

UNCLAIMED BENEFIT ENTITLEMENTS - LET US CHECK

CLIENT	
SURNAME	.....
FIRST NAMES	.....
Date of Birth	.....
National Insurance No:	.....

PARTNER	
SURNAME	.....
FIRST NAMES	.....
Date of Birth	.....
National Insurance No:	.....

ADDRESS	.....

POSTCODE	.....
TELEPHONE No	.....
EMAIL	.....

INSTRUCTIONS FOR COMPLETION

- Please state the income and savings for both you and your partner(if you have one)
- In the relevant income box state the amount you receive AND the period it is paid i.e. weekly, 4 weekly, monthly or yearly
- If you are currently in receipt of **Universal Credit**, please let us know the date you first made your claim. **Date:** - / / /

Income	Client	Partner
State Retirement Pension	£..... every	£..... every
Private Pensions Net (after tax)	£..... every	£..... every
Pension Credit / Income Support	£..... every	£..... every
JSA	£..... every	£..... every
ESA:- Phase:- Assessment / Main Group:- Work / Support	£..... every	£..... every
Attendance Allowance	£..... every	£..... every
Disability Living Allowance		
Care	£..... every	£..... every
Mobility	£..... every	£..... every
Personal Independence Payment		
Daily Living	£..... every	£..... every
Mobility	£..... every	£..... every
Other Benefits - please state	£..... every	£..... every
Earnings (before Tax & NI)	£..... every	£..... every
Pension contributions.	£..... every	£..... every
Hours worked:-		
Does anyone claim carers allowance for caring for you?	YES / NO	YES / NO
Do you care for someone who is sick or disabled?	YES / NO	YES / NO
Are you ill or disabled but not claiming benefit?	YES / NO	YES / NO

Only complete this section if working more than 16 hours per week

Tax year April 2021–April 2022	Annual Salary	Annual Pension Contribution
Client	£	£
Partner	£	£
Tax year April 2022–April 2023	Weekly/Monthly Salary	Weekly/Monthly pension ctrb
Client	£	£
Partner	£	£

Total Savings/Capital	Client	Partner
Include Current bank a/c, savings, ISA, bonds, Premium bonds, stocks, shares etc.	£	£
Do you own other land or property? (Estimated value of property you don't occupy)	£	£

COUNCIL TAX

Your Council Tax Band: **please circle**

A B C D E F G H

Do you get Council Tax Benefit? YES / NO

How much Council Tax do you pay per year?

£

(Please tell us your Council Tax liability after any discounts and reductions but before Council Tax Support is taken off.)

How many bedrooms does your property have?

.....

RENT

Do you get Housing Benefit YES / NO

(If your current Housing Benefit claim started before April 2008, or you are in one of the exempt groups, Local Housing Allowance rules don't apply and your Housing Benefit will be based on your eligible rent. **If you have been given a rent officer's decision on your current claim, please enter this amount as your rent.**)

Weekly rent payable.....

£.....

Heating charges **only** if included in your rent

£.....

Weekly service charge (if applicable)

£.....

Circle which applies for your landlord

Private Council
Riviera Housing or similar

Does anyone else live in your house in addition to your partner? YES / NO

If yes, this may affect the assessment of entitlement to Housing and Council Tax benefits.

Non dependants

For each non-dependent state:

- age
- gross weekly income if working 16+ hours per week
- benefits state which benefit and amount
- if a non-dependant has been certified as sight impaired or blind

Equalities and Diversity monitoring questionnaire

Monitoring the diversity of our clients is an essential part of Age UK Torbay's commitment to equality and diversity.. It is entirely confidential and will not be used for any purpose other than monitoring and statistical reporting.

1. Date of birth _____

2. Gender Male Female

3. Ethnicity – please tick the most appropriate box below to describe your ethnic or origin. (this question helps us to identify the ethnic diversity of those applying for vacancies within the organisation. The classifications are those used in the 2001 census, and are recommended by the Commission for Racial Equality.

White:

British

Irish

Other White

Mixed:

White and Black Caribbean

White and Black African

White and Asian

Other Mixed

Asian or Asian British:

Indian

Pakistani

Bangladeshi

Other Asian

Black or Black British:

Black Caribbean

Black African

Other Black

Chinese or other ethnic Group:

Chinese

Other ethnic group

4. Do you consider yourself to have a disability?

Yes

No

Thank you for your co-operation in completing this questionnaire

CLIENT CONSENT AND DATA PROTECTION

Data Protection Act 1998/The General Data Protection Regulation (EU) 2016/679 (GDPR)

In order to help you we need to store information about you, which may include sensitive data. The law says we must get your consent to do this. Everything will be treated confidentially.

In order to ensure the work we undertake on your behalf meets the standards required by external agencies, we may need to make your file available to such agencies.

I give my consent to external auditors seeing my file as part of any quality checks being carried out.

Because we may need to speak to other people on your behalf, we need your permission.

I give my consent to Age UK Torbay to act on my behalf in relation to my claim for Benefit entitlement.

I give my consent to Age UK Torbay to act on my behalf with relevant third parties in relation to other non - benefit related matters.

I give consent to Age UK Torbay to record my personal information and to contact third parties in relation to my claim for Benefit Entitlement.

If you agree with all of the above, please sign below, in the case of a joint application we also require the consent of the partner.

Name of Client..... NI.....

Signature of Client..... Date.....

Name of Partner..... NI.....

Signature of Partner..... Date.....

You have the right to withdraw consent at any time, and/or ask for details of the information we store on your behalf.

If you would like a copy of our Privacy Policy please contact us or visit our website - <https://www.ageuk.org.uk/torbay/privacy-policy/>

The data controller is Age UK Torbay, 12 Dendy Road, Paignton, Devon. TQ4 5DB
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