Discretionary Housing Payments (DHP) may be awarded where there is a shortfall between your rent and your Housing Benefit. It cannot cover ineligible services such as meals or water rates. If you wish to apply for DHP you should answer the questions overleaf, in full, and give as much information as possible. Please provide any documents that may support your case.

**NOTE:** If you are getting Universal Credit and want to claim DHP for a shortfall in your housing cost element, please go to merton.gov.uk/benefitforms and download and print the DHP form for Universal Credit form instead.

If you wish to get help with paying your Council Tax due to a shortfall in your Council Tax Support, please go to merton.gov.uk/cts to download and print the right form to do this.

Please note you will not be eligible for DHP if you already receive maximum Housing Benefit.

You should return this form as soon as possible but not later than one calendar month of the above date.
Housing Benefit - Discretionary Housing Payment (DHP) application

Please answer the questions below as fully as possible. We will need to see proof of what you tell us. We may also ask you to attend an interview or we may visit you at home.

SECTION 1 – ABOUT YOU

Your first name ________________________________

Your surname ________________________________

Your National Insurance number: __ | __ | __ | __ | __

The address you want DHP for (including flat or room number and post code)

________________________________________________________________________

________________________________________________________________________

What date did you move into this address? _____/_____/_______

What is your country of birth? ________________________________

When did you last arrive in the United Kingdom? _____/_____/_______

What is your status in the United Kingdom? British citizen □ Other □ state below:

Contact telephone number: ________________________________

Email address: ________________________________

(We will only use these details to contact you if we need further information to help us with your benefits claims.)

SECTION 2 – PEOPLE WHO LIVE WITH YOU

Please tell us about other people who live with you.

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of birth</th>
<th>Relationship to you</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Continue on a separate sheet if necessary

Could any of these people, help you with your rent payments? Yes □ No □

If yes, how much could they afford in total? £ ____________ every _____________

Can anyone make up the difference between your rent or council tax and Housing Benefit? Yes □ No □

If yes, who is it? ________________________________

How much can they afford? £ ____________ every _____________
SECTION 3 – ABOUT YOUR TENANCY & RENT

Your landlord’s name: ________________________________________________________

Your landlord’s address:____________________________________________________
_________________________________________________________________________

Your landlord’s email: ____________________________

Your landlord’s phone number: ______________________________________________

Can we speak to your landlord about your application for DHP? Yes ☐ No ☐

Are you in rent arrears? Yes ☐ No ☐

If yes, please provide proof of the amount.

Has your landlord given you notice to quit? Yes ☐ No ☐

If yes, please send a copy of your notice to quit or upload it using the upload form at merton.gov.uk/hbupload. See the section on PROOF at the end of this form. You should also contact the council’s Housing Advice Service on 020 8545 3734/3735 for advice.

SECTION 4 – ACTION YOU HAVE TAKEN TO REDUCE YOUR RENT

Have you, or someone on your behalf, tried to get your landlord to reduce the rent? Yes ☐ No ☐

If yes, what rent will your landlord accept? £ ________________________________

If no, please say why you have not tried: ______________________________________
_________________________________________________________________________

Have you, or someone on your behalf, tried to find cheaper accommodation? Yes ☐ please give details and provide any proof you have.

No ☐ please say why you have not tried:
_________________________________________________________________________

For help and advice on moving, or for advice about your existing tenancy rights, contact the council’s Housing Advice Service on Tel: 020 8545 3734/3735

Could you live with family or friends? Yes ☐ No ☐

If no, please state why not?
_________________________________________________________________________
_________________________________________________________________________

Did you have to pay a deposit before you moved in? Yes ☐ No ☐

If yes:

is it protected by the rent deposit scheme? Yes ☐ No ☐

If you will not get your deposit back, please explain why:
Is your short fall due to Local Housing Allowance (LHA) restrictions? This is where the Government LHA rate is lower than the rent you are charged. If you rent your home from a Housing Association or Registered Social Landlord this will not apply to you.

