



Housing Benefit and Council Tax Support Self-employed Earnings Form

Benefit claim number

Please answer all the questions. If a question does not apply, please write 'not applicable'.

1. Your declaration

Please read this declaration carefully before you sign and date it.

I understand the following.

- If I give information that is incorrect or incomplete, you may take action against me, which may include prosecution.
- You will use the information I have provided to process my claim for Housing or Council Tax Benefit, or both. You may check some of the information with other sources within the council, the Rent Service and other councils.
- You may use any information I have provided in connection with this, and any other claim for Social Security Benefits that I have made or may make, to validate this claim, my Council Tax liability and any entitlement to a bus pass.
- You may give some information to other government organisations, if the law allows this.

I know that I will be required to have evidence of my figures.

I know that I must let the council know about any change in my circumstances that might affect my claim.

I declare that the information I have given on this form is correct and complete.

Signature of
person claiming

Date

Partner's
signature

Date

2. Your Business Details

Your full name

Your home address

Your business name

Your business address

The nature of your business

When did your business start trading?

Are you a sub-contractor? Yes*

No

**If yes, please do not complete this form because we will treat you as an employee, and you will need to supply your wage slips for the last five weeks or two months*

3. Other Business Details

On average, how many hours do you work each week?

If your business is seasonal, please confirm the periods that you have worked and the average number of hours worked each week

From	To	Average number of hours worked per week

Is the business a partnership? Yes No

How many partners are there?

Is your husband/wife a partner? Yes No

If you have a legal Deed of Partnership or a 'Partnership Agreement' please provide proof.

Is your husband or wife an employee of the business? Yes No

What are his/her weekly earnings?

£

Are any other people employees of the business? Yes No

If yes, how many?

Do you contribute to a pension scheme? Yes No

How much do you pay each week?

£

If you do contribute to a pension, please provide proof of your policy

If you are an Ebay Seller, what is your Seller ID?

4. Your Business Income and Expenditure

Please complete the sections below.

What period does your income and expenditure relate to?

From

To

Business Income

£

Sales and Work Done

New Deal/Business Start-Up Payments

Tips, Gratuities, Other income (please specify)

Cost of Sales

Opening stock value

£ Stock taken for private use

Stock in hand at end of period

Business Expenses

	£ Total	£ Private Use
Purchase of goods for resale/stock	<input type="text"/>	<input type="text"/>
Wages to employees other than spouse/partner	<input type="text"/>	<input type="text"/>
Wages for your spouse/partner	<input type="text"/>	<input type="text"/>
Drawings	<input type="text"/>	<input type="text"/>
Accountancy/Legal fees	<input type="text"/>	<input type="text"/>
Advertising costs	<input type="text"/>	<input type="text"/>
Bank charges	<input type="text"/>	<input type="text"/>
Business Rates	<input type="text"/>	<input type="text"/>
Carriage and delivery charges for goods	<input type="text"/>	<input type="text"/>
Fuel for heat, light, hot water and power	<input type="text"/>	<input type="text"/>
Hire, rental, and leasing charges	<input type="text"/>	<input type="text"/>
Interest payments on a business loan	<input type="text"/>	<input type="text"/>
Insurance premiums for liabilities/assets	<input type="text"/>	<input type="text"/>
Postage charges	<input type="text"/>	<input type="text"/>
Replacement/repair cost of worn out asset <i>(less amount received on insurance)</i>	<input type="text"/>	<input type="text"/>
Rent for business premises	<input type="text"/>	<input type="text"/>
Stationery	<input type="text"/>	<input type="text"/>
Telephone and fax charges	<input type="text"/>	<input type="text"/>
Transport costs: Fuel	<input type="text"/>	<input type="text"/>
Road Tax/Insurance	<input type="text"/>	<input type="text"/>
Servicing	<input type="text"/>	<input type="text"/>
Other expenses (please specify)	<input type="text"/>	<input type="text"/>

Are the figures for income and expenditure given above likely to be similar for the next year?

Yes

No

If "no", please explain why

5. Your Business Bank Details

Do you have a separate bank account for business use only?

Yes

No

Which bank is the account held at?

What is the account number?