DISCRETIONARY HOUSING PAYMENTS POLICY AND ADMINISTRATION PROCEDURE

**INTRODUCTION**

The purpose of this procedure is to provide the general policy intention in the way South Oxfordshire District Council and Vale of White Horse District Council wishes to use Discretionary Housing Payments and detailed information and practices to process applications for Discretionary Housing Payments in accordance with The Discretionary Financial Assistance Regulations 2001 (S.I. 2001/1167) and Department of Work and Pension Discretionary Housing Payment Guidance Manual.

**DEFINITIONS**

HB - Housing Benefit

UC - Universal Credit

DHP - Discretionary Housing Payments

**BACKGROUND**

Since 2 July 2001 local authorities are no longer be able to award exceptional circumstance or exceptional hardship payments of Housing Benefit (HB). They have been replaced by Discretionary Housing Payments (DHP) which do not form part of the HB scheme and are free standing payments to be made at the discretion of the local authority to help with housing costs.

There were two separate DHP schemes, one covering shortfalls between rental liability and payment of HB and one covering shortfalls between council tax liability and Council Tax Benefit. Since 1 April 2013, Council Tax Benefit has been abolished and replaced by a local Council Tax Reduction Scheme (CTRS). DHPs may not be used to cover any shortfall between the Council Tax liability and CTRS.

The Welfare Reform Act 2012 introduced a new benefit called Universal Credit (UC), which will gradually replace Housing Benefit for help with housing costs for most people of working age. DHPs can be paid to people who are entitled to an award of UC the calculation of which includes a housing costs element under Schedule 4 of the Universal Credit Regulations 2013.

The main features of the new schemes are that:

* The schemes are purely discretionary. The claimant does not have a statutory right to a payment.
* The amount that can be paid out by the councils in any financial year is cash limited by the Secretary of State for Work and Pensions.
* The administration of the scheme is for the Revenues & Benefits Client Officers to determine (with the exception of reviews).
* A DHP is not a payment of HB or UC.

The claimant must be entitled to HB or the housing element of UC to be able to qualify for DHP. Payments may only be made between the amount of HB and the eligible rent, or UC and the eligible rent. A DHP can also be considered for a rent in advance, a rent deposit and costs associated with a house move, such as removal costs. If a claimant receives full help with their eligible rent, they may not receive a DHP for the period they receive full help. However, the councils may look at an earlier period where the claimant was not receiving full help and make a DHP payment for the difference during that period as long as there is entitlement to HB or the housing element of UC.

**What DHPs cannot cover**

The Discretionary Financial Assistance Regulations 2001 precludes the following elements of rent, and shortfalls in HB or UC, from being met by a DHP:

**Ineligible charges**

Service charges which are ineligible for HB cannot be covered by a DHP. These are as specified in Schedule 1 to the Housing Benefit Regulations and Schedule 1 to the Housing Benefit (Persons who have attained the qualifying age for state pension credit) Regulations. Examples of ineligible services charges are charges in respect of:

* the acquisition of furniture or household equipment; and
* the use of such furniture or equipment where that furniture or household equipment will become the property of the claimant by virtue of an agreement with the landlord
* Charges for water, sewerage, and environmental services – as defined and calculated under the HB provisions. The service charge rules for UC can be found in the Universal Credit Regulations 2013, Schedule 1

**Increases in rent due to outstanding rent arrears**

Under Regulation11(3) of the Housing Benefit Regulations and Regulation 11(2) of the Housing Benefit (Persons who have attained the qualifying age for state pension credit) Regulations, where a claimant’s rent is increased on account of outstanding arrears owed by the claimant in respect of their current or former property, the shortfall cannot be covered by a DHP.

**Sanctions and reductions in benefit**

DHPs cannot meet these because to do so would undermine the effectiveness of the sanctions or reduction in benefit. These are any:

* reduction in Income Support (IS) or income-based Jobseeker’s Allowance (JSA(IB)) due to a Reduced Benefit Direction (RBD) for failure to comply with the Child Support Agency in arranging maintenance. The RBD is a reduction in benefit of 40% of the personal allowance and only applies to IS or JSA(IB)
* reduction in benefit as a result of non-attendance at a work-focused interview. This applies both where the person’s HB is reduced and when any other benefit that the person is receiving (such as IS) is subject to a sanction
* reduction or loss of benefit due to a JSA employment sanction. JSA is not payable for the period of sanction if they have contributed towards their unemployment status, for example, by leaving employment voluntarily or failing to attend a prescribed training scheme. In such cases it may be possible for a reduced rate of JSA to be paid under the JSA hardship provisions
* reduction in benefit due to a JSA sanction for 16/17-year-olds – for certain young people who receive JSA under a Severe Hardship Direction. JSA is not payable for the period of the sanction if they have contributed towards their unemployed status, for example, by leaving employment voluntarily or failing to attend a prescribed training scheme
* restriction in benefit due to a breach of a community service order, or
* reduction in UC due to a sanction as specified under regulations 100 to 114 of the UC Regulations 2013

**Benefit suspensions**

HB or UC can be suspended either because there is a general doubt about entitlement or because a claimant has failed to supply information pertinent to their claim. In such cases, a DHP cannot be paid. One of the intentions of the suspension provisions is to act as a lever to ensure that the claimant takes the necessary steps to provide the authority with the required information/evidence - paying a DHP could reduce the effectiveness of this lever.

