



Norwich City Council revenues and benefits

Change of circumstances form

Income or savings change

Housing benefit and council tax benefit

You need to complete this form if:

your income, savings or investments have changed
the income, savings or investments of someone in your household have changed.

Don't delay... tell us today

Essential information to speed up your application

If you provide the following items, we will process your change in the shortest time possible.

1 Earnings

If earnings have started we need:

- payslips – either five weekly, three fortnightly, or two four weekly, or two monthly.

If you don't currently have all the payslips we need, please provide those you have and ask the employer to complete the certificate of earnings on the reverse of this form.

Please note – we will need all of the payslips as soon as they have been received.

If earnings have stopped we need:

- the final payslip received and the P45 from the employment which has ended.

If earnings have increased or decreased we need:

- the last payslip received at the old amount and
- either five weekly, three fortnightly, or two four weekly, or two monthly payslips at the new amount.

If you don't currently have all the payslips we need, please provide those you have and ask the employer to complete the certificate of earnings on the reverse of this form.

Please note – we will need all the payslips as soon as they have been received.

2 Benefits

If benefits have started we need the award letter showing which benefit is received and the date it started.

If benefits have stopped we need the letter you received showing the date it ended and proof of any other income you receive or will be receiving.

If your benefit has changed we need your award letter showing the new benefit you will be receiving.

3 Tax credits

If tax credits have started, stopped, or changed we will need to see all pages of the new award letter showing details of all payments received.

4 Savings/capital/investments

If you or your partner are of pensionable age and the balance of any account held by you or your partner has increased or decreased and the combined total of all savings, capital or investments is £9,500 or more, we will need to see a full bank statement(s) for the account/investment showing the change in the balance.

If you and your partner are of working age and the balance of any account held by you or your partner has increased or decreased and the combined total of all savings, capital or investments is £5,500 or more we will need to see a full bank statement(s) for the account/investment showing the change in the balance.

If you or your partner have opened or closed an account we will need to see confirmation of the account/investment being opened and the opening balance or confirmation of the account/investment being closed and the closing balance. We may need to contact you about what happened to any money withdrawn from the account after it was closed down.

Please ensure any bank/building society statement(s) you provide have the following information on them:

- The name and address of the account holder(s).
- The account number.
- Details of all transactions on the account in full.
- The date the change occurred ie the date the balance increased/decreased substantially.

What do you need to do?

- Complete and return the enclosed form as soon as possible. Don't forget to include your email address and telephone number, this could help us to speed things along.
- Remove this page and read it carefully as it explains exactly what proofs you need to provide and it will help you to avoid any unnecessary delays.
- If you need to provide proof of the change, you do not need to wait until you have proof before notifying us of this change – you can drop the form off or send it in and return the proofs as soon as you have them.
- Pick up and complete any other forms you might need, such as the *Change of address* and *Household change* forms. You can find these at www.norwich.gov.uk/benefitforms. Alternatively, you can call us on **0344 980 3333** or email benefits@norwich.gov.uk and we will send you the forms you need.

Section one

Please give us your details.

Remember to sign the form at the end.

Date received by authority
(OFFICE USE ONLY)

Claim number:

Name:

Address:

Postcode:

Telephone:

Mobile:

Norwich City Council's benefit department will need to contact you from time to time about your claim. If you have an email account, regular access to the internet and would prefer to be contacted by email, please tick this box and use the space below to give us your email address. Please take care to ensure this is written clearly.

Email address:

Section two

Have any of your details changed?

Please read all four statements below, tick either yes or no for each statement, then follow the guidance next to the tick.

- 1 Have you or a member of your household had a change in the income received?
(Income such as benefits, earnings, any other money being received, has started, stopped, increased or decreased.)
Yes No If yes, you need to complete section 3 to tell us about this change.
- 2 Have you or a member of your household had a change to your savings, capital, investments including stocks, shares, ISAs, Premium Bonds and any other investments?
(An account or investments balance or value has increased or decreased or has been recently opened or closed.)
Yes No If yes, you need to complete section 4 to tell us about this change.
- 3 Have you had any changes to your household?
(eg has a child, children, adult/s or joint tenants moved into or out of your address?)
Yes No If yes, you need to pick up and fill in the 'household change' form to tell us all about this.
- 4 Have you moved address?
(if you or anyone in your household has moved temporarily, or permanently within Norwich or out of the Norwich area).
Yes No If yes, you need to pick up and fill in the 'Change of address' form.

Pick up and complete any other forms you might need, such as the *Change of address* and *Household change* forms. You can find these at www.norwich.gov.uk/benefitforms. Alternatively, you can call us on **0344 980 3333** or email benefits@norwich.gov.uk and we will send you the forms you need.

Section three

Income changes

You need to complete this section if the income being received by you, your partner or a non-dependant adult in your household has changed. You need to tell us about this, as it may affect the amount of benefit you receive. **Please detail all of the changes below.**

Income one

- Is it a new income that has started? Yes No
- Is it an existing income that has stopped? Yes No
- Is it an existing income that has increased? Yes No
- Is it an existing income that has decreased? Yes No

What is the income?

Who is it paid to?

What is the date of the change?

Income two

- Is it a new income that has started? Yes No
- Is it an existing income that has stopped? Yes No
- Is it an existing income that has increased? Yes No
- Is it an existing income that has decreased? Yes No

What is the income?

Who is it paid to?

What is the date of the change?

