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**UNCLAIMED BENEFIT ENTITLEMENTS**

**LET US CHECK**

**ADDRESS ……………………………………………………………………...**

**……………………………………………………………………….**

**………………………………………………………………………**

**POSTCODE …………………………………………………..**

**TELEPHONE No ……………………………………………….….**

**CLIENT**

**SURNAME …………………………..…..**

**FIRST NAMES ……………………………**

**Date of Birth …………………………....….**

**National Insurance No:**

**………………………………………………….**

**PARTNER**

**SURNAME …………………………...**

**FIRST NAMES ……………………………**

**Date of Birth …………………………....**

**National Insurance No:**

**………………………………………………….**

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

|  |  |  |
| --- | --- | --- |
| **Income** | **Client** | **Partner** |
| State Retirement Pension  Private Pensions Gross  Tax paid on Private Pensions  Pension Credit / Income Support  JSA  ESA:- Phase:- Assessment / Main  Group:- Work / Support  Attendance Allowance  Disability Living Allowance  Care  Mobility  Personal Independence Payment  Daily Living  Mobility  Other Benefits - please state  Earnings Gross  Hours worked:- ……….. | £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every …………  £……….. every ………… | £……….. every ………… |

|  |  |  |
| --- | --- | --- |
| **Only complete this section If more than 16 hours per week please** | | |
| Tax year April 2017–April 2018 | Annual wage | Annual pension |
| Client | £ | £ |
| Partner | £ | £ |
| Tax year April 2018–April 2019 | Weekly/Monthly wage | Weekly/Monthly pension |
| Client | £ | £ |
| Partner | £ | £ |

Total Savings/Capital £…………

(include Current Bank a/c, Savings

Bonds, ISAs,Premium Bonds,

Stocks, Shares etc

Do you own land or property? YES / NO

(other than house you 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

If yes how much

How much Council Tax do you pay per year?

(This is the amount after deducting council £ ……………………

tax benefit and/or single person discount)

Annual Council Tax before discounts £……………………..

**RENT**

Weekly rent payable………………………... £…………………….

Do you get Housing Benefit YES / NO

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

Did your tenancy start before 15.01.1989 YES / NO

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

your partner?

If yes, this may affect the assessment of entitlement to Housing and Council Tax benefits. We will contact you for more details.

**COMMENTS:** Please use this box (continue over if there is insufficient space) to record income and outgoings and for any other questions / information you need to supply.

|  |  |  |
| --- | --- | --- |
| EARNINGS | | |
| Tax year | Annual wage earnings | Annual pension earnings |
| April 2017 – April 2018 | £ | £ |
|  |  |  |
| Tax year | Weekly/Monthly wage | Weekly/Monthly pension |
| April 2018 – April 2019 |  |  |
| Weekly hours worked | | |

The above information will allow us to work out any entitlement to Working Tax Credits

Age UK Torbay

Information & Advice Dept

12 Dendy Road

Paignton

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