



Overpayment recovery financial assessment form

Name	Claim reference
Partner's name	Invoice No(s)
Current address	Overpayment balance £
	Home Tel
	Mobile Tel
	Email

MONTHLY INCOME	YOU	YOUR PARTNER
Net earnings from employment		
Name & Address of employer or 'Self Employed'		
Works Payroll Number		
Working Tax Credit		
Child Tax Credit		
Pension Credit		
Income Support		
Jobseekers Allowance		
Employment & Support Allowance		
Incapacity Benefit		
Housing Benefit		
Council Tax Support		
Child Benefit		
Disability Living Allowance/PIP		
Carers Allowance / Attendance Allowance		
Statutory Maternity Pay or Statutory Sick Pay		
State Pension		
Any Other Benefit/Allowance/Credit etc <i>(please specify)</i>		
Other Pensions (eg work or private)		
Child Maintenance		
Money from Friends or Relatives		
Money from non- dependants/lodgers/boarders or sub- tenants		
Any other Income <i>(please specify)</i>		
TOTAL	£ (A)	£ (B)

PRIORITY EXPENSES	Regular Monthly Payments		ARREARS	
			Amount	Monthly Payments
Rent				
Mortgage				
Council Tax				
Electricity & Gas				
Water				
TOTAL: Priority expenses	£	(D)	£	(E)
OTHER EXPENSES		Monthly Amount	Details	
Vehicle - Road Tax			Make/Model: Registration:	
Vehicle - Insurance				
Vehicle - Fuel				
Public Transport				
Telephone - landline(s)				
Telephone - mobile(s)				
Insurance - Home				
Insurance – Life				
Insurance - Other				
Shopping – Groceries, toiletries etc				
Clothing				
Regular Medical costs (incl Prescriptions, Dental, Optician etc)				
TV Licence				
Other TV (ie Sky/Cable)				
Broadband/Internet Fees				
Cigarettes/Tobacco Products				
Alcohol				
Entertainment & Leisure				
Personal/Other Costs (eg haircuts, treatments, therapies etc)				
Child Care Costs				
Maintenance/CSA payments				
Magazine / Professional Subscription				
School costs (eg meals, clubs, trips etc)				
Other (please name) _____				
Other (please name) _____				
TOTAL MONTHLY COSTS		£	(F)	

MONTHLY INCOME AND EXPENDITURE TOTALS (please carry over totals from previous page)	£
Your total monthly income (A)	
Your partner's total monthly income (B)	
Your household total monthly income (A)+(B)	(C)
Monthly priority expenses (D)	
Monthly priority debts (E)	
Other monthly costs (F)	
Your household total monthly expenditure (D)+(E)+(F)	(G)

ALL OTHER DEBTS (eg Loans, Fines, Credit Cards, HP, Catalogues etc) For yourself and your partner.		
Name of Creditor (eg Barclaycard)	Balance Owing	Monthly Repayment
TOTAL DEBTS OWED	£	
TOTAL MONTHLY REPAYMENT		£ (H)

CURRENT AMOUNT OF CAPITAL	YOU	YOUR PARTNER
ALL Bank Accounts (current)		
ALL Building Society & Savings Accounts		
All Other Money in Accounts		
All Other Capital (eg ISAs, etc)		
Other Property (UK or Abroad) Value		
Other (please name)		
TOTAL AMOUNT OF CAPITAL		

See proposal and declaration sheet for items to be supplied to support the information provided on this form.

YOUR REPAYMENT PROPOSAL AND DECLARATION

I think that I can afford to pay £..... per month towards my Housing Benefit overpayment with Epsom & Ewell Borough Council

Declaration

I/we declare that the information is a true statement of my/our current financial situation.

Signed (You) signed (your partner) date

In order for any arrangement or review to be considered, this form must be returned with the following documents:

- Bank statements covering the last two months
- If in paid employment, payslips covering the last two months
- Proof of debts and their balance

HELPING YOU MAKE YOUR REPAYMENT ARRANGEMENTS

Payments can be made by standing order, online at www.epsom-ewell.gov.uk, by phone or at your bank/post office via payment book.

HOUSING BENEFIT REPAYMENT LINE
TELEPHONE 01372 732271
EMAIL benefits@epsom-ewell.gov.uk

If you would like to discuss your repayment plan, or if you are having difficulty completing the Financial Assessment form, call the number above for assistance.

Please note that the Housing Benefit repayment line is only for enquires regarding invoices and the repayment of Housing Benefit overpayments, for other claim enquires please call the Benefits Section on 01372 732269.

HOW WE COLLECT AND USE INFORMATION

The information you provide will be used to assess your ability to repay Housing Benefit. If you owe debts to other council departments we may pass information on to them to assist them in assessing how much you can afford to repay them as well. The council is registered under the Data Protection Act 1998 for this purpose.

Epsom & Ewell council is under a duty to protect the public funds it administers. We may check information that you provide, or information provided by a third party, with other information we hold, to check accuracy of information; to prevent or detect crime; and to protect public funds in other ways, as permitted by law. We may also share this information with other council departments or bodies administering public funds for these purposes. We may also use this information to put you in touch with council services that may be able to help you. We will not disclose information about you to anyone unless the law permits us to.