Yes ☐   Answer the questions below.   No ☐   Go to Section 6

Did you move to your current address in the last 12 months?   Yes ☐   No ☐

If Yes, answer the questions below.   If No, go to Section 7

Your previous address

What was your previous address, including flat or room number & postcode?

_________________________________________________________________________
_________________________________________________________________________

How much was the rent? £ ____________________ every ______________

Were you receiving Housing Benefit or Universal Credit Housing Cost Element at this address? Yes ☐   No ☐

Why did you move from this address? If you were given Notice to Quit the property, please attach a copy of it.

_________________________________________________________________________
_________________________________________________________________________

If your previous address was not in the London Borough of Merton, why did you move to this borough?

_________________________________________________________________________
_________________________________________________________________________

Your current address

Did you find this accommodation through an agency? Yes ☐   No ☐

If no, how did you find it?

_________________________________________________________________________
_________________________________________________________________________

Was anywhere cheaper offered to you? Yes ☐   No ☐

If yes, why did you not take it?

_________________________________________________________________________
_________________________________________________________________________

Were you able to afford the rent when you moved in (for example because you were in work)? Yes ☐   No ☐

Was the Local Housing Allowance standard rate less than the charged rate when you signed the tenancy agreement? Yes ☐   No ☐
If yes, why did you take the tenancy?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Now go to SECTION 6

SECTION 6 – BENEFIT CAP RESTRICTIONS

Are you claiming a DHP due the benefits caps? The Benefit caps restrict the amount of benefit you can receive.
Yes ☐ Answer the question below      No ☐      Go to Section 7

Have your benefits been capped from at least the date you moved into the property?
Yes ☐  No ☐

If Yes, why did you move into this property and not move into a property where your benefits would not be capped?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

SECTION 7 – SOCIAL RENTED SECTOR UNDER-OCCUPATION RESTRICTIONS

This restriction is applied because you have too many rooms for the number of people living in your home and is also known as the Bedroom Tax.

Are you claiming a Discretionary Housing Payment due to a reduction in your Housing Benefit caused by the under occupation changes to social rented sector tenants?
Yes ☐ Answer the question below     No ☐      Go to Section 8

Are you looking for a smaller property?
Yes ☐  No ☐

If No, please say why not in the space below:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If Yes, please say what steps you have taken:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
SECTION 8 – OTHER REASONS FOR DHP REQUEST
If you are claiming DHP for any other reason, please give full details below. Continue on another sheet of paper if you need to.

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

SECTION 9 – HELP FROM HOUSING OPTIONS TEAM
Have you already contacted our Housing Options team?  Yes ☐  No ☐
If Yes, have you claimed a homelessness prevention payment?  Yes ☐  No ☐

SECTION 10 – SPECIAL NEEDS
Do you, or any member of your family who lives with you, have any health problems which mean your accommodation is particularly suitable, or might be made worse if you have to move?  Yes ☐  No ☐
If Yes, please give details of the health problems and the reason it make it worse:

<table>
<thead>
<tr>
<th>Name</th>
<th>What is the health problem and reason</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Continue on another sheet of paper if you need to.

SECTION 11 – YOUR INCOME
Please give us details of the income that you and your partner (if you have one)?

You must provide proof of this income.

<table>
<thead>
<tr>
<th>Name of income</th>
<th>Amount</th>
<th>Frequency</th>
<th>Paid to (name)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Please provide proof of your outgoings (e.g. rent account statement, gas bills, electricity bills, bank statements showing payments made; credit agreement etc.)