If any of the incomes that have stopped were from the following list of benefits – Income Support, Jobseekers Allowance (income based), Employment Support Allowance (income related) – and the reason it ended is because you or your partner have started work, or your working hours have increased to 16 or more you may be entitled to an extended payment. Please complete section 5 to be considered for extended payments.

Don't forget to send us proof, please see the front sheet of this form for details.

Section four

Capital/savings changes

You need to complete this section if the savings, capital or investments belonging to you, or your partner have changed. You will need to tell us about these changes as they may affect the amount of benefit you receive.

First savings change

- | | | |
|---|------------------------------|-----------------------------|
| A new account/investment that has been opened | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account/investment has been closed | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account balance/investment value has increased | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account balance/ investment value has decreased | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

What is the account number?

Whose name is the account in?

What is the date of the change?

Second savings change

- | | | |
|---|------------------------------|-----------------------------|
| A new account/investment that has been opened | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account/investment has been closed | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account balance/investment value has increased | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account balance/ investment value has decreased | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

What is the account number?

Whose name is the account in?

What is the date of the change?

Third savings change

- | | | |
|---|------------------------------|-----------------------------|
| A new account/investment that has been opened | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account/investment has been closed | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account balance/investment value has increased | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| An existing account balance/ investment value has decreased | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

What is the account number?

Whose name is the account in?

What is the date of the change?

Please note – If savings, capital or investments belonging to you, your partner or a non-dependant adult living within your household have changed, you will need to provide us with evidence. See *Essential information to speed up your application* on the front sheet for details of the evidence you will need to supply and return this as soon as possible.

Section five

Tell us about your new job

If you or your partner have started work, you **may** be entitled to an extended payment.
Please complete this section. If you do not, you could lose benefit.

Do you want to continue to claim based on earnings? (Please tick below)

Yes If you answered yes, you will need to answer **all** of the questions on this page. You will need to provide proof of all income changes, please see the *Essential information* to speed up your application section on the front sheet for details of what proofs you will need to provide.

No If you answered no, please read the rest of this paragraph, sign and date this just below and then move onto section 6, you do not have to answer the rest of the questions in section 5. Saying no means that you are agreeing for your benefit to end when your extended payments finish, or if you are not entitled to extended payments, when your Income Support/Job Seekers Allowance or Employment Support Allowance stops.

Signed

Dated

1 Do you expect the new job/increase in hours to last at least five weeks?

Yes No

2 What date did the new job/increase in hours start?

3 How many hours will you/your partner work

(enter number of hours)

4 The new job is:

Working for an employer Name of employer:

Self employment we will contact you for more details about this income

Other (please specify)

5 Do you have any childcare expenses?

Yes If yes, please ensure you send proof of the expense from your childcare provider.

No

6 Do you intend to move within the next four weeks?

Yes please ensure you complete questions 7 and 8 below. In order for your claim to continue at your new address, you will need to pick up and complete the I've moved form. For details of how to get one of these forms, see Tell us what's changed in section 2 for information.

No please move into section 6.

7 Please tell us the address you will be moving to:

Address:

Postcode:

8 What date do you expect to move on?

Important

We cannot work out your benefit until you have completed and returned this form and the proofs related to your changes. As soon as you have completed this form please return it to City Hall. If you have the proofs we need, please send them too. If you do not have them yet, please return the form as soon as it is complete and send the proofs as soon as you have them.

This form can be returned by post to: Norwich City Council, City Hall, St Peters Street, Norwich NR2 1NH.

Attached to an email to: benefits@norwich.gov.uk

At the customer contact centre check-in desk at City Hall, or at your neighbourhood housing office.

We aim to serve in-person customers within 10 minutes. However, longer waiting times may be experienced during our peak times which are between midday and 3pm.

Declaration

Please read this declaration carefully before you sign and date it.

- 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 information that is incorrect or incomplete, I may be liable to prosecution or other action being taken.
- I agree that you will use the information I have provided to process my claim for housing benefit or council tax benefit, or both. You may check some of the information with other sources as allowed by the law.
- I understand that I may be prosecuted if I do not tell you about any change of circumstances.

Claimant signature

Date

Certificate of earnings

Claim reference number



NORWICH
City Council

We need some information about your employee's earnings. Please help your employee by filling this form in with the information requested as soon as possible. As this information is needed in order to work out what they will be earning in the future, please be as clear as possible about how their current income may change.

Employee's full name _____
Address _____ _____
_____ Postcode _____

Position held _____

Contracted hours _____

Rate of pay and frequency (hourly/per annum/pro rata) _____

Recent earnings:

Please complete table with the last five weeks wages or two months if paid monthly.

Week/month ending	Hours worked	Gross earnings	Credits of income tax	Income tax	National insurance	Employee pension contributions	Other details (eg SSP, etc)

Gross pay for year to date _____

If employment started fewer than two months ago give the date employment started _____

Date of last pay increase _____

Estimated future earnings:

Please complete the following table estimating what your employee will receive in their future payslips.

Estimated period that income will apply	Hours worked	Gross earnings	Income tax	National insurance	Employee pension contributions	Other details (eg SSP, etc)

Do you expect this to vary at all over the next two months? _____

If yes, please give details _____

National insurance number _____ Payroll number _____

Method of payment (eg BACS, cash, cheque) _____

Further information _____

Signed by employer/employer's representative _____

Date _____

Position held _____

Company's official stamp

If no stamp is available, please provide accompanying letter on headed paper.