Rent, when the person is getting Local Council Tax Support but not HB or UC housing element: in other words, when a person is only getting LCTS

**Shortfalls caused by HB or UC overpayment recovery**

When recovery of a HB or UC overpayment is taking place, such shortfalls should not be considered for a DHP.

The level and duration of DHP are at the councils’ discretion; however, the level of benefit plus the DHP must not exceed their eligible rent.

Before DHP can be paid there must be an actual claim. The councils will only accept a claim for a DHP in writing. Only the councils can receive DHP claims, they cannot be made to the Department for Work and Pensions for instance. Normally the claimant should make the claim but in certain circumstances an appointee may make them if the councils permit it.

Every claimant who is entitled to the minimum amount of HB or an award of the housing element of UC and who has a shortfall is entitled to make a claim for DHP.

**LINKS TO THE COUNCILS’ STRATEGIC OBJECTIVES**

The objectives that are relevant to this policy include:

1. Excellent delivery of key services.
2. Effective management of resources.
3. Meeting housing need.

In order to meet these objectives, the Benefit Service strives to ensure each eligible person receives the full amount of HB they are entitled to receive and to give advice on any other help they may qualify for. The Revenues & Benefits Client Officers will consider making a payment of a DHP to claimants who meet the qualifying criteria as specified in this policy. The Revenues & Benefits Client Officers will treat all applications on their individual merits and will seek through the operation of this policy to:

* Alleviate poverty.
* Support vulnerable young people in the transition to adult life.
* Support older people in their homes, particularly those who are physically or mentally frail.
* Encourage South Oxfordshire and Vale of White Horse residents to obtain and sustain employment.
* Help people with physical or mental disabilities to have equality of access to all services.
* Help residents in South Oxfordshire and Vale of White Horse remain in their homes.
* Help those who are trying to help themselves.
* Keep families together.
* Help claimants through personal crises and difficult events.

The above factors should be taken into account when making a decision. They are guides to making a decision on a DHP claim, but if a claimant does come under one or more of the expressed aims above will not automatically result in an award of DHP. The Revenues and Benefit Client Officers must take into account the claimant’s circumstances as a whole.

The councils consider that the DHP scheme should be seen as a short term emergency fund. It is not and should not be considered as a way around any current or future entitlement restrictions set out within the HB legislation.

**CLAIMING A DHP**

The councils will only accept claims for a DHP in writing. In most cases, this will be on the DHP application form (**Appendix 1 & 2**), although in certain circumstances this may not be necessary e.g. where a letter has been received with all the details that the claim form asks for. Where a request for a DHP is received, an application form will be posted to the claimant or handed over personally if at the councils’ offices.

The councils may request any reasonable evidence in support of an application for DHP. Any such request will usually be made in writing. There are no prescribed time limits for the return of the information, but if it is not supplied within one calendar month, the councils reserve the right to make a decision on the information they have. If the claimant has any difficulty in providing the information and informs the councils, the one month time limit may be extended if appropriate.

In certain circumstances, the claimant may be visited, either to collect more information, or to satisfy itself of the validity of the claim. The councils may take into account any other available evidence and reserves the right to verify any information or evidence provided by the claimant.

**PERIOD AND AMOUNT OF AWARD**

In all cases, the councils will decide the length of time for which a DHP will be awarded on the basis of the evidence supplied and the facts known. The shortest period of an award will be one week. No individual award shall exceed 52 weeks.

The start date of any award will be decided on its merits in each case. A claimant may ask for a claim for DHP to be backdated. There is no restriction on the councils in backdating a DHP, subject to the statutory limits and the 52 week period mentioned above.

Subject to the Secretary of State’s cash limit, ineligible payments as defined by statute, and the limit placed on paying up to the claimant’s eligible rent, the amount of payment will be determined by the councils.

**METHOD OF PAYMENT**

The councils will decide the most appropriate person to pay, based upon the circumstances of each case. This could include paying:

* The claimant.
* An appointee
* Their landlord or agent.
* Any thirdparty to whom it might be most appropriate to make payment.

The payment will be made for those in receipt of HB by the same method and frequency as their HB payment. For those in receipt of UC, payments will be made by bank transfer 4 weekly. Other payment frequencies may be considered on request.

