Deputy Chief Executive’s Department,

Council Offices,

Foster Avenue,

Beeston, Nottingham. NG9 1AB

Telephone: 0115 917 7777

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E-Mail: [benefits@broxtowe.gov.uk](mailto:benefits@broxtowe.gov.uk)

Website: [www.broxtowe.gov.uk](http://www.broxtowe.gov.uk/)

Date Sent:

# DISCRETIONARY HOUSING PAYMENT QUESTIONNAIRE

## Personal Details

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Postcode: |  |
| Tenancy start date: |  |
| Tenancy end date: |  |
| Number of Bedrooms |  |
| Date of Birth: |  |
| Reference: |  |
| Email Address: |  |
| Telephone no: |  |

Current weekly rent: £\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Housing Benefit /Universal Credit Housing Element: £\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Shortfall: £\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you require help with Rent in Advance/ Rent Deposit to move into a new property? yes  no

If yes, how much do you require: £\_\_\_\_\_\_\_\_\_\_

\*\*\*\*Please provide confirmation of this amount\*\*\*\*

\*\*\*\*Please also note an application for Rent In Advance/Rent Deposit can only be made if you are in receipt of Housing Benefit or Universal Credit with the Housing Element for your current property\*\*\*\*

Have you contacted the Local Council and enquired about the Deposit Guarantee Scheme?

yes  no

If yes, please advise what the outcome of this enquiry?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, please advise why not?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* DHPCLAIM\* \* \*

Previous address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why did you move?

Was this a council property? yes  no

What was your weekly rent? £ \_\_\_\_\_\_\_

Did you receive housing benefit? yes  no

If yes, how much? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did you ask how much Housing Benefit/Universal Credit Housing Element you may receive or look at the Local Housing Allowance rates before moving?

yes  no

If no, why not?

Have you tried to negotiate a lower rent with your landlord? yes  no

If yes, what was the outcome? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How much notice must you give your landlord? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your current rent arrears? £ ­ \_\_\_\_\_\_\_\_

(Please provide confirmation of this amount dated within the last month)

Is there a risk of you becoming homeless? yes  no

Have you been served with a notice to quit? yes  no

Please provide a copy of this.

If yes, what date must you leave the property by? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you considered moving to cheaper accommodation? yes  no

If no, please advise why not. If yes, what have you done?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you on a Council/Housing Association waiting list? yes  no

If you are registered on the Councils Housing Waiting list have you been issued with a bidding number and are you actively bidding on properties? yes  no

If no, why not?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been offered any properties? yes  no

If yes, why did you not accept the property?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Details of Relationships and Dependents

Is there anyone else who could help you with the rent? yes  no

If yes, please state who:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does anyone else live with you? (e.g. adult children/lodgers) yes  no

If yes, please state their name, date of birth and weekly income:

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ £

2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ £

3. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ £

4. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ £

How much do they contribute towards your rent/household expenses?

1. £ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per week 3. £­\_\_\_\_\_\_\_\_\_\_\_\_\_ per week

2. £ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per week 4. £\_\_\_\_\_\_\_\_\_\_\_\_\_ per week

Are they willing to help further? yes  no

If no, why not?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If they do not contribute towards the rent/household expenses, please advise why not?

If you have children, where are they going to nursery/school?

1.

2.

3.

4.

If any of your children go to nursery, do you have to pay any childcare costs? yes  no

If yes, please give details and provide confirmation:

Do you or any of your family have disabilities/health problems? yes  no

If yes, please state below who has the disabilities/health problems and what they are;

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please also state if these disabilities/health problems require you to pay any Care Costs i.e. home-help, overnight carer etc. If so, please state the amounts and what they are for.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has the property been adapted for these disabilities? yes  no

Has there been a death in your home in the last 12 months? yes  no

If yes, please state their relationship to you:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why did you choose your present accommodation?

(e.g. close to family, shops etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## PLEASE GIVE DETAILS OF YOUR INCOME:

All benefits should be entered in full and will be taken into account when considering your application. Any deductions (e.g. social fund loans) should be listed as expenses. Please specify the frequency of payments e.g., weekly, monthly etc.

| ITEM | AMOUNT £ | FREQUENCY | OFFICE USE |
| --- | --- | --- | --- |
| Net earnings (after income tax and national insurance) |  |  |  |
| Jobseeker’s Allowance |  |  |  |
| Universal Credit \* |  |  |  |
| Income Support |  |  |  |
| Retirement pension – self |  |  |  |
| Retirement pension – partner |  |  |  |
| Pension Credit |  |  |  |
| Private pension |  |  |  |
| Widowed Mothers Allowance |  |  |  |
| Disability Living Allowance |  |  |  |
| Invalid Care Allowance |  |  |  |
| Personal Independence Payment |  |  |  |
| Employment & Support Allowance / Incapacity Benefit |  |  |  |
| Child Benefit |  |  |  |
| Working Tax Credit |  |  |  |
| Child Tax Credit |  |  |  |
| Maternity Benefit |  |  |  |
| Statutory sick pay |  |  |  |
| Maintenance received |  |  |  |
| Home Income Plan |  |  |  |
| Student grant(s) |  |  |  |
| Charitable/voluntary payment |  |  |  |
| Other  (please specify) |  |  |  |

**\***If you are in receipt of Universal Credit please send in confirmation of your current tenancy agreement and a copy of your Universal Credit Award with the Housing Element Award dated within the last month. Please note it may be necessary to provide additional Universal Credit information once your application has been received \*

Please state the total value of all your savings and investments e.g. bank, building society etc.:

Total value: £­­\_\_\_\_\_\_\_\_\_\_\_

## PLEASE GIVE DETAILS BELOW OF ALL YOUR EXPENSES:

This is your opportunity to give full details of where you spend the money you receive.

