Nil income form – Help with rent and council tax

Please, only complete this form if you are; not receiving benefits, have little or no income, or if you’re getting payments (loans, contributions) from friends and family to help you get by.

1. Identity

Housing benefit reference number
Council tax reduction scheme reference number
Full name
Date of birth
National insurance number
Current address
Postcode

2. Day-to-day living expenses and future circumstances

How are you meeting your day-to-day living expenses, and what evidence can you provide to show this?

Are you expecting your circumstances to change in the near future?
Yes ☐
No ☐
If yes, please tell us how.

Have you applied for a department of work and pensions (DWP) benefit, such as job seeker’s allowance, income support, or employment support and allowance?
Yes ☐
No ☐

If yes, which benefit/s have you applied for?

If yes, are you waiting for the benefit decision?
Yes ☐
No ☐

If you answered yes, you need to contact the DWP to make a short term benefit advances application (STBA). You can do this by contacting the Jobcentre Plus contact centre or an adviser in your local Jobcentre. They will then send an STBA request to the benefit centre to be decided.

Phone Jobcentre Plus:
Telephone: 0800 055 6688
Textphone: 0800 023 4888
3. History of benefit applications

Have you been refused benefit?
Yes ☐
No ☐

If yes, have you been advised to apply for something else?
Yes ☐
No ☐

If yes, please give details.

If you have had your benefit claim turned down, have you made an appeal against this decision?
Yes ☐
No ☐

If you continue to have little or no income, but are not claiming a DWP benefit, please tell us why?

4. Sanctions

The penalty for not following the rules of the benefit you are claiming can be that you lose benefit for a certain length of time. The name used for these penalties is sanctions.

Has your claim been sanctioned because you have not met your work conditions? You will have received a letter about this if you have?
Has your benefit been sanctioned?
Yes ☐
No ☐

If yes, please give details

How long has your claim been sanctioned for?

5. Hardship payments

Are you: (tick the boxes that apply to you)
☐ pregnant
☐ looking after children
☐ single and looking after a 16 or 17 year old
☐ disabled or have a long term physical medical condition
☐ caring for someone who is long term sick or disabled
☐ a young person who has left local authority care in the last 3 years
☐ aged 16 or 17

If you have ticked any of these boxes, you should apply for a hardship payment.
A hardship claim form is available from the job centre

Have you already applied for a hardship payment?
Yes ☐
No ☐

How long will your hardship payment take to come through?
Please include a copy of the letter you have received from the DWP about this
6. Support from other places

If someone else is supporting you with money to live on, are you expected to repay this money?
Yes ☐
No ☐

If you are expected to repay this money, what arrangements are in place to do this?

Is the money that you are receiving from the third party a set amount paid on a regular basis?
Yes ☐
No ☐

How much do you receive?
How often do you receive it?
How long will you continue to receive the income?

7. Capital and savings

Do you have any capital savings or investments in a bank, building society, or post office account?
Yes ☐
No ☐

Please tell us about all of your accounts/shares below.

If you want to give any further details, please write on a separate sheet and enclose it with this form.

Please read the Data Protection Privacy statement overleaf and complete the declaration
Data Protection Privacy Statement
Any personal information that you provide will be processed in accordance with current Data Protection laws. It will be used by Leicester City Council and our partners to deliver and improve services and fulfill our legal duties. We will not disclose any personal information to anyone else unless required or allowed to do so by law. Read more about how we use personal data in our Fair Processing / Privacy Notice on our website: leicester.gov.uk/privacy.

8. Declaration

• When my income changes, I will write to you straight away.
• If there are any changes in my circumstances I will write to you straight away so that you can work out my benefit or discount or reduction again.
• I will tell you if any of the details on any of the letters you send me are incorrect.
• If I receive a benefit, discount or reduction I am not entitled to because I made a false statement or failed to declare changes in my circumstance, I may be committing fraud.
• I understand that the council can ask me to pay back money I have received that I am not entitled to and I could be prosecuted for keeping it.
• The information I have given is true and correct. If any of the information is found to be incorrect or incomplete, then Leicester City Council may take action against me and I understand I could be prosecuted.

Name:                                               Signature:
Date:
*************************************************
Please sign and date the form below
(if you have a partner they should also sign and date below)

You
Signature:
Date:

Your partner
Signature:
Date:

If someone else has filled in this form on your behalf please say why and ask them to sign and date this form.

Signature:
Date:

Reason for filling in this form:

If you have any more questions, please contact: 0116 4541006 or visit leicester.gov.uk/housingbenefit