

| Income and Expendit | ure Fo | orm | | | | | | |
|-----------------------------------|-----------|---------------|-------------|-----------------------|----------|------|-----------|-------------------|
| Council Tax account | 79 | | | P | Property | | | |
| number | | | | re | efer | ence | | |
| Your address | | | | Н | lom | е | | |
| | | | | te | elepl | hone | | |
| | | | | n | uml | ber | | |
| | About you | | | About you | | you | r partner | |
| Name | | | | | | | | |
| Mobile telephone number | | | | | | | | |
| Email address | | | | | | | | |
| National Insurance Number | | | | | | | | |
| Employer's name and | | | | | | | | |
| address or type of benefit | | | | | | | | |
| claimed | | | | | | | | |
| Payroll number if working | | | | | | | | |
| Take home wage if working | £ | per w | ve | ek/month | 1* | £ | | per week/month* |
| Other household income | | | | Household expenditure | | | | |
| | £ pe | r week/month* | | | | | | £ per week/month* |
| Working Tax Credit | | | | Mortga | _ | | | |
| Child Tax Credit | | | Council Tax | | | | | |
| Child Benefit | | | | Water | | | | |
| Job Seekers Allowance | | | | Gas | | | | |
| Income Support | | | | Electric | ity | | | |
| Incapacity Benefit | | | | Insurance | | | | |
| Employment Support Allowance | | | | Telephone | | | | |
| Statutory Sick Pay | | | | Loans | | | | |
| Maintenance | | | | Housekeeping | | | | |
| Retirement pension | | | | Clothing | | | | |
| Other pensions | | | | Car costs | | | | |
| Disability Living Allowance | | | | Court fines | | | | |
| Personal Independence Payment | | | | TV licence | | | | |
| Contributions from: | | | | Maintenance | | | | |
| a. Non dependants | | | | Child care costs | | | | |
| b. Lodgers | | | | Travel | cost | ts | | |
| c. Others | | | | Other e | • | | | |
| Other income, please give details | | | - | please give details | | | | |
| Tarior moorno, picase give u | otano | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| | he space be | | | t agreed payment with Il write to you to tell you | | | | |
|---|---|--|--|--|--|--|--|--|
| Payment arranged to can pay £ | gement : on | / /, follow payments of £ | ved by starting from | _// | | | | |
| Any other inform | nation you th | ink we may need to kn | OW | | | | | |
| Signed | | | | | | | | |
| Print name | | Date | | | | | | |
| Reduction. If you | nformation y would like to | ou have provided abov o make a claim for Cou ons and read and sign | ncil Tax Réducti | ualify for Council Tax on we also need you to | | | | |
| Please list all | Full Nam | е | Date of Birth | Relationship to you | | | | |
| people who live | | | | | | | | |
| with you | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Claiming earlier. Do you wish to l What date do yo If there has bee circumstances b | backdate you bu want to cl n any chang | aim benefit from? | f you have a goo | od reason for not | | | | |
| has changed? | (-1-:::- | 0 | | | | | | |
| Why did you not | ciaim earlie | Γ! | | | | | | |
| I declare that the and complete. You may check sonly share this in I know I must let my claim. I understand that 21 days about an Reduction. I declare that the | information some of the information in the council k it is an offen ny changes of | provided and the detail nformation with other s accordance with the la now about any change | ources as allowed w. in my circumstate a £70 penalty, believe may affe | ed by the law. You will nnces which might affect if I do not tell you within ect my Council Tax | | | | |
| and complete. | | Print name | | Date | | | | |