



**Housing Benefit / Council Tax Support**  
Self-employed earnings information

**Customer Accounts**

Central Bedfordshire Council  
Watling House  
High Street North  
Dunstable  
Bedfordshire  
LU6 1LF

Please complete this form and return it to the address above. If you have any questions, please contact us:

**Telephone** 0300 300 8306  
**Email** customer.accounts@centralbedfordshire.gov.uk  
**www.centralbedfordshire.gov.uk**

**Section 1 – About yourself**

Title	<input type="text"/>	First names	<input type="text"/>	Surname	<input type="text"/>
Address	<input type="text"/>				
	Postcode: <input type="text"/>				

**Section 2 – About your business**

Name of business	<input type="text"/>				
Business Address	<input type="text"/>				
	Postcode: <input type="text"/>		Business phone no: <input type="text"/>		
Type of business	<input type="text"/>				
Date business started	<input type="text"/> / <input type="text"/> / <input type="text"/>	Start date of your current financial year	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Average hours worked per week	<input type="text"/>				
Is your business a partnership?	<input type="checkbox"/> Yes	If 'Yes', what percentage of the total profit/loss is yours?	<input type="text"/> %		
	<input type="checkbox"/> No				
Is your partner a business partner?	<input type="checkbox"/> Yes	If 'Yes', what percentage of the profit/loss is theirs?	<input type="text"/> %		
	<input type="checkbox"/> No				
By 'partner' we mean husband, wife, civil partner or a person you live with as if you were their husband or wife.					
Is your partner on the business payroll?	<input type="checkbox"/> Yes	If 'Yes', what are their earnings?	£	<input type="text"/>	every
	<input type="checkbox"/> No				
Please name any other people on the payroll and the amount they are paid.	<input type="text"/>				

### Section 3 – About your business income

National Insurance – Do you hold an exemption certificate?

Yes  No

If 'Yes', please send it in with this form.

Tax – Do you have your latest self assessment tax form?

Yes  No

If 'Yes', please send it in with this form.

What is your Unique Taxpayer Reference Number?

Do you have professionally prepared certified accounts for the last financial year?  Yes  No

If 'Yes', please send in an original set of these with this form and go to **Section 5 and 6**.

If 'No', please state the reason why and the date you expect to receive them:

If you do not have any prepared accounts for the last financial year or have been trading for less than a year, please complete **Section 4, 5 and 6**.

N.B. If your business has recently started trading you will be requested to enter details for projected income and expenditure.

### Section 4 – Details of income and expenditure

Please complete this section with details of your income and expenditure for one of the following:

- If you do not have any prepared accounts, for the last financial year
- If you have been trading for more than 6 months for the period you have been trading
- If you have been trading for less than 6 months, please provide your projected income for the first 6 months of trading

Please tell us the income and expenditure period you are using below:

Start date of income period

End date of income period

#### Income Received

#### Total

Sales / Takings / Income

£

Tips /Gratuities / Royalties

£

invoices raised not paid

£

VAT refunds (For VAT registered only)

£

#### Expenditure

#### Total

Purchases

£

VAT paid out (For VAT registered only)

£

Drawings (cash or stock)

£

Opening stock

£

## Section 4 – Details of income and expenditure (continued)

Wages paid	To self	£
	To partner	£
	To others	£

### Vehicles

Do you run a vehicle(s) solely for the purpose of your business? e.g. a van or lorry  Yes  No

Do you run a vehicle that is used for both business and personal use?  Yes  No

Vehicle expenses	Total	Percentage business use
Petrol / Diesel	£	%
Maintenance	£	%
Road Tax	£	%
Vehicle Insurance	£	%
Vehicle hire and leasing charges	£	%
Vehicle repairs and vehicle replacement	£	%
Hackney carriage licence (i.e. Taxis)	£	%

### Premises

Do you use a room(s) in your home for the purposes of your business?  Yes  No

If 'No', you do not need to complete questions below about rooms and property outgoings.

If 'Yes', how many rooms?

How many hours per week do you work from this room(s)?

Please state the **total** number of rooms in your property excluding toilets and bathrooms

Do you own or rent separate premises for your business?  Yes  No

Property outgoings	Home total	Business property total
Rent / Mortgage interest payments	£	£
Business rates		£
Water rates		£
Heating	£	£
Lighting	£	£
Building insurance	£	£

## Section 4 – Details of income and expenditure (continued)

### Insurance

**Total**

Public liability Insurance	£	
Insurance to cover the cost or repair and replacement of a business asset	£	

### Business Loans

Purpose of loan			
Amount of loan	£	Repayment period	
Capital amount repayable	£	Monthly interest	£

**Please enclose a copy of the loan agreement**

### Other Expenses

Type of expense	Total	Business percentage
Advertising	£	%
Printing and Stationary	£	%
Postage, carriage and delivery costs	£	%
Telephone	£	%
Bank charges	£	%
Business, legal and accountancy fees	£	%
Bad Debts (where legal action for recovery has been taken and the debt is over 12 months old)	£	%
Repair and replacement of business assets (do not include motoring). Please give details: ..... ..... .....	£	%
Business entertainment	£	%
Leasing charges (do not include motoring)	£	%
Any other expenses: ..... ..... ..... .....	£	%

**You may be contacted to supply evidence of some of the expenses detailed above**

## Section 5 – Personal pension scheme

If you contribute into a personal pension scheme please state:

Amount paid

£

Frequency (weekly, monthly, etc)

**Please send in proof of these payments.**

## Section 6 – Declaration

**Please read this declaration carefully before you sign and date it.**

I understand the following:

- I declare that the information I have given on this form is correct and complete as far as I know and believe.
- I understand that if I knowingly give information that is incorrect or incomplete, I may be liable to prosecution or other action.
- I agree that you will use the information provided to process my claim for Housing Benefit or Council Tax Support or both. You may check some of the information with other sources as allowed by the law.
- I agree to tell Customer Accounts of any changes that may affect my claim.

**Signature**

**Date**