Landlord Declaration Form

LANCASTER CITY COUNCIL

Promoting City, Coast & Countryside

This form is to be completed by your landlord or landlady, or the agent authorised to act for them.

When completed, please return it immediately. DO NOT DELAY returning your application form if you are waiting for your landlord to complete this form.

Your entitlement to Housing Benefit may be affected if you do not return this Landlord Declaration Form.

If you have any queries regarding this, please contact the Benefits Section.

To be completed by your landlord/landlady or agent.

Please provide the following details in **black ink** and answer every question:

Your full name

Your business address

Postcode

Your telephone number

Address of rented property if different from yours. Please give flat number or room number as appropriate

Postcode

I am the owner of the property (✔ as appropriate) No ☐ Yes ☐

I am the agent for the property (✔ as appropriate) No ☐ Yes ☐

Please send written authority from the owner authorising you to act for them unless you have already done so.

If you are not the owner of the property but the owner's agent please state:

Full name of Owner

Business address of Owner

Postcode

CHARTER MARK CUSTOMER SERVICE EXCELLENCE

POSITIVE ABOUT DISABLED PEOPLE

PLEASE PROVIDE THE FOLLOWING DETAILS ABOUT THE TENANCY OF YOUR PROPERTY.

Name of tenant

Name of any joint tenant(s)

Date tenancy started / /

Date moved into property / /

How much rent do you charge? £

every

(week/fortnight/4 weeks/month)

Amount of rent arrears £

Period the arrears cover From To

A Tenancy Agreement has been given to the tenant **No** ☐ **Yes** ☐

When is the next rent increase due? / /

How many floors are there in the building?

Which floor is the tenant's accommodation on?

Does the tenant occupy only part of the building? **No** ☐ **Yes** ☐

Name of previous tenant

Date previous tenant vacated the property / /

(✔ as appropriate)

Is the property accredited under the Accredited Property Scheme run by Lancaster City Council? **No** ☐ **Yes** ☐

Do you employ this tenant in any capacity? **No** ☐ **Yes** ☐ We will write to you about this.

Who receives the Council Tax Bill for the property? **Landlord or agent** ☐ **Tenant** ☐

Who pays the water charges direct to the water authority? **Landlord or agent** ☐ **Tenant** ☐

Does your rent include any of the following? (Please tick ✔)			If 'Yes', please state how much
Hot water	No ☐	Yes ☐	£
Lighting	No ☐	Yes ☐	£
Heating	No ☐	Yes ☐	£
Fuel for cooking	No ☐	Yes ☐	£
Personal care and support	No ☐	Yes ☐	£
Medical or nursing care	No ☐	Yes ☐	£
Cleaning the inside of the accommodation	No ☐	Yes ☐	£
Personal laundry	No ☐	Yes ☐	£
Laundry facilities	No ☐	Yes ☐	£
Satellite TV	No ☐	Yes ☐	£
TV licence	No ☐	Yes ☐	£
Garage or parking space or facility or permit	No ☐	Yes ☐	£
Gardening	No ☐	Yes ☐	£
Does the rent include money for meals?	No ☐	Yes ☐	£

If **'Yes'**, please tick which meals you provide Breakfast ☐ Lunch ☐ Evening Meal ☐

Are there any other services included in the rent? No ☐ Yes ☐

If **'Yes'**, please state what these other services are in the box below.

DECLARATION

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

I **understand** the following

- That Housing Benefit payments are not payments of rent. If I receive Housing Benefit payments on behalf of my tenant, it does not mean that there is a rental contract between myself and the Council. It is my tenant's responsibility to pay rent to me.

- That if I receive Housing Benefit payments on behalf of my tenant, I will be obliged to repay any monies that are overpaid and which are recoverable by law. I understand that you can take the amount of overpaid benefit from the payments I get for other tenants without this affecting their rent liability to me.

- That you can only give me information about my tenant's claim if you pay me direct and that information will only be about: how much you will pay, when you will pay it from, how often and information about any overpayment you recover from me. You may share other information with me but only if my tenant has given express permission.

- That I must inform you immediately, in writing, of any changes in my tenant's circumstances which I may be expected to know about and which may affect their entitlement to Housing Benefit. This specifically includes when a tenant changes address including a flat or room at the same address.

- That it is a criminal offence for a person who dishonestly, knowingly, or without reasonable excuse, fails to promptly notify the Council of a change in circumstances that could affect Housing Benefit entitlement or the amount of benefit payable.

- That if I receive any payments of Housing Benefit for this tenant and I know or believe that they are not entitled to Housing Benefit, I will be committing an offence and will be prosecuted.

  I **declare** that the information I have given on this form is correct and complete and I understand that I will be liable for prosecution should any statement I have made be found to be false.

Your signature

Your full name (please print)

Date / /

All the information you supply will be held in confidence by the Council and will only be disclosed in accordance with the terms of the Data Protection Act. Information may be shared with other services within Lancaster City Council, if the law allows this.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.