

**All of this information must be provided:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Date of birth: \_\_\_\_\_

National Insurance Number: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Council Tax Reduction  
claim number:

\_\_\_\_\_

## Application for a Council Tax Reduction Discretionary Hardship Payment

Council Tax Reduction Hardship Payment is a discretionary scheme administered by Cheshire West and Chester Council.

The scheme may be able to help applicants in extreme circumstances, who are struggling to pay a shortfall between the amount of council tax reduction received and the amount of council tax that has to be paid.

Payments may only be considered for the following groups:

- Applicant, partner or resident dependant child is terminally ill
- Applicants under 25 on limited income
- Expectant or nursing mothers on limited income
- Backdating requests in limited circumstances only
- Any other vulnerable groups

Any awards will only be considered up to 31<sup>st</sup> March in any financial year.

Applicants must be receipt of Council Tax Reduction to apply for this discretionary payment.

If you need help completing this form, please contact us on the number shown above.

To see if you qualify please complete this form and send it back straight away. There is an income and expenditure section on page 4, please complete this fully and accurately. We may ask you to provide documentary evidence to support your application.

As a general rule we will ask for in support of this application.

**Please answer all of the questions**

**From what date do you want to claim a Discretionary Council Tax Reduction payment for?**

Date:    /    /    to    Date:    /    /

**Do you or any members of your family have any special needs as a result of a medical condition or anything else we may need to consider for this application?**

Yes       No       If yes, please give details.

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**Could anyone who lives with you help you with Council Tax payments?**

Yes       No       If yes, please give details.

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**Are your circumstances likely to change in the near future?**

Yes       No       If yes, please give details.

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**Have you considered the following:**

**Financial review and planning? (To review what you spend and plan your finances)**

Yes       No       If yes, please give details

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**Increasing your level of income? (For example starting work, taking in a lodger)**

Yes       No       If yes, please give details

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**Decreasing your expenditure? (For example downsizing to a more affordable property, reviewing your outgoings on fuel, considered extra insulation, joining the council’s energy saving scheme).**

Yes  No  If yes, please give details

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**Please explain why you are requesting a Discretionary Payment. Please give any information that you think is relevant.**

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**How long do you expect this situation to last for?**

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**Please give any additional information that you feel will support your claim.**

All applicants will need to complete this section about income and savings.

## WEEKLY INCOME

|                          | £ | Date you expect to receive this amount |   | £ | Date you expect to receive this amount |
|--------------------------|---|--|---|---|--|
| Earnings                 | £ |  | State Pension   | £ |  |
| Partners Earnings        | £ |  | Private Pension   | £ |  |
| Income Support/ESA       | £ |  | Non-Dependants Income                                       | £ |  |
| Working/Child Tax Credit | £ |  | Income from any other source £<br>(please state the source) | £ |  |
| Jobseeker's Allowance    | £ |  |   |   |  |
| Child Benefit            | £ |  |   |   |  |
| Maintenance              | £ |  | <b>TOTAL</b>  | £ |  |

## WEEKLY EXPENDITURE

|  |   |  |   |
|--|---|--|---|
| Food costs   | £ | Car tax and insurance                        | £ |
| Mortgage or rent   | £ | Prescriptions                                | £ |
| Council Tax  | £ | Catalogues                                   | £ |
| Insurances   | £ |  |   |
| Water charges  | £ | <b>Priority Fines</b>                        |   |
| Gas  | £ | Magistrates fine                             | £ |
| Electricity  | £ | CCJ  | £ |
| Other fuel   | £ |  |   |
| Registered Childcare costs   | £ | <b>Debts</b>                                 |   |
| Clothing   | £ | Loan shark                                   | £ |
| School Meals – do you qualify for free school meals?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> | £ | Loans from family                            | £ |
| Maintenance/CSA  | £ | Payday loans                                 | £ |
| Digital TV/Internet  | £ | Loan Repayments (state purpose of loan)      | £ |
| TV License   | £ | Other credit debts (state purpose of credit) | £ |
| Telephone  | £ |  |   |
| Mobile telephone   | £ | <b>Arrears</b>                               |   |
| Travel expenses  | £ | Mortgage                                     | £ |
| Petrol   | £ | Rent   | £ |
|  |   | Council Tax                                  | £ |
|  |   | Other expense                                | £ |

