

CHANGE OF CIRCUMSTANCES FORM

Complete this form when there is a change in your circumstances or the circumstances of anybody else in your household

WHY?

- Your entitlement to Council Tax/Housing Benefit is based on the information you have given us.
- During the period you have been granted Benefit these original details may change and affect the amount of benefit you are entitled to.
- If this is the case use this form to tell us **IMMEDIATELY** as we will claim back any overpaid benefit from the date the change happened.
- If the change would give you more benefit we can only pay this from the Monday after you tell us about the change unless you tell us within **ONE CALENDAR MONTH** of the change happening.

IF IN DOUBT JUST COMPLETE AND RETURN THIS FORM

EXAMPLES OF THE TYPE OF CHANGES WE WILL NEED TO KNOW:



INCOME - your own and that of anybody else living in your household

- an increase/decrease in any money received
OR

- if anybody starts/stops receiving any money
eg Income Support

Earnings

State Retirement Pension

Tax Credit or Pension Credit

Works/Occupational Pension

Rent from sub-tenants or boarders

Maintenance payments

Savings

Other state benefits - (ie Jobseeker's Allowance, Incapacity Benefit etc)

ACCOMMODATION DETAILS

- if you change your accommodation

- an increase/decrease in your rent (private tenants only)



HOUSEHOLD DETAILS

- if your children leave school

- if you or your partner are in hospital for more than six weeks

- if a child is born

- if you stop receiving Child Benefit for one of your children

- if the circumstances of anybody else change

IMPORTANT: Keep this form in a safe place for future use

Firstly, write your name and address in this box

Surname	First Name(s)
Mr/Mrs/Miss/Ms	Benefit Reference
Address	

Now, write in details of any change since your last application

The Date of Change:	Day	Month	Year
Details of Change:			
<p>With a change in income don't forget to enclose original documents - wage slips, letters etc With a change in savings don't forget to enclose original documents - copy of statements etc.</p>			



HOUSEHOLD: Has anyone left or joined your household or have the circumstances of someone living with you changed?

Name of Person	Date of Birth	Date they left or moved in	Relationship	Any other details - eg renting a room, all meals provided, change in income

Their income is Income Support Earnings Amount of earnings per week

Other income Amount Type of income

Please tick appropriate box and provide original documents as proof



Declaration:

I declare that to the best of my knowledge the information given is true and complete. I authorise the local authority to verify the information if they wish to do so.

WARNING: To give false information may result in prosecution

Signed:	Date:
---------	-------

Please return this form to: The Benefits Section, Epsom and Ewell Borough Council, The Town Hall, The Parade, EPSOM, Surrey KT18 5BY.