



Northumberland
County Council

Benefit Section, Wansbeck Square, Ashington,
Northumberland, NE63 9XL
Telephone: 0345 600 6400
Email:benefits@northumberland.gov.uk
Website: www.northumberland.gov.uk

OFFICE USE ONLY

Issued _____

Received _____

**Housing Benefit & Council Tax Support
Self-Employed Income Form**

PART 1 – ABOUT YOU

Claim Ref			
Name			
Home Address			
Post Code			
NI Number		Date of Birth	

PART 2 – ABOUT YOUR BUSINESS

(A)

Business Name			
Business Address			
Post Code			
Type of Business			
Daytime Phone No			

PART 2 – ABOUT YOUR BUSINESS (continued)**(B)**

Date business commenced		Is this a new business?	YES / NO
Start date of current financial/trading year			
Average number of hours worked per week			

(C)

Is your business a partnership?	YES / NO
If yes, what percentage of the total profit / loss is yours? (Please provide partnership agreement)	%
Partner Name	
Address	
Post Code	

(D)

Does your spouse, or the person you live with as if you were married to them, have a share in the business?	YES / NO
If yes, what percentage of the total profit / loss is theirs?	%
Is your spouse or the person you live with as if you were married to them, on the payroll of the business?	YES / NO
If yes, what are his / her earnings?	£ every
Are there any other people on the payroll of the business?	YES / NO
If yes, how many other people are there?	
Please provide a payroll summary of each employee	

(E)

Do you use part of your own home for business purposes?	YES / NO
If yes, please provide details of any rooms in your home which are used <u>only for the business</u> and the cost of your home utility bills (please provide proof of utility costs)	

PART 3 – ABOUT THE BUSINESS INCOME

What is your Inland Revenue Tax Reference No?	
Do you have your latest Self-Assessment Tax Return? (Please return it with form)	YES / NO
If not, please tell us why not and the date you expect to get it.	

Do you have any prepared accounts (audited or otherwise) for the last financial year	YES / NO
If YES , please return an <u>original</u> set of the accounts with this form or return them when they are available. If you are not returning them with this form please provide an approximate date of when they will be prepared :	
If NO , please state the reason why and the date you expect to have them.	

PART 4 – ABOUT INCOME AND EXPENDITURE

(A)

State exact period the self-employed income covers	From		To	
This should be your last trading year or a period as directed in the letter enclosed with this form				

(B)

Did you have any periods between April 2020 and March 2021 when you were unable to trade:

Yes/No

If Yes, please give details below of any periods you were unable to trade and why:

From	To	Reason

(C) - Money coming in for period stated

(a) Self Employed Income Support Grant Payments (SEISS) from HMRC

Did you receive any self employed income support grant payments ? **Yes/No**

If Yes, please provide details below.

Name	Claim Period	Amount Received
Grant 1	13 May to 13 Jul 20	£
Grant 2	17 Aug to 19 Oct 20	£
Grant 3	30 Nov 20 to 29 Jan 21	£
Total		£

(b) Test and Trace Payments (for self isolating)

Did you receive any test and trace payments as you had to self isolate **Yes/No**

If Yes, how many payments did you receive :

(c) Business Grants from Northumberland County Council

Did you receive any business grants from Northumberland County Council **Yes/No**

If Yes, how many grants did you receive and what was the total grant monies received:

Number of grants Total value of grant(s) received

Please enter the total of any grants/payments in the box below.