**NOTIFICATION**

The councils will inform the claimant of the outcome of their claim for DHP as soon as possible after the decision has been made. Where the claim has been unsuccessful, the letter will explain the reason why it has not succeeded. Where the claim is successful, the letter will include details of:

* The period the award covers.
* The weekly amount of DHP awarded.
* The right of review and how to go about asking for a review.

**CHANGE OF CIRCUMSTANCES AND OVERPAYMENTS**

An award of DHP may need to be revised where a claimant’s circumstances have materially changed. It is required that a claimant informs the Benefit Service of any changes in circumstances in writing, within one month of the date of change. If the change of circumstance has the effect of making the HB or UC award nil, then the end date of the DHP will be the same as the HB or UC.

An award of DHP may also be stopped before the end date indicated to the claim. These are if

* The council decides that a DHP is being, and/or has been, made because a claimant has misrepresented or failed, fraudulently or otherwise, to disclose a material fact
* The claimant has been paid because of an error
* A claimant no longer needs further financial assistance towards housing costs.

The council will usually seek to recover any DHP which has been overpaid. This will be in the form of an invoice, accompanied by an overpayment letter which will detail:

* The fact that an overpayment has occurred.
* The amount of the overpayment.
* The period of the overpayment.
* The fact that the Council is going to recover the overpayment and how.
* A right of review.

Should no request for a review be received after 28 days, a debtor invoice will be sent and the overpayment will be subject to the normal debt recovery procedure.

There is no provision in the regulations to recover overpaid DHP from HB or UC.

A claimant may ask for an overpayment not to be recovered and, depending on the circumstances, the council may decide not to recover the overpayment.

**FRAUD**

The councils are committed to fight against fraud in all its forms. A claimant who tries to fraudulently claim a DHP by falsely declaring their circumstances, providing a false statement or evidence in support of their application, may have committed an offence under the Fraud Act 2006. Where it is suspected that such a fraud may have occurred, the matter will be investigated as appropriate and this may lead to criminal proceedings being instigated.

**REVIEWS**

A claimant may ask for a review of any decision in connection with a claim for DHP. This includes turning down a claim, the amount paid, how and to whom it is paid and the recovery of overpayments. Unlike HB or UC, there is no appeal to an Appeals Service Tribunal. The review process for each council is detailed below.

South Oxfordshire District Council

DHP requests for reviews at South Oxfordshire District Council will be heard by a tribunal of Councillors on the NNDR Appeals Panel. When a request for review is received for South Oxfordshire District Council, it will first be reconsidered by the Revenues and Benefits Client Manager. If the decision remains unchanged, the Committee Administrator at South Oxfordshire District Council will be contacted to arrange a meeting of the panel.

The claimant will be informed of the date and venue of the meeting and both the panel and the claimant will be sent a copy of the case papers in good time to allow the case to be considered. The claimant will be allowed to attend and put his case forward if he so wishes, or have someone represent him. Witnesses for either the claimant or the council may be called.

The decision of the panel will be final, subject to the usual statutory remedies of Judicial Review for any perceived illegality, irrationality or procedural impropriety concerning the decision and complaints to the Local Government Ombudsman for any perceived failings in the administration of the claimant’s claim.

Vale of White Horse District Council

At the Vale of White Horse District Council, reviews will be considered by the Revenues and Benefits Client Manager, or the Head of Finance in his absence. The Revenues and Benefits Client Manager will review all the relevant paperwork and his decision will be notified in writing to the claimant.

The decision of the Revenues and Benefits Client Manager will be final, subject to the usual statutory remedies of Judicial Review for any perceived illegality, irrationality or procedural impropriety concerning the decision and complaints to the Local Government Ombudsman for any perceived failings in the administration of the claimant’s claim.

**ASSESSMENT PROCEDURE**

Upon receipt of a completed application form, a Revenues and Benefits Client Officer will input the details on the internal DHP form, if it is decided no further information or evidence is necessary. The details to be put in are:

* The period for which the DHP is requested.
* The shortfall between eligible rent.
* The background to the claim.
* A decision whether an award should be made.
* The amount of the award.
* The period of the award.

This award will be made in line with this policy and the decision criteria (**Appendix 3**). A Revenues and Benefits Client Officer will then send a letter to the claimant informing him of his decision, including the details mentioned above in the section entitled notification.

The duly completed form will be sent to the Contractor and the DHP entered onto the Academy computer system if successful. The claimant will be notified in writing of the outcome.

Details of all DHP awards are kept on the spreadsheets – individual for each council and financial year.

