

GWYNEDD COUNCIL

Council Offices Shirehall Street Caernarfon, Gwynedd LL55 1SH

Phone: 01286 682689

Email: benefit@gwynedd.llyw.cymru

DISCRETIONARY HOUSING PAYMENTS (DHP) APPLICATION FORM

You can get Discretionary Housing Payments if we think that you need extra help with your Housing Costs. Any payment awarded is in addition to any Housing Benefit / Housing Element of Universal Credit that has been awarded to you, but you must be either receiving Housing Benefit or the Housing Element of Universal Credit before we can consider if you need more help with your housing costs.

What are Housing Costs?

Housing costs are usually rental payments, but can also include rent in advance, deposits, and other lump sum costs associated with a housing need such as removal costs.

The following items are not covered by Discretionary Housing Payments:

- ineligible service charges (e.g. charges for fuel, hot water or meals),
- · increases in rent due to outstanding rent arrears, and
- certain sanctions and reductions in benefit.

How to apply for Discretionary Housing Payment

You will need to fill in this application form and return it to us as soon as possible. We will write to you if we need any supporting evidence regarding your circumstances and income and expenditure.

Need further help?

If you require further help with your financial situation or housing needs, you can contact one of the supporting organisations shown below:

Organisation	Support Available and contact details					
Shelter	Shelter – Advice on renting, homelessness and eviction Phone: 0800 495 495 Go to: http://www.sheltercymru.org.uk/					
cyngor ar citizens bopeth advice	Citizens Advice Bureau – Financial advice and independent help in completing the DHP claim form and/or claim for Housing Benefit and Council Tax Reduction • Adviceline Cymru : 0345 450 3064 • Go to: www.cabgwynedd.wales					



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For office use only			
Date received	(stamp)		
Date of issue			

DISCRETIONARY HOUSING PAYMENT APPLICATION FORM

Full name and title				
Current address: (including room/flat number)				
National Insurance no			Date of Birth	1 1
Telephone numbers	Landline	M	obile	
Housing Benefit Reference		Email address (optional)	3	
ONE-OFF PAYMENT If YES, complete que Please tell us why you are are My benefit is reduce I am affected by the My benefit is reduce My benefit has reduce I need financial sup I need financial sup My benefit has reduce	NT to help with your weekly restricted by the left with a specific payment of the left with left w	those that applying a spare bound in / out of maller propert byment or more changes to the	coly) Dedroom. (LHA) rate. f my home. y. De employment. e HB scheme.	ner reasons. Please

2. HOUSING DETAILS

Do you?	Own your home or pay a mortgage Pay rent to a housing association	Pay rent to a private landlor
Please tick the appropriate box		
	Live in board & lodgings	Other (Please give details)
	Housing Association, Private Landlord or live in b. (Tenancy Agreement, rent book, receipts or lette	
Date Tenancy Starte	ed at current/new address / /	
Date Moved in if di	fferent to above / /	
State your rental lia	ability £	per week/month etc
State the number o	of bedrooms in the property	
Please state wheth person, specify)	ner you want payment of any DHP award made	to yourself or landlord (or any o
, , , , , , , , , , , , , , , , , , , ,		
notification letter a	a claim or are receiving UNIVERSAL CREDIT as evidence of your award. D COMPOSITION	please provide your Universal Cı
HOUSEHOLI Please list the name	D COMPOSITION es of everybody who normally lives with you. If n	none, please write "none".
notification letter a	D COMPOSITION	
HOUSEHOLI Please list the name	D COMPOSITION es of everybody who normally lives with you. If n	none, please write "none".
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HOUSEHOLI Please list the name Name	D COMPOSITION es of everybody who normally lives with you. If n	Date of Birth / / / / / / / / / / / / / / / / / / /

Name	Date of birth	Usual Home address	How often do they sta	y with you
			•	
Benefit rules. This inc	cludes tenants in the Private	section if your home has m Rented Sector, and in partic known as the "Bedroom Tax	ular Social Sector tenant	by Hous
•	•	ly needs (according to Hou		Yes
		a room or rooms? For exama medical condition, or a ch		
a bedroom due to a	severe disability.		illa dilable to silale	No
If 'Yes', please expla	ain and provide supporting	g evidence		
Have you tried to fir	nd cheaper alternative acco	ommodation?		
If 'Yes', please give explain why below.		er accommodation but did r	not move, please	Yes
		n't looked for cheaper acco	ommodation.	No
	d ith O dd/- 11i	O-4	4	
		JOptions Team for alternated by the "bedroom tax		Yes
Association outside		·	,	No
applications in Gwy	nedd, where you can be con	oct point for all housing on Isidered for social housing b Ind Tai Clwyd) or North Wale	y Cartrefi Cymunedol	
		nail: housingoptions@gwyne	dd.llyw.cymru	
	ride details including the da ain your reasons for not do			
ii ivo, picase expia	The your reasons for not do	ing 30.		
f you have been offe	red social housing accommo	odation which you've refused	d, please provide the det	ails belo
		if you moved from the area e, school, hospital or other		

