

Application for payment of Local Housing Allowance to your landlord

What is this form for?

The Local Housing Allowance will normally be paid to you however there are circumstances when we can pay the Local Housing Allowance to your landlord on your behalf.

The information you give in this form will help us to decide if it is appropriate to pay your landlord. You may not need to complete all the questions in the form but please try to give as much information and evidence as possible.

Who should complete this form?

Where possible the tenant should complete the form but it can also be completed by

- Family or friends
- The main carer
- A support worker
- An advice or welfare agency
- The landlord or letting agent
- A person who works for another service within the Council

The tenant must always sign the form and be fully aware that it may lead to payment of the Local Housing Allowance being made to the landlord to cover the rent.

If the tenant has not signed the form, the reasons why must be provided in the declaration. For ease the questions are asked in the first person.

What should be sent with this form?

Written evidence to support the information in this form, this can be from various sources depending on the person's circumstances, for example.

- Welfare groups
- Care workers
- Social Services
- Department for Works and Pensions (DWP)
- General Practitioner (GP)
- Hospital
- Courts
- Probation Officers
- The tenants' family and friends
- Landlord or letting agent

Please note this list is not exhaustive and evidence from other sources may also be accepted.



1. Name of the tenant:
Housing Benefit reference number:

2. Address and telephone number of the tenant:
.....
.....

3. Name of the person completing the form (if not the tenant):
.....

4. Contact address and telephone number if the above is not the tenant:
.....
.....
.....

5. If the tenant is not completing the form please tell us your relationship to the tenant and the reason why you are completing the form on their behalf:
.....
.....
.....

Details about the tenant's circumstances

6. Tell us about any learning difficulties that may cause you problems in paying your rent:
.....
.....
.....

7. Tell us about any medical conditions or disabilities that may cause you difficulties in paying your rent:
.....
.....
.....

8. Tell us about any mental health problems that may hinder you paying your rent:
.....
.....
.....

9. Are you dealing with an addiction to drugs, alcohol or gambling? If yes please give details:
.....
.....
.....

10. Have you encountered difficulties managing your affairs because you need assistance with understanding the English Language? If yes please give details:

.....

.....

.....

11. Have you recently experienced changes in your lifestyle that mean you are temporarily unable to deal with your financial affairs? If yes please give details:

.....

.....

.....

12. Do you have rent arrears? yes no

If yes please state how much are your rent arrears are £

and the period they cover from to

Has your landlord taken any action to recover the rent arrears e.g. Court action, Notice of seeking possession, Notice to quit, sent you a letter, set-up a payment plan, please specify and provide any proof of action taken

.....

.....

.....

13: Have you had any previous problems paying your rent? If yes please give details

.....

.....

.....

14. Are you having deductions made from your Income Support or Jobseekers' Allowance to pay rent arrears?

yes no please provide proof

15. Do you currently receive any ongoing support from an agency that can help you organise your rent payments and finances? If yes please give details:

.....

.....

.....

16. Is there anyone else that can help you to manage your financial affairs? **If yes please give details:**

.....

.....

.....

.....

17. Is there anything else that you think we need to know?
.....
.....
.....

18. How long do you think that payments will need to be made to your landlord?

- 12 weeks 26 weeks 52 weeks or more

19. Tenant's declaration

Please sign and date the form below. If you have a partner they should also sign below

- the information given in this form is true and correct.
- I agree for my Local Housing Allowance to be paid directly to my landlord,
up to the amount of my contractual rent.
- I will contact the Benefit Service should I feel able to receive my benefit directly.

Your signature Partner's signature

Date

20. Declaration for person completing the form, if not the tenant.

If the tenant has not signed this form, please give the reason why

- The information is true and correct.
- I believe it to be in the best interests of the tenant to pay the Local Housing Allowance,
up to the amount of the contractual rent, directly to the landlord.
- I have read and understand the declaration.

Name Signature

Date

Further information

If you have any enquiries or need any help understanding this form please

Telephone: 01274 432772

Email: benefits.service@bradford.gov.uk

Visit: www.bradford.gov.uk/benefits

Office use

Decision Review Date

Officer's name Date