**REFERENCE DOCUMENTS**

* The Discretionary Financial Assistance Regulation 2001 (S.I. 2001/1167)

<https://www.legislation.gov.uk/uksi/2001/1167/contents/made>

* The Discretionary Housing Payments Guidance manual (31 May 2022)

<https://www.gov.uk/government/publications/discretionary->housing-payments-guidance-manual

**APPENDICES**

1. South Oxfordshire District Council Discretionary Housing Payments Application Form
2. Vale of White Horse District Council Discretionary Housing Payments Application Form
3. Discretionary Housing Payments Criteria

Appendix 1

**Application for Discretionary Housing Payments (DHP)**

**Full Name …………………………………………………………………………………………**

**Address………………………………………………………………………………………………**

**Post Code…………………………………….**

**Housing Benefit Reference ………………………………………………………….**

**Your Telephone Number:**

**Your Email Address:**

*Please ensure that all the questions are answered as fully as possible*

1. Please confirm the name and dates of birth of every member of your household?

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| --- | --- | --- |
| Name | Date of Birth | Relationship to you  |
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1. Have you claimed a DHP before? If the answer is yes, from which council did you claim and what was the outcome of your claim?

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1. Why are you asking for extra help with your rent?

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1. Is there any prospect of your financial position improving in the near future e.g. starting work, receiving an inheritance, an award of a social security benefit etc.?

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1. What is your connection with this area? E.g. lived here all your life, work, children at school, relatives in the area etc.

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1. Why did you move into the property you are claiming a DHP for?

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1. Were you able to afford the rent when you first moved in? (Please tick appropriate box below)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please tell us how you were able to afford it?

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1. What steps did you take to check the rent you would pay would be reasonable and not restricted before moving in?

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1. What steps have you taken to negotiate a rent reduction with your landlord?

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1. Have you considered, or tried, to move to cheaper accommodation? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please give details. If no, is there any reason why you could not move if you could find cheaper accommodation?

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How many bedrooms in your property?

How much notice would you have to give?

When does your current tenancy end?

Will you face eviction if your rent is not fully paid?

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1. Please list all details of income and expenditure you make. Any income or expenditure not named, please enter into the blank boxes.

**INCOME**

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| --- | --- | --- |
| **Type of income** | **Amount** | **Frequency e.g. weekly, monthly etc.** |
| **Wages/Salary - Self** | **£** |  |
| **Wages/Salary - Partner** | **£** |  |
| **Income from Self-Employment** | **£** |  |
| **Job Seeker’s Allowance** | **£** |  |
| **Income Support** | **£** |  |
| **Tax Credits** | **£** |  |
| **State Retirement Pension/Pension Credit** | **£** |  |
| **Private/Works Pension** | **£** |  |
| **Child Benefit** | **£** |  |
| **Employment and Support Allowance** | **£** |  |
| **Attendance Allowance** | **£** |  |
| **Disability Living Allowance/** **Personal Independence Payment:*** **Care**
* **Mobility**
* **Motability (car loan)**
 | **£****£****£** |  |
| **Carer’s Allowance** | **£** |  |
| **Contributions from Household Members** | **£** |  |
| **Rent from Lodgers and Tenants** | **£** |  |
| **Foster/Guardianship Payments** | **£** |  |
| **Universal Credit**  | **£** |  |
| **Any other income** | **£** |  |
|  | **£** |  |

If you have children from a previous relationship, do you receive any maintenance payments for them?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Yes** |  | How much? | **£** | How often? |  |  | **No** |  |

If no, what steps have you taken to obtain maintenance payments?

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If you receive Universal Credit, please complete the section below:

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| Your date of birth: Your National Insurance number:Your partner’s date of birth: Your partner’s National Insurance number: |
|  |
| Would you like us to pay Discretionary Housing Payments direct to your landlord? Yes/NoIf you would like us to pay Discretionary Housing Payments direct to your landlord or agent, please provide your landlord’s or agent’s full name and address below:If you would like us to pay Discretionary Housing Payments into a bank or building society account, please provide the account details in the table below. If you wish us to pay direct to your landlord, please complete the table below with the landlord’s bank details. If you are a Housing Association tenant, you will not need to complete this. |
|

|  |  |  |
| --- | --- | --- |
| Bank Name | Sort Code | Account Number |
|  |  |  |

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| Name of the account holder: |

**EXPENDITURE (EXCLUDING DEBTS)**

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| --- | --- | --- |
| **Type of Expenditure** | **Amount** | **Frequency e.g. weekly, monthly etc.** |
| **Mortgage Payments** | **£** |  |
| **Rent** | **£** |  |
| **Council Tax** | **£** |  |
| **Water Rates** | **£** |  |
| **Ground Rent/Service Charge** | **£** |  |
| **Building/Contents Insurance** | **£** |  |
| **Life Assurance** | **£** |  |
| **Pension**  | **£** |  |
| **Gas** | **£** |  |
| **Electricity** | **£** |  |
| **Telephone:** **Landline** **Mobile** **Mobile** | **£****£****£** |  |
| **Food & Toiletries** | **£** |  |
| **T.V. Licence** | **£** |  |
| **Sky/Cable** | **£** |  |
| **Internet** | **£** |  |
| **Maintenance Payments You Make** | **£** |  |
| **School Meals** | **£** |  |
| **Clothing** | **£** |  |
| **Laundry** | **£** |  |
| **Prescriptions** | **£** |  |
| **Childminding** | **£** |  |

