



Payment to landlord request form

(For completion by the landlord or someone helping the tenant)

From June 2005, under the Local Housing Allowance (LHA) scheme, benefit payments will normally be sent direct to tenants.

If you think that sending direct payments to a tenant will cause them, or you, serious problems, please complete this form and return it to us.

Your name _____

Your address _____

Your relationship to the tenant, eg landlord, relative, friend, social worker, care worker, etc.

Tenant's name _____

Tenant's address _____

Claim ref (if known) _____

Please tick the box or boxes that apply and provide the evidence required.

Reason direct payment is a problem	Evidence required
<input type="checkbox"/> The tenant has learning disabilities which make it difficult for them to manage their finances	Written evidence from social worker, support worker, GP, etc
<input type="checkbox"/> The tenant has a medical condition or mental health problem which makes it difficult for them to manage their finances	Written evidence from social worker, support worker, GP, etc
<input type="checkbox"/> The tenant has serious difficulties with reading and writing	Written evidence from support organisations
<input type="checkbox"/> The tenant does not speak English	Written evidence from support organisations
<input type="checkbox"/> The tenant is dealing with addiction to drugs, alcohol or gambling	Written evidence from support organisations, GP, social services, care workers, hospital, etc
<input type="checkbox"/> The tenant is fleeing domestic violence	Written evidence from support organisations, social services, etc
<input type="checkbox"/> The tenant has recently been released from Prison	Written evidence from the prison or the probation service

Declaration

I declare that the information I have given in this form is correct and I authorise you to make enquiries to check any of the information or evidence I have provided.

I understand that you may need to contact the tenant and that you will need to tell them about the information I have given you.

Signature _____ Date _____



If you require this form in another language or format,
eg large print, audio cassette or Braille, please call
0344 980 3333 or email info@norwich.gov.uk