REVENUE SERVICES

LANCASTER CITY COUNCIL
Promoting City, Coast & Countryside

Please complete this form if either your income/circumstances or the income/circumstances of anyone living with you changes.

I wish to notify you of the following changes in income and/or circumstances as this may affect my claim for Housing Benefit/Council Tax Support**.** I enclose documentary evidence of this change (pay-slips, benefit award notice, bank statements etc).

My name is:

My address is:

Details of change: (if you need more space, please attach a separate sheet)

Please remember to provide full documentary evidence of this change in circumstances.

Date of change:

Declaration:
I wish to declare this change in my circumstances or the circumstances of someone who lives with me. This change has occurred since I made my claim for Housing Benefit/Council Tax Support or since I last notified you of a change in circumstances.

I understand that it is a criminal offence to knowingly or dishonestly make a false statement in support of my benefit claim or fail to promptly notify a change in my circumstances, or those of someone who lives with me, that may affect the benefit I am entitled to.

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

Signed……..Date…….

Please return this form to:

Benefits and Customer Services
Revenue Services
Town Hall
Lancaster LA1 1PJ

CUSTOMER SERVICE EXCELLENCE

POSITIVE ABOUT DISABLED PEOPLE