**EXPENDITURE cont.**

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| --- | --- | --- |
| **Type of Expenditure** | **Amount** | **Frequency e.g. weekly, monthly etc.** |
| **Travel Expenses (Not Car Related)** | **£** |  |
| **Car Loan Repayments** | **£** |  |
| **Road Tax** | **£** |  |
| **MOT** | **£** |  |
| **Car Insurance** | **£** |  |
| **Petrol** | **£** |  |
| **Haircuts** | **£** |  |
| **Cigarettes** | **£** |  |
| **Drink** | **£** |  |
| **Entertainment** | **£** |  |
| **Holidays** | **£** |  |
| **Pets (food, insurance, vet bills etc.)** | **£** |  |
| **Other, please state** | **£** |  |
|  | **£** |  |
|  | **£** |  |

1. Do you have any debts or loans (including rent arrears, credit/debit cards, fines, HP, DWP debts etc)? If so, please give details of amounts outstanding and with whom.

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| **Amount** | **What is the Debt** | **Regular Amount Paid Towards the Debt**  | **Date Debt Due to be Cleared** |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
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| £ |  |  |  |

1. Do you have any *regular* expenses due to disabilities not included in any headings in the previous table?

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| Amount | Frequency weekly, monthly, etc | Reason for the expense |
| £ |  |  |
| £ |  |  |
| £ |  |  |

1. Have you had any *one off* expenses due to disabilities, or are you expecting any in the near future? Please state the amount(s) and purpose(s).

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| --- | --- |
| £ |  |
| £ |  |
| £ |  |

1. Please give details of any savings or current accounts you and your partner possess and the amount currently in each account.

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| --- | --- | --- |
| **Name** | **Account Number** | **Amount** |
|  |  | **£** |
|  |  | **£** |
|  |  | **£** |
|  |  | **£** |

1. Do you have any capital assets e.g. other property, stocks and shares, more than one car etc? Please give details.

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1. Are you a foster carer in between placements?

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| **Yes** |  |  | **No** |  |

If yes, please give the date of your last placement and the expected date of your next placement

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1. Is the application for assistance due to any non-dependant deduction we are making from your benefits entitlement? (Please tick appropriate box below)

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| **Yes** |  |  | **No** |  |

If yes, are there any reasons why the non-dependant cannot afford to cover the amount we are deducting?

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1. Do you have any friends or relatives with whom you could live?

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1. Are friends or family able to assist you financially? Please give details

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1. Has there been a death in your household within the last 12 months? How has this affected your situation, such as your income and your outgoings?

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1. Have you recently become separated or divorced? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please tell us the date this happened:

How has this affected your situation, such as your income and your outgoings?

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1. Do you, or any member of your family, have any disabilities or health problems? (please tick appropriate box below)

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| **Yes** |  |  | **No** |  |

If yes, please state them:

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**(Please note: It would be helpful if you could provide documentary evidence from a medical practitioner to confirm any health problems stated above. We realise this is sensitive information but you will improve your chance of being successful in your application if we are aware of your situation).**

Does your medical condition, or that of a family member, mean you have to pay extra transport costs? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please give details

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Do you have extra laundry charges due to your medical condition, or that of a family member? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If you have any other expenses linked to your medical condition or that of a family member, please give full details and provide evidence where possible.

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1. Has your property been significantly adapted due to you or your family’s disabilities?

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please provide details and supporting documentation (for example invoices from your builder, plumber; letter from your social worker, occupational therapist, etc).

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1. Do you have any regular prescription charges? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please provide details and supporting documentation (for example a letter from your doctor or health visitor or repeat prescription list).

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1. Are you currently on the councils housing register? If not, please confirm why? If you are, please confirm whether your bidding number and whether you are actively bidding?

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1. Is there any other information you feel would help your claim for a DHP?

