

Housing Benefit And Council Tax Support Self-Employed Earnings Information



You have told us on your claim form you or your partner is self-employed. We need more information about your or your partner's earnings so we make a decision about your claim.

You must complete this form promptly. If you have just started a new business within the last three months fill in and return the estimated self-employed income declaration at the end of this form. If we do not receive this form, with all the information we need, within one calendar month of the date you claimed will be cancelled or made unsuccessful.

Your Benefit Reference Number:

Date issued:

Section 1- About You

About your partner (in the case of couples)

Your name

Your partner's name

Your address

Your postcode

Section 2 – Company directors

Are you or your partner a director of a company or business?

You Yes No Your partner Yes No

If you or your partner ticked "No", go to **Section 3** of this form.

If you or your partner ticked "Yes" please read the section below:

Company directors only:

Company Directors are not self-employed under Housing Benefit or Council Tax Support rules. Please answer the following questions about income as a company director.

Do you or your partner take a salary from the net profit of the company? Yes No

If Yes, how much is this before any tax or National Insurance per annum? £_____

Do you receive any share or dividend income from the company if it is listed? Yes No

What is the value of your share dividend per annum? £_____

What is the capital value of the company? £_____

Section 3 – Who is self employed

Who is self employed? You Your partner Both

If you ticked the box "Both" ask us for another one of these forms for your partner, or download and print it from www.merton.gov.uk/benefitforms

Section 4 – About the self employed business

Name of business

Business address

including postcode

What type of self employed business is provided?

Section 4 continued

Date business started (if this is less than three months ago, please fill in the estimated self employed income at the end of this form). / /

Tell us about the trading period you are giving us details for. This is the period of time that includes all your income and expenses for the business.

A - Start date of latest full year trading period / / to B - End date of trading period / /

What is the average number of hours you work per week? _____ per week

Are you a sole trader? Yes No

What is the total gross profit for the trading period A to B above £ _____

Please list any Government funding below:

New Enterprise Allowance £ _____

Old self employment credit £ _____

Is your business a partnership? Yes No

If "No" go to Section 5.

If "Yes" - how many other business partners are there? _____

what percentage of the total gross profit above is yours? _____%

(Please provide your partnership agreement) _____%

If you are a member of a couple, is your actual partner an associate in the business? Yes No

If "Yes" what percentage of the profit/loss is theirs? _____%

Section 5 – Wages or drawings

Is your actual partner on the payroll of the business? Yes No

If yes, what are his or her earnings? £ _____ every _____

Are there any other people on the payroll of the business? Yes No

If "Yes" please list tell us details of wages paid. £ _____ every _____

If "No" go to Section 6.

Section 6 – Home partly used for business

Do you use part of your own home for business purposes? Yes No

If "No" go to Section 7. If "Yes" give details below:

How many rooms in total are there in your home? _____

Which room (or rooms) do you use for business purposes? _____

Is the room (or rooms) used only part of the time for business use? Yes No

If "No" go to Section 7. If "Yes" give details below:

What percentage of the time is for business purposes? _____ %

Section 7 – About the profit and loss account and HMRC

Do you have any prepared profit and loss accounts (audited or otherwise) for the last trading year? Yes No

If "Yes", return an original set of the accounts with this form.

If "No", but you will have them shortly, please tell us when? ____/____/____

Do you have your latest Schedule D Tax Assessment? Yes No

If "Yes", you must return it with this form.

If "No", state reason why and if you are waiting for it give the date you expect to receive it.

Section 8 – Stock at close and opening of trading years

This section only needs to be completed if your or your partner's business has stock at the close and opening of trading years. This may be a more accurate way for us to establish your profit.

If this is not applicable to the self-employed business go onto Section 9.

State exact period covered From ____ / ____ / ____ To ____ / ____ / ____

Total sales/Takings/Income	£_____ +
Plus VAT Refunded	£_____ +
Plus New Enterprise Allowance	£_____ +
Plus Closing stock	£_____ +
Less Cost of sales/purchases	£_____ -
Less VAT paid out	£_____ -
Less Opening stock	£_____ -
Gross profit	£_____

Section 9 – Business expenses

If you are a self employed childminder do not fill in this section, go to Section 10.

Please list all your self employed business related expenses. Please specify what percentage of any expense is for personal use. For example, if you include telephone calls as an expense, you must tell us the percentage of the total cost in column B) that is for personal or private use. If you told us earlier you are in a business partnership, please tell us the total business expenses. If there is no part of the expenses below that is personal use write 0% in column C).

A) Type of expense	B) Amount of expense	C) % of personal expense
Accountancy fees	£	
Admin charges	£	
Advertising	£	
Bank charges	£	
Building costs	£	
Building maintenance	£	
Business entertainment	£	
Business rates (NNDR)	£	
Capital allowances	£	
Capital on loans for repairs or replacements	£	
Charges to convert foreign currency to £	£	
Cleaning of business premises or equipment	£	
Debt recovery costs	£	
Delivery charges	£	
Depreciation	£	
Expansion costs	£	
Hire or leasing charges	£	
Insurance for business liabilities/assets	£	
Interest on loans for repairs or replacements	£	
Legal fees	£	
Losses incurred before the trading period	£	
Losses from any other business offset	£	
Membership fees for professional bodies	£	
Postage and printing	£	
Proven bad debts	£	
Replacement costs for insured equipment or machinery	£	
Replacement costs for uninsured equipment or machinery	£	
Rent wholly and exclusively business use	£	
Security for business premises	£	
Set up costs	£	
Special clothing e.g. overalls and uniforms	£	
Subcontractor fee 20% or 30% for builders on CIS	£	
Subscription fees for professional bodies	£	
Subsistence	£	
Sundries	£	
Telephone broadband charges	£	
Transport/travel costs	£	
VAT paid to HMRC (excluding refunds)	£	
Vehicle expenses (give details below)	£	
Other expenses not listed above (tell us which)	£ £	

Section 10 – Personal pension scheme

Contributions over trading assessment period to a personal pension scheme £ _____

Or annual payment for personal pension scheme £ _____

You must provide proof of the scheme to which you belong and of the payments made.

Section 11 – 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.
- You will use the information I have provided to process my claim for Housing Benefit or Council Tax Support, or both. 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.

I know I must let the council know about any changes in my circumstances, which might affect my claim.

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

If you are the claimant and self employed you must sign this declaration. If your partner only is self employed you must both sign this declaration. If you are both self employed we need two of these form completed and signed by both of you.

Signature of person
claiming

Date

Signature of partner
if self employed

Date

Please return this form to **Merton Benefits Service, PO Box 610, Morden, SM4 5ZT**

You must return this form promptly i.e. within one calendar month of the date this form was issued. If we do not receive it within one calendar month of the date it was sent, we will terminate your claim.