



**HOUSING & COUNCIL TAX BENEFIT
AUTHORITY TO ACT AS AN APPOINTEE**

Town Hall, The Parade, Epsom, KT18 5BY
Tel : (01372) 732269

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS AND RETURN IT TO THE ABOVE ADDRESS

CLAIMANT'S AUTHORISATION

Will you please arrange for the person named below to act on my behalf in respect of all aspects of my Housing & Council Tax Benefit claim:-

Appointee's Name

Full Postal Address
.....
.....

Claimant's Signature

Date

Claimant's Name

Claimant's Address

APPOINTEE'S UNDERTAKING

(This section must be signed by the appointee)

Declaration

1. I am the appointee of the above named tenant
2. I, as the appointee of the above, understand that it is a criminal offence to dishonestly or without reasonable excuse, fail to notify the Benefit Section of any change in circumstance that I am required by the Housing Benefit Regulations to report. These include a change in the claimant's (or a member of the claimant's household):
 - rent or terms of the tenancy;
 - if they move property, or to a different room within the property;
 - income;
 - if they start or stop work;
 - if they are or will be, absent from the property for a period of time;
 - if someone joins or leaves the household;
 - any other change that may affect entitlement to benefit.
3. I am prepared to act on the claimant's behalf
4. By acting on their behalf I am aware that if any overpayment of Housing & Council Tax Benefit should occur, I can be liable to reimburse the Council for the full amount of any such overpayment. This includes any overpayment that may occur when the Council makes an interim payment of benefit whilst awaiting further information concerning the benefit claim
5. I understand that you may share the information regarding my status as an appointee on this claim with other sections within the Council, other local authorities and government departments.

I DECLARE I HAVE READ AND UNDERSTOOD THE ABOVE CONDITIONS

PRINT NAME

Appointee's Signature

Date Signed