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| **Please provide us with the following documents:**1. **Proof of your rent. This could be a tenancy agreement or a letter from your landlord.**
2. **Proof of any rent arrears you may have**
3. **If you receive Universal Credit, a screenshot from your journal. This should include the breakdown of your award and should clearly show the amount you have been awarded to cover your housing costs and any deductions being made from your Universal Credit.**
 |

**DECLARATION**

* + I declare that the information I have given on this form is true and complete.
	+ I understand that if I give false or misleading information, you will not pay me discretionary housing payments.
	+ I authorise the council to verify the information, where considered necessary.
	+ I agree to inform the council at once of any changes in my financial circumstances, changes to the number of people in my household and changes to my rental payments and any other changes, which would affect my entitlement to discretionary housing payments.
	+ I understand that the council may use the information given on this form to prevent and detect fraud.
	+ If I try to fraudulently claim discretionary housing payments by falsely declaring my circumstances, providing a false statement or evidence in support of my application, I may have committed an offence under the Fraud Act 2006. Where it is suspected that such a fraud may have occurred, the matter will be investigated as appropriate and this may lead to criminal proceedings being instigated.
	+ I have read and understood this declaration.

**Signature Date**

The council take data protection seriously and to find out what we do with your personal data and your rights over your data please read our service area specific privacy notice “Housing benefit, council tax reduction and discretionary housing payment” and information about privacy notices which can be found at [https://www.southoxon.gov.uk/south-oxfordshire-district-council/about-the-council/privacy](https://www.southoxon.gov.uk/south-oxfordshire-district-council/about-the-council/privacy/)

Once completed you can email this form to **sodc.benefits@secure.capita.co.uk** or alternatively post it to South Oxfordshire District Council, Benefits Section, PO Box 870, Erith, Kent, DA8 1UN.

**Alternative formats**

‘You can get our DHP application in alternative formats, upon request. These include large print, Braille, audio cassette, computer disk and email.

Please contact the Benefits Department.

(     ***0345 302 2313***

:    **sodc.benefits@secure.capita.co.uk**

Appendix 2

**Application for Discretionary Housing Payments (DHP)**

**Full Name ……………………………………………………………………………………………**

**Address………………………………………………………………………………………………**

**Post Code…………………………………….**

**Housing Benefit Reference ………………………………………………………………….**

**Your Telephone Number:**

**Your Email Address:**

*Please ensure that all the questions are answered as fully as possible*

1. Please confirm the name and dates of birth of every member of your household?

|  |  |  |
| --- | --- | --- |
| Name | Date of Birth | Relationship to you  |
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1. Have you claimed a DHP before? If the answer is yes, from which council did you claim and what was the outcome of your claim?

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1. Why are you asking for extra help with your rent?

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1. Is there any prospect of your financial position improving in the near future e.g. starting work, receiving an inheritance, an award of a social security benefit etc.?

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1. What is your connection with this area? E.g. lived here all your life, work, children at school, relatives in the area etc.

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1. Why did you move into the property you are claiming a DHP for?

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1. Were you able to afford the rent when you first moved in? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please tell us how you were able to afford it?

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1. What steps did you take to check the rent you would pay would be reasonable and not restricted before moving in?

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1. What steps have you taken to negotiate a rent reduction with your landlord?

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1. Have you considered, or tried, to move to cheaper accommodation? (Please tick appropriate box below)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please give details. If no, is there any reason why you could not move if you could find cheaper accommodation?

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How many bedrooms in your property?

How much notice would you have to give?

When does your current tenancy end?

Will you face eviction if your rent is not fully paid?

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1. Please list all details of income and expenditure you make. Any income or expenditure not named, please enter into the blank boxes.

**INCOME**

|  |  |  |
| --- | --- | --- |
| **Type of income** | **Amount** | **Frequency e.g. weekly, monthly etc.** |
| **Wages/Salary - Self** | **£** |  |
| **Wages/Salary - Partner** | **£** |  |
| **Income from Self-Employment** | **£** |  |
| **Job Seeker’s Allowance** | **£** |  |
| **Income Support** | **£** |  |
| **Tax Credits** | **£** |  |
| **State Retirement Pension/Pension Credit** | **£** |  |
| **Private/Works Pension** | **£** |  |
| **Child Benefit** | **£** |  |
| **Employment and Support Allowance** | **£** |  |
| **Attendance Allowance** | **£** |  |
| **Disability Living Allowance/** **Personal Independence Payment:*** **Care**
* **Mobility**
* **Motability (car loan)**
 | **£****£****£** |  |
| **Carer’s Allowance** | **£** |  |
| **Contributions from Household Members** | **£** |  |
| **Rent from Lodgers and Tenants** | **£** |  |
| **Foster/Guardianship Payments** | **£** |  |
| **Universal Credit**  | **£** |  |
| **Any other income** | **£** |  |
|  | **£** |  |

If you have children from a previous relationship, do you receive any maintenance payments for them?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Yes** |  | How much? | **£** | How often? |  |  | **No** |  |

If no, what steps have you taken to obtain maintenance payments?