<table>
<thead>
<tr>
<th>Household bills</th>
<th>How much?</th>
<th>How often?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rent (total amount charged including services)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Electricity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water rates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household insurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child care (after childcare grants/tax credits)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food and toiletries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laundrette fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Landline telephone/broadband</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mobile phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TV licence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washing machine rental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fridge freezer rental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooker rental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hire purchase payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel to work/school/job seeking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Council Tax (after council tax support)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional expenses related to health or disability</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Repayment of loans/debts

<table>
<thead>
<tr>
<th>Name of loan provider/debt</th>
<th>Reason for loan/debt</th>
<th>How much are you paying?</th>
<th>How much do you still owe?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>£</td>
<td>every every</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other outgoings (e.g. deductions from your benefits to repay debts or overpayments)

<table>
<thead>
<tr>
<th>Description</th>
<th>How much are you paying?</th>
<th>How often?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td></td>
</tr>
<tr>
<td></td>
<td>£</td>
<td></td>
</tr>
<tr>
<td></td>
<td>£</td>
<td></td>
</tr>
</tbody>
</table>
SECTION 14 – SAVINGS AND CAPITAL

Do you have any savings, capital or investments?   Yes ☐ No ☐
If yes, how much in total?   £_________________

Please provide proof of any savings, capital and investments you have. Please note these are cross referenced to other data we hold. You must tell us about all accounts and capital held by you and your partner.

Do you, or any member of your family who lives with you, have any special needs, which mean you have to spend more money than normal, e.g. special dietary needs or medical reasons?   Yes ☐ No ☐
If Yes, please give details of who the cost relate to and what they are:

<table>
<thead>
<tr>
<th>Name</th>
<th>What is the special need</th>
<th>Weekly cost (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SECTION 15 – PERSONAL STATEMENT

Please add any other information you think may help your case
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Continue on another sheet of paper if you need to.

PROOF

If you have any proof of anything you have said, it will help to send it in or upload an image of it at merton.gov.uk/hbupload. You can also bring it in and use the photocopier in Merton Link on the ground floor of the Civic Centre in Morden and post it in the Housing Benefit mailbox.

DATA PROTECTION

Your personal information will be held and used in accordance with the requirements of the Data Protection Act 1998. We have a duty to protect the public funds we administer and may use the information you have provided for the prevention and detection of fraud. We may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information, go to merton.gov.uk/nfi-fdp or contact the Data Protection Officer by email: data.protection@merton.gov.uk
Further information is available from: wwwauditcommission.gov.uk/nfi/fpindex
You must read the following statement carefully and sign and date the form in the appropriate spaces below. If you have a partner, they should also sign it too.

1. The information I have given on this form is correct and complete to the best of my knowledge.
2. I understand that anyone who dishonestly claims or receives benefit or a discretionary housing payment may be prosecuted.
3. I give my permission for the council to make any enquiries it thinks necessary to verify the information on this form. This includes permission to contact the council where I/we previously lived regarding my Housing Benefit entitlement and the circumstances in which I/we vacated my previous address.
4. I also give my permission for Merton Council to verify this information with my/my partner’s employers and my/my partner’s bank or building society and to visit me to check that the details of my claim are correct.
5. I also understand that you may share and verify this information with other organisations that handle public funds; including, other sections within the council, rent officer, other councils and benefit authorities.
6. I know that I must tell the council benefit office about any relevant changes of circumstances that happen after I have signed this claim. These could be things like:
   - A change of address temporarily or permanently
   - A change in my/our income, or that of anyone living with me/us
   - I/we stop getting Income Support, Job Seekers Allowance or Employment and Support Allowance
   - If somebody joins or leaves my household
   - If I go on holiday or leave the country

Your signature: ___________________ Print name: _______________ Date __________

Your partner’s signature: _______________ Print name: _______________ Date: __________

If you have had help filling in this form please give the details below:
I have completed this application form on behalf of the person named above. I have read out each question to this person and written down their answers:

Signature: ___________________________ Name: ___________________ Date: __________
INFORMATION ON AWARDS

Where a Discretionary Housing Payment award is made in respect of help with rent, this will be paid with your Housing Benefit, directly the agreed bank account. We will pay the DHP directly to your landlord where we believe it is in your interests to do so or if your Housing Benefit is being paid directly to your landlord.

