your money

1. So I can deal with your application I need to know what money you receive. Please tell me what money you have coming in and how often you receive it.

Income type – benefits, pensions, earnings, child maintenance	Amount received
	£ every
	£ every
	£ every
	£ every
	£ every
	£ every
	£ every
	£ every
	£ every

Capital savings, or investments	Amount (£)

Please use a separate sheet if you need to.

We may require additional information or proof of your income, capital savings or investments.

2. So I can understand what effect the shortfall in your benefit is having on your household budget, please tell me what money you have going out every week:

Money going out each week	Usual amount	Debt
Mortgage or rent		
Gas		
Electric		
Telephone		
Water rates		
Council tax		
Food		
Toiletries and cleaning products		
Clothes including shoes		
Fines or Court orders		
Loans		
School meals		
Insurance premiums		
Travelling expenses eg public transport or car		
Maintenance or child support		
Catalogues		
TV licence		
TV rental		
Pension contributions		
Childcare		
Direct deductions from your benefits		
Entertainment		
Other: 1. 2. 3.		

3. Does anyone else live in your household who helps with your household bills, for example a grown-up son or daughter? Tell me about them here:

Name		How much do they pay?	£	every
Name		How much do they pay?	£	every
Name		How much do they pay?	£	every

I may need to see proof of the money you have going out. I will write to you about this.

4. Have you received any welfare benefits advice? Yes ☐ No ☐
5. If you have a number of debts, have you been able to reschedule them? Yes ☐ No ☐

6. Have you asked your landlord to accept less rent?

Yes ☐

No ☐

If yes what is the agreed rent?

Section 2: About you and your family

1. What was your previous address?

2. Did you pay rent there?

Yes ☐

How much?

every

No ☐

3. Why did you move from there?

4. Does your current home have adaptations for a member of your family with a disability?

Yes ☐

No ☐

If yes, what are the adaptations and who are they for?

Adaptation	Who for

Please use a separate sheet if you need to

5. Please outline any health problems that you or your family have, or why this address is particularly suitable for your family.

6. Do you have a carer who stays overnight?

Yes ☐

No ☐

If yes, how many nights per week do they stay?

7. Do you receive Attendance Allowance or the middle/highest rate of the care component of Disability Living Allowance / Personal Independence Payment?

Yes ☐

No ☐

You may be entitled to an extra room allowance and we may need further information from you.

8. Do you receive a mobility car via the Disability Living Allowance mobility component / Personal Independence Payment "moving around" element?

Yes ☐

No ☐

9. Have you fostered children on behalf of a local authority within the last 12 months?
(Even if you do not have a child placed with you at the moment)

Yes ☐

No ☐

If yes, what is your foster carer registration number?

10. Do you have a member of the armed forces who normally lives with you but is currently away on service but intends to return to your home after completing their duties?

Yes ☐

No ☐

Section 3: Any other information

1. If there is anything else you want to tell me about, or anything else you want me to consider in my decision, please use this space.

2. Please provide additional contact details.

Your day time telephone number (Including area code)

Your e-mail address

Section 4: Your declaration

Even if someone else has filled in this form for you, you must sign this declaration if you can. You are responsible for making sure the information on this form is accurate.

Please read this carefully before you sign this form and return it.

- The information I have given on this form is correct and complete
- I understand if I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- I know I must always tell you immediately in writing about any change in my circumstances.
- I understand if I do not tell you about any change of circumstances, and you pay me too much benefit because of this, I may have to pay back the extra benefit.
- I understand I may be prosecuted if I do not tell you about any change of circumstances.
- I agree you will use the information I have provided to process my application for discretionary housing payments. You may check the information with other sources as allowed by the law.
- I understand you may use any information I have provided in connection with this and any other claim for social security benefits I 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 money, if the law allows this.

Your signature

Date

If this form has been filled in by someone other than the person claiming:

Please tell us why you are filling in this form for the person claiming.

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

Name of the person who
filled in the form

Signature

Date

Relationship to the person
claiming