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If you receive Universal Credit, please complete the section below:

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| --- |
| Your date of birth: Your National Insurance number:Your partner’s date of birth: Your partner’s National Insurance number: |
|  |
| Would you like us to pay Discretionary Housing Payments direct to your landlord? Yes/NoIf you would like us to pay Discretionary Housing Payments direct to your landlord or agent, please provide your landlord’s or agent’s full name and address below:If you would like us to pay Discretionary Housing Payments into a bank or building society account, please provide the account details in the table below. If you wish us to pay direct to your landlord, please complete the table below with the landlord’s bank details. If you are a Housing Association tenant, you will not need to complete this. |
|

|  |  |  |
| --- | --- | --- |
| Bank Name | Sort Code | Account Number |
|  |  |  |

 |
| Name of the account holder: |

**EXPENDITURE (EXCLUDING DEBTS)**

|  |  |  |
| --- | --- | --- |
| **Type of Expenditure** | **Amount** | **Frequency e.g. weekly, monthly etc.** |
| **Mortgage Payments** | **£** |  |
| **Rent** | **£** |  |
| **Council Tax** | **£** |  |
| **Water Rates** | **£** |  |
| **Ground Rent/Service Charge** | **£** |  |
| **Building/Contents Insurance** | **£** |  |
| **Life Assurance** | **£** |  |
| **Pension**  | **£** |  |
| **Gas** | **£** |  |
| **Electricity** | **£** |  |
| **Telephone:** **Landline** **Mobile** **Mobile** | **£****£****£** |  |
| **Food & Toiletries** | **£** |  |
| **T.V. Licence** | **£** |  |
| **Sky/Cable** | **£** |  |
| **Internet** | **£** |  |
| **Maintenance Payments You Make** | **£** |  |
| **School Meals** | **£** |  |
| **Clothing** | **£** |  |
| **Laundry** | **£** |  |
| **Prescriptions** | **£** |  |
| **Childminding** | **£** |  |

**EXPENDITURE cont.**

|  |  |  |
| --- | --- | --- |
| **Type of Expenditure** | **Amount** | **Frequency e.g. weekly, monthly etc.** |
| **Travel Expenses (Not Car Related)** | **£** |  |
| **Car Loan Repayments** | **£** |  |
| **Road Tax** | **£** |  |
| **MOT** | **£** |  |
| **Car Insurance** | **£** |  |
| **Petrol** | **£** |  |
| **Haircuts** | **£** |  |
| **Cigarettes** | **£** |  |
| **Drink** | **£** |  |
| **Entertainment** | **£** |  |
| **Holidays** | **£** |  |
| **Pets (food, insurance, vet bills etc.)** | **£** |  |
| **Other, please state** | **£** |  |
|  | **£** |  |
|  | **£** |  |

1. Do you have any debts or loans (including rent arrears, credit/debit cards, fines, HP, DWP debts etc)? If so, please give details of amounts outstanding and with whom.

|  |  |  |  |
| --- | --- | --- | --- |
| **Amount** | **What is the Debt** | **Regular Amount Paid Towards the Debt**  | **Date Debt Due to be Cleared** |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |
| £ |  |  |  |

1. Do you have any *regular* expenses due to disabilities not included in any headings in the previous table?

|  |  |  |
| --- | --- | --- |
| Amount | Frequency weekly, monthly, etc | Reason for the expense |
| £ |  |  |
| £ |  |  |
| £ |  |  |

1. Have you had any *one off* expenses due to disabilities, or are you expecting any in the near future? Please state the amount(s) and purpose(s).

|  |  |
| --- | --- |
| £ |  |
| £ |  |
| £ |  |

1. Please give details of any savings or current accounts you and your partner possess and the amount currently in each account.

|  |  |  |
| --- | --- | --- |
| **Name** | **Account Number** | **Amount** |
|  |  | **£** |
|  |  | **£** |
|  |  | **£** |
|  |  | **£** |

1. Do you have any capital assets e.g. other property, stocks and shares, more than one car etc? Please give details.

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1. Are you a foster carer in between placements?

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please give the date of your last placement and the expected date of your next placement

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1. Is the application for assistance due to any non-dependant deduction we are making from your benefits entitlement? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, are there any reasons why the non-dependant cannot afford to cover the amount we are deducting?

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1. Do you have any friends or relatives with whom you could live?

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1. Are friends or family able to assist you financially? Please give details

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1. Has there been a death in your household within the last 12 months? How has this affected your situation, such as your income and your outgoings?

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1. Have you recently become separated or divorced? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please tell us the date this happened:

How has this affected your situation, such as your income and your outgoings?

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1. Do you, or any member of your family, have any disabilities or health problems? (please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please state them:

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**(Please note: It would be helpful if you could provide documentary evidence from a medical practitioner to confirm any health problems stated above. We realise this is sensitive information but you will improve your chance of being successful in your application if we are aware of your situation).**

Does your medical condition, or that of a family member, mean you have to pay extra transport costs? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please give details

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Do you have extra laundry charges due to your medical condition, or that of a family member? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If you have any other expenses linked to your medical condition or that of a family member, please give full details and provide evidence where possible.

