

Council Benefits - Self Employed Earnings

Use this form to provide details of your self employed earnings



Thank you for your claim for Housing Benefits. So that we can work out your correct amount of Housing and Council Tax benefits, please complete this form using **BLACK INK** and return to Pennyfarthing House, 18 Pennyfarthing Street, Salisbury, SP1 1HJ.

Office use only

1. About yourself

Title	First Names	Surname
You <input type="text"/>	<input type="text"/>	<input type="text"/>
Your home address	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
Your home telephone number	<input type="text"/>	

2. About your Business

Name and address of your business	<input type="text"/>	
Your business telephone number	<input type="text"/>	
What is the nature of your business ?	<input type="text"/>	
Do you have a partner in the business ? If yes, we will need to see your partnership agreement.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you don't have an agreement how do you split the profits ? (e.g. 50/50)	<input type="text"/>	
What date did your business start trading ?	<input type="text"/>	
What date does your financial year start ?	<input type="text"/>	
How many hours per week do you work, on average ?	<input type="text"/>	
What are your normal hours of work ? (e.g. 9am - 5pm)	<input type="text"/>	

3. About your Business Records

Do you employ an accountant ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what is your accountant's name, address and telephone number ?	<input type="text"/>	
Have you any prepared accounts for the last financial year ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you have answered 'Yes', please send these in with this form (we cannot accept photocopies).		

3. About your Business Records (continued)

If you don't have any prepared accounts please say when you expect that these will be available

Why are your accounts not available now ?

Do you have your latest tax assessment from the Tax Office ?

Yes

No

If you have answered 'Yes', please send these in with this form (we cannot accept photocopies)

If 'No', please say when you expect this will be available

4. About your Business Income

ONLY COMPLETE SECTIONS 4,5 & 6 IF YOU ARE UNABLE TO PROVIDE TRADING ACCOUNTS FOR THE LAST FINANCIAL YEAR

Business Period

From

To

This should be your last financial year or, if you have been trading for less than a year, you should enter a business period from the date you started trading to the current date.

Please provide the following details for the above business period:

Total income to your business from trading/sales/services provided

VAT refunded

VAT paid

Government Training Allowance (if applicable)

Period Training Allowance awarded

From

To

GROSS PROFIT

5. National Insurance and Pension Details

Do you have a national insurance exemption certificate ?

Yes

No

Do you pay towards a Private Pension Scheme ?

Yes

No

If Yes, please give the amount and frequency

Frequency

We need to see proof of any contributions to a private pension scheme. Please provide documents from your pension provider. (we cannot accept photocopies).

6. About your Business Expenses

Please include only those expenses which relate solely to your business in this section

Purchase stock	£	:	
Wages to self (Drawings)	£	:	
Wages to spouse	£	:	
Wages to others	£	:	
Rent for business premises	£	:	
Business Rates	£	:	
Heating and Lighting	£	:	
Telephone	£	:	
Business Insurance (please include your agreement)	£	:	
Advertising	£	:	
Printing and Stationery	£	:	
Postage	£	:	
Accountants charges	£	:	
Bank charges	£	:	
Interest on Business Loan (please include copy of agreement)	£	:	
Repairs/Replacement of Business Assets/Equipment	£	:	
Total Motoring Expenses	£	:	
Include; Car Lease/Loan interest charges	£	:	
Fuel	£	:	
Insurance	£	:	
Road Tax	£	:	
Repairs	£	:	
Who owns/leases the vehicle(s)	The Business ?	<input type="checkbox"/>	Yourself ? <input type="checkbox"/>
Do you have separate business and domestic vehicles ?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Is (are) the vehicle(s) used outside the business ?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Other Expenses

Please give details of all other expenses solely incurred as a result of carrying on the business

Item	Amount
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>
<input type="text"/>	£ : <input type="text"/>

Proof - We may need to see some proof of these expenses, If so, we will write to you.

7. Declaration and other Information

Is it reasonable for the Council to assume that the business trading figure for the next 6 months will be similar to the figures you have declared on this form ?

Yes No

If no, please state why.

Please read the following declaration carefully and then sign and date the form in the space provided

- ① I declare that to the best of my knowledge the information I have given is true and complete.
- ② I understand that to give false information may lead to prosecution.
- ③ I authorise the Council to check any information given by me should they think it necessary.
- ④ I will let the Council know straight away, in writing, if there are any changes in my circumstances, so that my benefit can be worked out again.

Signed

Date

Please use the space below to provide any other information