EXAMPLE HOUSING BENEFIT PROTOCOL

Severe Weather Provision – Rent

Housing Benefit will cover the cost of accommodation for rough sleepers accommodated due to severe weather. In order to access this all clients placed will need to complete a claim form. The rent accounts will be administered by ----------- at ----------- City Council.

The severe weather accommodation falls within the definition of hostel in regulation 2 of The Housing Benefit Regulations 2006. The clients are therefore exempted from the requirement to provide evidence of their National Insurance number and full verification of their circumstances. In most cases a shortened claim form will be sufficient to make a successful claim to Housing Benefit. If the client’s National Insurance number is known this will allow speedy determination of the claim.

The shortened form is intended for completion by single homeless people with no dependants or alternative accommodation. If clients have more complex circumstances a full Housing Benefit form may be required. You can contact the Benefit Support Team on phone------------------------ or email................ during office hours to discuss individual cases.

Procedure

- Shortened claim forms (attached) **must** be completed and emailed to ----------- on the day of placement.
- Where possible staff should assist the client in completing the shortened housing benefit claim form.
- The signed claim forms, and any supporting evidence **must** be brought to the Civic Centre marked for the attention of the housing benefit department.
- An email **must** be sent to ----------------- when the placement ends. Failure to do this will result in the client continuing to be charged rent.
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Surname:</td>
<td></td>
</tr>
<tr>
<td>2. Forename(s):</td>
<td></td>
</tr>
<tr>
<td>3. Date of birth</td>
<td>NINo</td>
</tr>
<tr>
<td>4. Current Housing Situation e.g. No Fixed Abode</td>
<td></td>
</tr>
<tr>
<td>5. Address Moving to:</td>
<td>Bedspace at Gabriel House, Smythen Street, EX1 1BN</td>
</tr>
<tr>
<td>6. Date accommodated:</td>
<td></td>
</tr>
<tr>
<td>7. How long have you lived in the UK?</td>
<td></td>
</tr>
<tr>
<td>8. Are you a full time student?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>Daily Rent</td>
<td>£16.30</td>
</tr>
</tbody>
</table>

1. Do you receive Income Based Job Seekers Allowance, Income Support,
Income Related Employment and Support Allowance or State Pension Credit?

Yes ☐ No ☐

*If yes please read and sign the declaration below. If no go to question 2.*

2. Do you have any other income from another source (e.g. wages, self-
employed income, benefits, pensions etc)?

Yes ☐ No ☐

*If yes please tell us about this income. If no go to question 3.*

**What is the income?**

**Who is this income from (e.g. employer details / pension provider)?**

**How often is it paid?**

**How much is it?**

3. Do you have money in bank, building society or Post Office accounts?

Yes ☐ No ☐

*If yes please tell us about this money. If no go to question 4.*
How many accounts do you have?

How much money is in them?

4. Do you have any other capital (e.g. stocks, shares, property etc)?

Yes □ No □

If yes please tell us about this capital. If no please read and sign the declaration.

What is it?

What is the value of the capital?

Declaration

Please read the statements carefully & sign below. We cannot deal with your claim if you haven't signed this declaration.

I understand the following:

The information I have given on this form is correct and complete. If I give information that is incorrect or incomplete, you may take action against me; this could include prosecution.

You will use the information I have provided to process my claim for Housing Benefit.

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City Council is under a duty to protect the public funds it administers, and to this end, may use information I provide for the prevention and detection of crime. It may also share this information with other bodies responsible for auditing or administering public funds, who may in turn share the information with organisations including credit reference agencies, to check the accuracy of the information, prevent or detect crime and to protect public funds.

I know I must let City Council Housing Benefits department know about any change to my household or financial circumstances.

Signed:……………………………………………………… Dated:…………

If support worker has assisted with completion of claim please give details.

Signature

Name

Position

Telephone number