PRIVATE SECTOR TENANTS ONLY to complete question 11

11.	Have you asked your landlord if he would consider lowering your rent? If 'Yes', tell us below what the outcome was. If 'No', can you please tell us why you haven't considered this?	Yes No
	Have you any objection to Gwynedd Council contacting your landlord to see if your rent can be reduced? If 'Yes', please tell us why below.	Yes No
12.	ALL APPLICANTS TO ANSWER THIS SECTION Please tell us if you have any plans to help your situation in the long term, such as increasing y or moving house, even if you just register for a smaller property (see 6 above). Any evidence to provide will help us to make a decision.	
13.	The DHP fund granted to the Council by the Government is limited, and it would not be possible Council to use DHP to help everybody who does not receive full Housing Benefit to meet their none of the above questions have described your true circumstances, can you please tell us be you consider that your claim is exceptional.	rent. If
	ly applicants who ticked "One-off Payments" in question 1 should conestions 14 to 17	nplete
14.	Please tick the payment you are applying for: Rent in advance Deposit Other If other, please state what the payment is for: Moving Costs (provide 2 items of evidence)	
15.	If you're claiming rent in advance, deposit or moving costs, could you please explain why you your current address. If you're claiming an "Other" payment, please use the space below to eand what it is for	
16.	Have you any savings that could be used to meet this need (or part of the need) If 'Yes', please give details below.	Yes No

Information about your incor This information will help us decide if y Please take your time and include eve only use it to see if we can give you ext Please enter number of adults in your lease	you need further rything. All the		
Please take your time and include eve only use it to see if we can give you ex	rything. All the	er financial assistance to meet your	
Please enter number of adults in your		e information you give us is confid	
,	household		
Number of children in your household			
Income: (Weekly)		Expenditure (Week	ly)
Child Benefit	£	Car Expenses (including insurance)	£
Child Support (Maintenance)	£	Child Care Payments	£
Child Tax Credit	£	Child Support/Maintenance	£
Working Tax Credit	£	Clothing/Furniture	£
Net Earnings	£	Coal - other heating	£
Disability Living Allowance (DLA) or Personal Independence Payments (PIP)	£	Council Tax	£
Employment and Support Allowance	£	Electricity	£
Incapacity Benefit	£	Gas	£
Income Support	£	Water Charges	£
Job Seekers Allowance (contribution based)	£	Healthcare/Insurance	£
Job Seekers Allowance (income based)	£	Home Insurance	£
Occupational (works) Pension	£	Life Insurance	£
Pension Credit	£	Housekeeping	£
Private Pension	£	Mobile Phone	£
State Retirement Pension	£	Telephone	£
Universal Credit	£	Internet access	£
Other Income (please specify)	£	Rent (please provide proof)	£
TOTAL	£	Rent Arrears (please provide proof)	£
Capital/savings (details below)		Travel Expenses (please specify)	£
1.	£	TV & Licence	£
2.	£	TV Satellite (e.g. SKY)	£
3.	£	Other (please detail)	£
TOTAL	£	Repayment of debts (details below)	£
		1.	£
		2.	£
		3.	£
		4.	£
		TOTAL	£
Are there any further details about you If 'Yes', please provide details below:	ır income and	expenditure not included above?	Yes

20. Payment direct into an account

DATE

What name or names is the acc Please write the name or name on the cheque book, passbook	s as they appear											
Full name of bank or building s	ociety											
Sort Code – of the bank, buildi Please tell us all six numbers, f			t provide	r.			[_[
Account number. This is 7 to 10 numbers long.												
More information if it is a build Building society roll or reference		nt										
Some building societies accoureference can contain letters an has a roll or reference number,	d numbers and ca	n be up t										
21. Sharing information Sharing information with your you falling behind with your re If you give us permission, we were you have claimed or reason we have made a decise we need more inform. We will not give your landlord and your personal or house your financial circums. You can withdraw your permission.	landlord could he nt because of your yould be able to te enewed Discretion sion on your claim ation to make a deany information alsehold circumstantances.	lp us dea r claim be ell your la nary Hous , or ecision or bout: ces.	eing dela ndlord w sing Payr	yed. hether: ment, or iim, and	what	that	infor	mati	on m	ay t		k of
If you want to give us permission	_			-			-					
I give Gwynedd Council permis Payment claim with my landloi			about the	e progres	ss of r	my D	iscre	tiona	ary H	ousi	ng	
SIGNATURE												
PRINT FULL NAME												

22. DECLARATION

Please read this declaration carefully before you sign and date the application.

- I declare that the information given on this form is correct.
- I agree that the Council may make enquiries necessary to check the information I have given.
- I understand that if any information I provide is incorrect that I will have to repay any awarded DHP back to the Council.

Signature of Claimant :			
Signature of Partner :			
	Date:	1	1
Declaration of the person filling	g in the form on behalf of the tenant.		
Print Name:			
Signature:			
Relationship to applicant:			
	Date:	1	1

CONTACT US

Email: benefit@gwynedd.llyw.cymru

Phone: 01286 682689

Address: Gwynedd Council, Shirehall Street, Caernarfon, Gwynedd, LL55 1SH

Reception points - Siopau Gwynedd

If you wish to access Council services face-to-face, you can do so at our Siopau Gwynedd offices which are located at the following sites

- Arfon: Gwynedd Council, Castle Street, Caernarfon, Gwynedd, LL55 1SE
- Dwyfor: Dwyfor Area Office, Ffordd y Cob, Pwllheli, Gwynedd, LL53 5AA
- Meirionnydd: Meirionnydd Area Office, Cae Penarlâg, Dolgellau, Gwynedd, LL40 2YB

You can collect or hand in forms or documents at these offices - staff will check and copy your documents and return them to you straight away.