



Name and address

Please reply to: Customer Services

Town Hall

Torquay

Devon

TQ1 3DS

My ref:

Your ref:

Telephone: 01803 207201

Fax: 01803 207122

E-mail: Housing.benefit@torbay.gov.uk

Website: www.torbay.gov.uk

Date:

**Housing Benefit & Council Tax Benefit  
Self-employed earnings information**

**Section 1 - About Yourself**

Title  Surname  Other Names

Address including Postcode

**Section 2 - About Your Business**

Name of Business

Type of Business

Business Address including postcode

Date Business commenced  Start date of current financial year

Average number of hours worked per week  Hrs

Schools and services for children and young people • social care and housing • recycling, waste disposal and clean streets • community safety • roads and transportation • town planning • tourism, harbours and economic regeneration • consumer protection and licensing • leisure, museums, libraries and arts

If you require this in a different format or language, please contact me.

Is your business a partnership? Yes / No (please delete as appropriate)

If yes, what percentage of the total profit/loss is yours?  
(please provide partnership agreement)  %

Is your husband/wife a partner in the business? Yes / No (please delete as appropriate)

If yes what percentage of the profit/loss is theirs?  %

Is your husband/wife on the payroll of the business?  
(appropriate) Yes / No (please delete as appropriate)

If yes what are his/her earnings?  £  per

Are there any other people on the payroll of the business? Yes / No (please delete as appropriate)

Do you use part of your home for business purposes? Yes / No (please delete as appropriate)

If yes give details 

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**Section 3 - About the business income**

Do you have any prepared accounts (audited or otherwise) for the last financial year? Yes / No (please delete as appropriate)

If **YES**, return an original set of the accounts with this form - go to **Section 5**

If **NO**, state reason why and the date you expect to receive them

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If you do not have any prepared accounts or if you have not been trading for a full year, please complete **Section 4**

Do you have your latest Schedule D Tax Assessment? Yes / No (please delete as appropriate)

If **YES**, return it with this form

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If **NO**, state the reason why and the date you expect to receive it


**Section 4 - Income and expenditure**

Complete this section only if you do not have any prepared accounts for the last financial year or if you have not been trading for a full year.

**State the exact period covered:**  to

This should be the last financial year's business income and expenditure or if you have not been trading for a year it should be the date your business started to the current date.

**Income** (please ensure that the figures you enter below are the total amounts for the period above).

		For Official Use Only	
Sales / Takings / Income		£	£
VAT refunded	Plus	£	£
Enterprise Allowance	Plus	£	£
Closing Stock	Plus	£	£
Cost of Sales (purchases)	Less	£	£
VAT paid out	Less	£	£
Opening stock	Less	£	£
<b>Gross Profit</b>	<b>Equals</b>	£	£

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## Expenses

**you must only include amounts that relate solely to the business** e.g telephone, if calls are made you must apportion the total cost in accordance with the amount of private use and enter the amount for business use only.

		For Official Use Only
Drawings (cash or stock)	£ <input type="text"/>	£ <input type="text"/>
Wages paid to self	£ <input type="text"/>	£ <input type="text"/>
Wages paid out to spouse / partner	£ <input type="text"/>	£ <input type="text"/>
Wages paid out to others	£ <input type="text"/>	£ <input type="text"/>
Rent (business premises or proportion of your home attributed to business)	£ <input type="text"/>	£ <input type="text"/>
Business Rates	£ <input type="text"/>	£ <input type="text"/>
Heating and Lighting	£ <input type="text"/>	£ <input type="text"/>
Bank Charges	£ <input type="text"/>	£ <input type="text"/>
Cleaning	£ <input type="text"/>	£ <input type="text"/>
Telephone	£ <input type="text"/>	£ <input type="text"/>
Business Insurance	£ <input type="text"/>	£ <input type="text"/>
Advertising	£ <input type="text"/>	£ <input type="text"/>
Printing and stationery	£ <input type="text"/>	£ <input type="text"/>
Postage	£ <input type="text"/>	£ <input type="text"/>
Accountants charges	£ <input type="text"/>	£ <input type="text"/>
Interest payments on business loan (Please enclose a copy of the loan agreement)	£ <input type="text"/>	£ <input type="text"/>
Repair / replacement of business asset (do not include motoring)	£ <input type="text"/>	£ <input type="text"/>
Was this covered by insurance	Yes / No	

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Leasing charges

£

£

-Please state what is leased


Business entertainment

£

£

Bad debts

£

£

- Please give details


Other expenses

£

£

- Please give details


**Motoring expenses**

For Official Use Only

Car Lease

£

£

Road Tax

£

£

Petrol / Diesel

£

£

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Repairs	£ <input type="text"/>	£ <input type="text"/>
Insurance	£ <input type="text"/>	£ <input type="text"/>
Who owns the vehicle?	Yourself / Business (please delete as appropriate)	
<b>Total Expenses</b>	£ <input type="text"/>	£ <input type="text"/>

**You may be required to provide proof of any expense item listed.  
The Housing Benefit Office will contact you if necessary.**

Is it reasonable to assume that the trading figures for the next six months will be similar to those given above?  
Yes / No (please delete as appropriate)

If no please explain the likely differences:


**Section 5 - Other Outgoings**

**National Insurance Contributions**

- Do you hold an exemption certificate?

Yes / No (please delete as appropriate)

		For Official Use Only
If <b>NO</b> , please provide evidence of your contributions	£ <input type="text"/> per <input type="text"/>	£ <input type="text"/> per <input type="text"/>
Do you make a contribution to a personal pension scheme?	£ <input type="text"/> per <input type="text"/>	£ <input type="text"/> per <input type="text"/>

**You must provide proof of the scheme to which you belong and the payments you are making.**

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**Section 6 - Declaration**

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

**I understand the following:-**

If I give information that is incorrect or incomplete, you may take action against me.

You will use the information I have provided to process my claim for Housing Benefit or Council Tax Benefit, or both. You may check some of the information with other sources within the Council, rent offices, and other councils.

You may use any information I have provided in connection with this and any other claim for Department of Work and Pensions benefits that I have made or may make. You may give this information to other government organisations if the law allows this.

**I know** I must let the Council know about any changes in my circumstances, which might affect my claim.

**I declare** the information given on this form is correct and complete.

Signature of the person claiming

Date

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