If you are awarded Discretionary Housing Payments, your award will be made from the Monday after we received your form in the office. The award will be made for a minimum of 13 weeks (unless your Housing Benefit ends in less than 13 weeks, when it will be paid only until the end of that HB entitlement). When you make a new claim for HB you will also need to make a new claim for Discretionary Housing Payment.

IMPORTANT: PLEASE NOTE

Merton Benefits Service is allocated a strictly limited budget by central Government that we can spend on Discretionary Housing Payments.

For this reason even if you are awarded a Discretionary Housing Payment, it may not be given for the full amount of the shortfall of your rent or for the whole of your benefit period.

It is also possible that you may not be able to receive a Discretionary Housing Payment every time, or if you do, it may not be for the full amount of the shortfall.

Where this payment is made to help with the shortfall in your Housing Benefit entitlement due to a rent restriction, you should begin looking for more affordable accommodation immediately. Before you accept a new tenancy you should get the Local Housing Allowance standard rate that applies to you. This means that you will have a better idea of the maximum Housing Benefit you could get before taking on a new tenancy and if there is likely to be a shortfall. Please visit either of these websites:

- [www.merton.gov.uk/local_housing_allowance](http://www.merton.gov.uk/local_housing_allowance)
- [www.gov.uk website](http://www.gov.uk/housing-benefit/what-youll-get) and click on Local Housing Allowance Limit.

Please return this form by:

<table>
<thead>
<tr>
<th>Electronic method</th>
<th>Post to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Take an image of the form</td>
<td>Merton Benefits Service</td>
</tr>
<tr>
<td>(digital photo/scanned image)</td>
<td>PO Box 610</td>
</tr>
<tr>
<td>Upload the image to merton.gov.uk/hbupload</td>
<td>Merton Civic Centre</td>
</tr>
<tr>
<td>In the HB ref field quote HB ref number</td>
<td>London Road</td>
</tr>
<tr>
<td>shown on this letter.</td>
<td>Morden</td>
</tr>
<tr>
<td></td>
<td>SM4 5ZT</td>
</tr>
</tbody>
</table>
Merton Benefits Service is committed to providing a service that suits the needs of its customers. Please tick your answers to the questions below to help us and return this survey with your application for Discretionary Housing Payments. The information you give is confidential and will not be held on your Housing Benefit/Council Tax Support file. The information will help us to improve our services and will help to target them in the right areas of the borough:

1. Ethnic origin

<table>
<thead>
<tr>
<th>White</th>
<th>Indian</th>
<th>Black British</th>
</tr>
</thead>
<tbody>
<tr>
<td>White Irish</td>
<td>Pakistani</td>
<td>Black Caribbean</td>
</tr>
<tr>
<td>White Other</td>
<td>Bangladeshi</td>
<td>Black African</td>
</tr>
<tr>
<td>Mixed Race</td>
<td>Tamil</td>
<td>Black Other</td>
</tr>
<tr>
<td>British Asian</td>
<td>Asian Other</td>
<td>Chinese</td>
</tr>
<tr>
<td>Other</td>
<td>Please say what</td>
<td></td>
</tr>
</tbody>
</table>

2. Registered blind

In what format do you prefer to receive correspondence?

<table>
<thead>
<tr>
<th>Large Print</th>
<th>Braille</th>
<th>Audio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>Please say what</td>
<td></td>
</tr>
</tbody>
</table>

3. Languages

a) What is your first/main language? 

b) If you are deaf or hard-of-hearing do you use:

<table>
<thead>
<tr>
<th>British Sign Language</th>
<th>Lip Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sign Supported English</td>
<td>Other. Please say what</td>
</tr>
</tbody>
</table>

4. What is your postcode? 
