Housing Benefit and Council Tax Support Self-employed Income Form



This form is for claimants who have claimed Housing Benefit and/or Council Tax Support, and who are self-employed.

This form should be completed by the self-employed person within the household. Please complete one of these forms for each business.

Section I: About you

Full name:

Address:

Postcode:			
Claim reference:		NI Number:	
Phone number:		Email address:	
How many businesses are you involved in?			
Section 2: About your business	5		
Name and Address of your business:			
If you run your business from your home a number of hours that you spend working a	•	ase describe the activities undertaken and the	
What type of business is it?			
Is your business an internet business?	Yes/No I	If yes, what is the website address?	
Please give a brief description of your norm	nal daily wo	rk:	
When did you start the business?		When is the start date of your current financial year DD / MM / YYYY	
What date did you register with HMRC as employed?	self-	HMRC registration number:	

Average number of hours worked each week:		Do you have any employees, if so how many?
How do you advertise and attract potential cus	tomers to y	your business?
Are you the Director of the company or business?	Yes/No	If 'Yes' please go straight to Section 3
Do you pay into a Private Pension scheme?	Yes/No	If 'Yes' please tell us how much you pay and how often £ Weekly/Monthly/Annually Please provide proof with this form
Is your business a Partnership?	Yes/No	
If 'Yes' tell us how many Partners there are in the business:	What percentage of profit is yours? %	
Are any of the partners on the payroll?	Yes/No	If 'yes' how much are they paid? £ Weekly/monthly
What are the names and addresses of the other	r partners?	

Please go to Section 4, unless you are a Company Director

Section 3: Special Business ArrangementsFor completion by Company Directors of Limited Companies only

Company Directors are not considered to be self-employed under Housing Benefit or Council Tax Support rules.

Do you take a salary from the net profit of the Company?	Yes/No	If 'yes' how much is your annual salary before any Tax or National Insurance are deducted?
		£
We need to see your wage slips, if you rece	ive these	
If a listed Company do you receive any share or dividend income?	Yes/No	If 'yes' what is the value of your share dividend per annum
		£
What is the capital value of your Company?		
		£
We need to see the business profit and loss accounts and balance sheets		

If you are a Company Director, please go straight to the declaration on page 6

Section 4: Business account details

If you have annual accounts prepared by an accountant, complete their details below and enclose a copy of your latest profit and loss account.

Accountants name and address:	
Now go to Section 5	

If you have been trading for less than three months, we will need an estimate of your income and expenses for your first three months of trading. Please complete details using the tables below.

If you do not use an accountant for your business, please complete your actual income and expenses in the tables below

Please confirm which peri	od of trading you	ı are giving figures for:	
From DD/ MM / Y	YYY to	DD/MM / YYYY	

4a: Income from self-employed work

Type of Income	Actual Income	Estimated
		Income (only complete this section if you have been trading for less than three months)
Money received for sale of goods, produce and work done	£	£
Rent received (if any part of your business involves renting property out to others)	£	£
Goods from the business for your own use (cost value)	£	£
Interest on investments	£	£
Other income (please give details)	£	£
TOTAL	£	£

4b: Expenses from your self-employed work

If you are a child minder, you don't need to tell us about your expenses

Type of Expense	Actual Expense	Estimated Expense (only complete this section if you have been trading for less than three	% Business Use
Gross wages paid to yourself or drawings	£	months)	
,			
Gross wages paid to your spouse or domestic partner	£	£	
Gross wages paid to employees	£	£	
Rent for business premises	£	£	
Cleaning and maintenance of business premises	£	£	
Accountancy charges	£	£	
Legal fees	£	£	
Advertising and stationery	£	£	
Postage and delivery costs	£	£	
Business rates	£	£	
Water rates	£	£	
Business bank account charges	£	£	
Business insurance (excluding vehicle insurance)	£	£	
Heating and lighting (business only)	£	£	
Vehicle expenses – fuel	£	£	
Vehicle expenses – insurance	£	£	
Vehicle expenses – maintenance/repairs	£	£	
Repair, replacement and maintenance of business assets	£	£	
Telephone and internet	£	£	
New equipment to improve or expand your business	£	£	

Equipment rental	£	£	
Protective clothing/Uniform	£	£	
Type of Expense	Actual Expense	Estimated Expense (only complete this section if you have been trading for less than three months)	% Business Use
Subscription to professional organisations	£	£	
Any other expenses – please list below	£	£	
If you are registered for VAT, please tell us you	ur registration num	ber:	

Section 5: Loans for your business

5a - Loans taken out to set up or expand your business	
Total capital repayment	£
Total interest repayment	£
What period does the loan cover?	
From DD/MM / YYYY to DD/MM / YYY	Y
5b - Loans taken out to repair or replace any machinery, not covered by insurance)	equipment or assets (where
Total capital repayment	£
Total interest repayment	£
What period does the loan cover?	
From DD/ MM / YYYY to DD/ MM / YYY	Y

Declaration

☐ I declar	re that the information I have given on this form is correct and complete as far as I
know a	and believe.
☐ I under	stand that if I knowingly give information that is incorrect or incomplete, I may be
liable to	prosecution or other action.
☐ I know	that I must let you know in writing straight away about any change in my
circum	stances.
Signature	
Print name	
Date	

Information you need to send us

Please provide evidence covering the period of this declaration. The evidence should cover at least a two month period.

If you answer yes to any of the questions, you will need to provide evidence to support what you say.

You can return a completed form and evidence by the following routes:

- For new Housing Benefit claimants by uploading evidence with your online form (you can also come back to do this after you have submitted your online form).
- You can take evidence to one of our offices and we can help you upload it to your claim.
- Send to us at benefits@royalgreenwich.gov.uk or Advice and Benefits Service, The Woolwich Centre, 35 Wellington Street, Woolwich, London, SE18 6HQ.

For any queries email benefits@royalgreenwich.gov.uk or call 0208 921 4900.