It is important that you think about this carefully and are as accurate as possible.

Where you do not have actual figures please give your best estimate e.g. if you have not yet had a gas bill.

Please specify amount and frequency of payments e.g., weekly, monthly etc.

| HOUSEHOLD | AMOUNT £ | FREQUENCY | OFFICE USE |
| --- | --- | --- | --- |
| Rent (after benefit) |  |  |  |
| Council tax (after benefit) |  |  |  |
| House insurance |  |  |  |
| Contents insurance |  |  |  |
| Water rates |  |  |  |
| Electricity |  |  |  |
| Gas |  |  |  |
| Solid fuel heating |  |  |  |
| Telephone - landline |  |  |  |
| Telephone - mobile |  |  |  |
| Food |  |  |  |
| Household items e.g. washing powder, cleaners |  |  |  |
| Clothing |  |  |  |
| Care needs – please specify: e.g. personal care, cleaning, gardening, costs to help with everyday living etc. |  |  |  |
| Other personal expenses – please specify: |  |  |  |

| TRANSPORT | AMOUNT£ | FREQUENCY | OFFICE USE |
| --- | --- | --- | --- |
| Bus fares |  |  |  |
| Petrol |  |  |  |
| Motor vehicle tax |  |  |  |
| Motor vehicle insurance |  |  |  |

| FINANCIAL MATTERS |  | | |
| --- | --- | --- | --- |
| Hire purchase |  |  |  |
| Bank loan |  |  |  |
| Overdraft |  |  |  |
| Credit card repayments (minimum amount due) |  |  |  |
| Maintenance payment order |  |  |  |
| County court order |  |  |  |
| Other fines |  |  |  |
| Social Fund loan repayment |  |  |  |
| Life insurance |  |  |  |
| Catalogue payments |  |  |  |

| ENTERTAINMENT |  | | |
| --- | --- | --- | --- |
| Television rental |  |  |  |
| Cable/satellite television |  |  |  |
| Television licence |  |  |  |
| Cinema/theatre etc. |  |  |  |

| OTHERS NOT INCLUDED ABOVE |  | | |
| --- | --- | --- | --- |
| Please specify: |  |  |  |

## ARREARS

If you are behind with any of the above payments (not including your rent) and there is an amount included in the figures above, please give further details and provide confirmation of these arrears dated within the last month and confirm when the last payment/s are due.

| ITEM | BALANCE (£) | PAYMENT £) | FREQUENCY | LAST PAYMENT |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

If you have other debts which you have not as yet made arrangement/s for, please give full details below and provide confirmation of the debt/s dated within the last month:

| ITEM | TOTAL DUE (£) |
| --- | --- |
|  |  |
|  |  |
|  |  |

Please provide the bank account details which may be used if a payment is awarded:

Account Name: ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sort Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*Please be aware, if a payment is awarded, it may be made directly to your landlord \*\*

## ABOUT YOUR RENT

If you are in arrears with your rent, please give a full explanation below as to why this has happened. Also confirm whether the arrears are from your previous or current tenancy.

Amount of rent arrears: £ \_\_\_\_\_\_\_\_

Explanation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Using the space below, tell us the hardship you will suffer if you are not awarded any extra money towards the payment of your rent. Also, please give details of any exceptional circumstances you consider currently exist.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A Discretionary Housing Payment is generally a short term payment.

How long do you consider you will require this type of payment for?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

And, if you have not considered moving, please advise how you consider you will be able to sustain the tenancy in the long term from your own income without additional financial help?

Please enter in the space below any other information you would like to supply in support of your claim.

It may be necessary to contact or share information of your application with your landlord and notify them if an award is made.

Do you agree to this? yes  no

It may be necessary to contact the Department for Work & Pensions and other organisations about your application.

Do you agree to this? yes  no

It may be necessary to refer you to the Citizens Advice Bureau and/or the Council’s Financial Inclusion Officer for budgeting/debt advice before a decision can be made on your application.

Do you agree to this? yes  no

## Please Note:

* Payments are discretionary.
* If you wish to provide further information in support of your application, please enclose this when returning your application.
* Evidence/further information may be requested for any details/expenses given within your application. If this information is not provided within the notified timescales, your application maybe withdrawn.

## Obtaining further financial advice

If you are struggling to pay day-to-day bills, or keep up with loan repayments or other financial commitments and require further help and advice, the Money Advice Service (MAS), is a free, confidential and impartial independent on-line service set up by the government to help people manage their money better and includes information on where local advice can be obtained. To access this online service please use the link shown below;

[www.moneyadviceservice.org.uk](http://www.moneyadviceservice.org.uk/)

If you do not have internet access, please contact the Council for further assistance to use this service.

Please sign and date the declaration.

I confirm that the information given is correct to the best of my knowledge.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Please return your completed application form and supporting information/evidence to:

Quality & Control Section

Deputy Chief Executive’s Department

Broxtowe Borough Council

Council Offices

Foster Avenue

Beeston

Nottingham

NG9 1AB

Or email the completed form to : [Benefits@broxtowe.gov.uk](mailto:Benefits@broxtowe.gov.uk)

## Privacy Notice

We will only use the data supplied in accordance with the Data Protection Act (2018). For information on how we process and store your personal data see our privacy notice at <https://www.broxtowe.gov.uk/about-the-council/communications-web-social-media/legal-privacy/>