## SAVINGS/CAPITAL DETAILS

|                     |   |  |   |
|---------------------|---|--|---|
| Bank accounts       | £ | Any other savings and capital (state source) | £ |
| Stocks and shares   | £ |  |   |
| Savings accounts    | £ |  |   |
| Premium bonds       | £ |  |   |
| Additional property | £ |  |   |

# Declaration

**Even if someone else has filled in this form for you, make sure it is read back to you before signing this declaration. If you have a partner, they should sign this declaration as well. Please read this declaration carefully before you sign and date it.**

**I declare that the information I have given on this form is correct and complete and I understand that:**

- &If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- &The information I supplied on my application for Council Tax Reduction may be used to help decide my claim for a Discretionary Hardship Payment.
- &You may check some of the information with other sources within the council, rent offices 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. You may give some information to other government organisations, if the law allows this.
- &Data is held for the purpose of paying the correct amount of reduction to the right person for the right time and to ensure benefit is paid correctly, data will be shared with other government organisations.
- &If you require any additional information the data protection controller can be contacted through Cheshire West & Chester Council's Financial Services Department
- &I have a duty to tell Cheshire West and Chester Council Benefits Department about any changes to my circumstances IMMEDIATELY. Failure to do so could result in Court Action.

\_\_\_\_\_  
Signature of Person Claiming

\_\_\_\_\_  
Date

\_\_\_\_\_  
Partner's Signature

&

\_\_\_\_\_  
Date

**If this form has been completed by someone other than the person claiming:**

You MUST provide details below if you are acting for the person claiming e.g. an appointee, power of attorney, professional support worker etc. Make sure you have read the form back to the person named above and confirmed the details with them.

I confirm I have read this form back to the claimant and they have confirmed the details they have given to me are correct and complete.

Name of the person who filled in the form: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Phone No: \_\_\_\_\_

Signature of the person who completed the form: \_\_\_\_\_

## If you need to contact us

### In person:

Our offices are open at the following locations Monday to Friday 8.30am to 5pm.

Wyvern House  
The Drummer  
Winsford  
Cheshire  
CW7 1AH

Information Centre  
1 The Arcade  
Northwich  
Cheshire  
CW9 5AS

1st Floor  
Princeway Health Centre  
Princeway, Frodsham  
Cheshire  
WA6 6RX

Council Offices  
4 Civic Way  
Ellesmere Port  
Cheshire  
CH65 0BE

Council Offices  
The Forum  
Chester  
Cheshire  
CH1 2HS

Neston Library  
Parkgate Road  
Neston  
Cheshire  
CH64 6QE

### By phone:

Phone lines are open from 8.30am to 8pm.

**In writing:** If you want to ask us a question in writing, please write us.

Revenues and Benefits Department  
PO Box 187  
Ellesmere Port  
Cheshire  
CH34 9DB

**By email:** If you want to contact us by email, please send it to [benefits@cheshirewestandchester.gov.uk](mailto:benefits@cheshirewestandchester.gov.uk)

**Home visit:** If you would like us to visit you at home, please telephone us on 0300 123 7021 or email [visitsandtakeup@cheshirewestandchester.gov.uk](mailto:visitsandtakeup@cheshirewestandchester.gov.uk)

## Accessing Cheshire West and Chester Council information and services

This information is also available on audio tape, in Braille and in large print. If you would like a copy of this document in a different format or in another language, please email us at [equalities@cheshirewestandchester.gov.uk](mailto:equalities@cheshirewestandchester.gov.uk). We are also able to provide a British Sign Language (BSL) interpreter to help you access our services.

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**Phone:** 0300 123 8123 **Textphone:** 18001 01606 867 670

**Email:** [equalities@cheshirewestandchester.gov.uk](mailto:equalities@cheshirewestandchester.gov.uk)

**Website:** [www.cheshirewestandchester.gov.uk](http://www.cheshirewestandchester.gov.uk)

Revenues and Benefits Department  
PO Box 187, Ellesmere Port CH34 9DB  
Phone: 0300 123 7021  
Email: [benefits@cheshirewestandchester.gov.uk](mailto:benefits@cheshirewestandchester.gov.uk)

