

**Hertfordshire Adviceline**

**BENEFIT ENTITLEMENT CHECKLIST**

**Not all questions have to be answered – only those relevant to you**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Client Ref No.** | |  | | | | | | **DATE** | |  | | | | |
| **Your Name** Mr/Mrs/Ms/Miss | |  | | | | | | **Partner Name**  Mr/Mrs/Ms/Miss | |  | | | | |
|  | | | | | |  | | | | |
| **Date of Birth** | |  | | | | | | **Date of Birth** | |  | | | | |
| **Disabled** | | Yes | | | No | | | **Disabled** | | Yes | | | No | |
|  | | | | | | | | | | | | | | |
| **EMPLOYMENT STATUS** | | | | | | | | | | | | | | |
|  | Full Time | | Part Time | Unemployed | | Self Employed | Retired | | Carer | | Student | Other | | Hours Worked |
| You |  | |  |  | |  |  | |  | |  |  | |  |
| Partner |  | |  |  | |  |  | |  | |  |  | |  |

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| **HOUSING STATUS** | | | | | | | | | | | |
| Owner Occupier |  | Housing  Association |  | Living  with Relatives |  | Private Rented |  | Local  Authority Rented |  | Other |  |

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| **HOUSEHOLD DETAILS: OTHER PEOPLE LIVING IN YOUR HOUSEHOLD** | | | | | | |
| Name | M/F | Date of Birth | Relationship | Dependant  Yes/No | Non Dependant Earnings/Benefits per week (£) | Disabled  Yes / No |
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| **REGISTERED CHILDCARE COSTS? Yes/ No** | | | | | |
| Amount £ | | | Frequency | | |
|  | | | | | |
|  | | | | | |
| **RENT** (As per Tenancy Agreement) | | **MORTGAGE** | | | **COUNCIL TAX**  (Annual Amount) |
| Weekly/Monthly | | Date Taken Out | |  |  |
| **£** | | Amount Outstanding | | **£** | **£** |
| Number of bedrooms |  | Interest Rate | | **%** |  |
|  | | | | | |

**Please turn over**

|  |
| --- |
| **INCOME** |
| Enter amount and frequency. Frequency may be weekly, fortnightly, monthly, four weekly, quarterly, half yearly or annually. |

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| **Benefits for Household** | **Amount** | **Frequency** |
| Job Seekers Allowance *(Income Based)* | **£** |  |
| Job Seekers Allowance *(Contribution Based*) | **£** |  |
| Income Support | **£** |  |
| Child Benefit | **£** |  |
| Working Tax Credit | **£** |  |
| Child Tax Credit | **£** |  |
| Employment Support Allowance/ Incapacity Benefit | **£** |  |
| SSP | **£** |  |
| DLA/Attendance Allowance/PIP | **£** |  |
| Carers Allowance | **£** |  |
| Housing Benefit | **£** |  |
| Council Tax Support | **£** |  |
| Statutory Maternity Pay/Maternity Allowance/Adoption Pay | **£** |  |
| Universal Credit | **£** |  |
| Other (please specify) | **£** |  |

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| --- | --- | --- |
| **Salary** | **Amount** | **Frequency** |
| Your Gross Earnings | **£** |  |
| Your Take Home Pay | **£** |  |
| Your Other Earnings | **£** |  |
| Partner’s Gross Earnings | **£** |  |
| Partner’s Take Home Pay | **£** |  |
| Partner’s Other Earnings | **£** |  |
|  |  |  |
| **Other Income** | | |
| Maintenance/Child Support | **£** |  |
| Boarders or Lodgers | **£** |  |
| Non-dependant contributions | **£** |  |
| Student Loan/Grant | **£** |  |
| Other | **£** |  |
|  |  |  |
| **Pensions** | | |
| Your State Pension | **£** |  |
| Your Private or Work Pension | **£** |  |
| Pension Credit | **£** |  |
| Partner’s State Pension | **£** |  |
| Partner’s Private or Work Pension | **£** |  |
| Other | **£** |  |
|  |  |  |

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| --- | --- | --- | --- |
| **For Tax Credits we need details of previous year’s income** | | | |
| **GROSS ANNUAL INCOME** | | | |
| Previous Year | | Previous Year | |
| You | £ | Partner | £ |

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| --- | --- | --- |
| **CAPITAL** | | |
| Please enter the current value and amount outstanding | Current Value | Mortgage or Finance Outstanding |
| House or Flat | **£** | **£** |
| Savings & Investments | **£** | **£** |
| Other | **£** | **£** |