(d)

Sales, takings or income (excluding any self employed grant payments from HMRC, grants from Northumberland County Council and test and trace payments)	£	
Plus Total of self employed grant payments from HMRC	£	+
Plus Total of grants received from Northumberland County Council	£	+
Plus Total of test and trace payments received	£	+
Plus Tips or gratuities	£	+
Plus VAT refunded	£	+
Plus Value of stock for resale at the 'To' date detailed in (A) above	£	+
Equals TOTAL INCOME	£	=
Less Value of stock for resale at the 'From' date detailed in (A) above	£	-
Equals GROSS PROFIT	£	=

(D) – Business Expenses for period stated

Is the business new?	YES / NO	
If yes, detail the cost of equipment/materials used to set up the business	£	
Cost of stock/goods purchased to sell to customers	£	
Drawings (cash and stock taken from business)	£	
Wages Paid out	To self	£
	To partner	£
	To others	£
Rent for business premises only, not including your home (please send proof)	£	
Business Rates	£	
Gas and Electricity (business premises only)	£	
Water Rates (business premises only)	£	
Cleaning	£	
Telephone/mobile phone	£	What percentage of the calls are for personal use? %
Business Insurance (please send proof)	£	
Advertising / Essential Publications	£	
Printing & Stationery	£	
Postage	£	
Accountants Charge	£	
Bank Charges (business bank accounts only)	£	
Interest payments on business loan (please send proof)	£	
Repair of business assets	£	
Was the repair of the asset covered by insurance?	YES / NO	
Replacement of business asset	£	
Was the replacement of the asset covered by insurance?	YES / NO	
Leasing Charges state what is leased and send a copy of the agreement(s) :	£	
Hire Purchase state what is on hire purchase and send a copy of the agreement(s) :	£	

(E) – Motoring Expenses for period stated

MOTURING EXPENSES WILL ONLY BE CONSIDERED WHEN PROOF IS PROVIDED WHERE REQUIRED

Do you use the vehicle for personal use? If yes, what percentage is for personal use?	YES / NO %
When assessing your income for Housing Benefit/Council Tax Support, the cost of commuting to and from your workplace is not an allowable business expense. Whereas travel from your workplace to carry out work is.	
Type of vehicle used for business i.e. car, van, taxi	
Petrol or diesel used	£
Repairs (please send receipts/invoices for work completed)	£
Road Tax	£
MOT	£
Business car insurance (please send policy documents)	£
Car Lease for business vehicle (please send copy of agreement)	£
Hire Purchase of business vehicle (please send copy of agreement)	£

(F) – Other Business Expenses for period stated

Other Expenses	£
Please give details:	
You may be required to provide proof of any expenses items listed. The Benefit Section will contact you direct.	

Is it reasonable to assume that the trading figures for the next six months will be similar to those given above?	YES / NO
If NO, please explain the likely differences:	

PART 5 – ABOUT OTHER OUTGOINGS

Personal Pension Contributions

How much do you pay into a personal pension scheme	£	every
You <u>must</u> provide proof of the scheme to which you belong and of the payments made		

Voluntary National Insurance Contributions

Do you pay National Insurance Contributions voluntarily, regardless of your self-employed income?	YES / NO
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PART 6 – DECLARATION

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

I understand the following:

- If I give you information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for Housing Benefit and / or Council Tax Support. You may check the information with other sources within the Council and other Councils.
- You may use the information I have provided in connection with this and any other claim for Social Security Benefits that I have made or may make. You may give some information to other government organizations, if the law allows this.

I KNOW I must inform the Benefit Section about any change in my circumstances as soon as the change occurs.

I DECLARE the information I have given on this form is correct and complete.

Signature of person claiming _____ Date _____

Forms filled in by someone other than the person claiming (if applicable)

Name of person who filled in the form	
Signature of the person	
Relationship to the person claiming	

Please note our customer information centres are currently closed at the moment and there are no available public postal points at any of our information centres.

Completed and signed forms should be returned by post where possible to the Benefit Section, Wansbeck Square, Ashington Northumberland NE63 9XL or emailed to benefits@northumberland.gov.uk, please include your name and address in the subject line of the email

CONTACT DETAILS

If you have any queries or questions regarding this form please do not hesitate to contact the benefit section by emailing benefits@northumberland.gov.uk or :Telephone: 0345 600 6400