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1. Has your property been significantly adapted due to you or your family’s disabilities?

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please provide details and supporting documentation (for example invoices from your builder, plumber; letter from your social worker, occupational therapist, etc).

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1. Do you have any regular prescription charges? (Please tick appropriate box below)

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| --- | --- | --- | --- | --- |
| **Yes** |  |  | **No** |  |

If yes, please provide details and supporting documentation (for example a letter from your doctor or health visitor or repeat prescription list).

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1. Are you currently on the councils housing register? If not, please confirm why? If you are, please confirm whether your bidding number and whether you are actively bidding?

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1. Is there any other information you feel would help your claim for a DHP?

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| **Please provide us with the following documents:**1. **Proof of your rent. This could be a tenancy agreement or a letter from your landlord.**
2. **Proof of any rent arrears you may have**
3. **If you receive Universal Credit, a screenshot from your journal. This should include the breakdown of your award and should clearly show the amount you have been awarded to cover your housing costs and any deductions being made from your Universal Credit.**
 |

**DECLARATION**

* + I declare that the information I have given on this form is true and complete.
	+ I understand that if I give false or misleading information, you will not pay me discretionary housing payments.
	+ I authorise the council to verify the information, where considered necessary.
	+ I agree to inform the council at once of any changes in my financial circumstances, changes to the number of people in my household and changes to my rental payments and any other changes, which would affect my entitlement to discretionary housing payments.
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	+ If I try to fraudulently claim discretionary housing payments by falsely declaring my circumstances, providing a false statement or evidence in support of my application, I may have committed an offence under the Fraud Act 2006. Where it is suspected that such a fraud may have occurred, the matter will be investigated as appropriate and this may lead to criminal proceedings being instigated.
	+ I have read and understood this declaration.

**Signature Date**

The council take data protection seriously and to find out what we do with your personal data and your rights over your data please read our service area specific privacy notice “Housing benefit, council tax reduction and discretionary housing payment” and information about privacy notices which can be found at <https://www.whitehorsedc.gov.uk/vale-of-white-horse-district-council/about-the-council/privacy/>

**Once completed you can email this form to** **vowh.benefits@secure.capita.co.uk or alternatively post it to Vale of White Horse District Council, Benefits Section, PO Box 880, Erith, Kent, DA8 1UN**

**Alternative formats**

‘You can get our DHP application in alternative formats, upon request. These include large print, Braille, audio cassette, computer disk and email.

Please contact the Benefits Department.

(     ***0345 302 2315***

:    **vowh.benefits@secure.capita.co.uk**

Appendix 3

# DISCRETIONARY HOUSING PAYMENTS – DECISION CRITERIA

## GENERAL CRITERIA

* Did claimant check to see if rent would be restricted before moving in?
* Has the claimant claimed DHP before? If so, with whom and what was the outcome?
* Why did the claimant move to the property? Were there problems staying in the previous property?
* Has the claimant tried to negotiate a rent reduction with their landlord?
* Has the claimant tried to move to cheaper accommodation?
* Could the claimant live with friends or relatives?
* Is the claimant undertaking further education?
* How long has the claimant lived in the area?
* Has the property been significantly adapted because of the disablement needs of someone in the household?
* Is the claimant a foster carer where there is a gap between placements?
* Has the claimant’s Housing Benefit been restricted by the social sector bedroom restriction?

## FAMILY CRITERIA

* Is the claimant a lone parent with children under school age?
* How many children does the claimant have? What are their ages?
* Do the children attend school in the area?
* If the claimant does not have custody of the children, is the accommodation to allow them to live near them?
* Does the claimant need an extra room for children to stay where they have joint custody or a staying order?
* Has there been a death in the family in the past 12 months?
* Has the claimant or a member of their immediate family (spouse or child) suffered from a severe illness in the past 12 months? Do they have special educational/medical needs?
* Is the accommodation to live near to relatives?

## FINANCIAL CRITERIA

* Could friends or relatives help financially?
* Does the claimant have rent, Council Tax arrears, or other debts reasonably incurred?
* Is the claimant facing eviction or court action for those arrears?
* Is the claimant in full or part-time employment?
* Is the claimant claiming all the state benefits they are entitled to?
* Does the claimant have any capital?
* Does the claimant’s expenditure exceed their income?
* Is the claimant’s income below Income Support/Universal Credit/Pension Credit (Guarantee) levels?
* Is there any prospect of the claimant’s financial position improving in the near future e.g. finding work, an inheritance or benefit award?
* Is the claimant affected by the benefit cap?

**REMEMBER! -The above is not an exhaustive list and all of the claimant’s individual circumstances must always be taken into account.**