

# Request for payments of Local Housing Allowance (LHA) to be paid to the landlord or third party



Name of tenant:  
Address of tenant:

Claim ref:

Doc Type: SAFEFORM

*Please tick the box(s) that apply to you and provide the evidence required. Failure to provide adequate supporting evidence will mean this request cannot be considered.*

Reason payment of LHA to the tenant is a problem	Evidence required
<input type="checkbox"/> Addiction to drugs, alcohol or gambling	Written evidence from support organisations, GP, Social Services, care workers, hospital etc.
<input type="checkbox"/> Difficulties with reading and writing	Written evidence from support organisations.
<input type="checkbox"/> Fleeing domestic violence	Written evidence from support organisations or Social Services.
<input type="checkbox"/> No experience of successfully managing their rent	Written evidence from support organisations.
<input type="checkbox"/> History of non-payment of rent	Rent records and letters proving attempts to collect monies or evidence from a previous landlord.
<input type="checkbox"/> Inability to speak English	Written evidence from support organisations.
<input type="checkbox"/> Learning disabilities	Written evidence from care worker, GP or Social Services etc.
<input type="checkbox"/> Medical condition or mental health problems	Written evidence from care worker, GP or Social Services.
<input type="checkbox"/> More than 8 weeks in arrears with rent	Rent records and letters proving attempts to collect monies.
<input type="checkbox"/> Severe debt problems	Court Orders, CCJs, evidence from help groups, solicitors, creditors or debt advisors.
<input type="checkbox"/> Unable to open a bank account	Letters from banks or money advisers.
<input type="checkbox"/> Undischarged bankrupt	Copy of Court Order.
<input type="checkbox"/> None of the previous apply, but payments of LHA will cause problems because: <hr/> <hr/> <hr/> <hr/> <hr/>	

*please continue on a separate sheet of paper if necessary*

**How long might you need payments to be made to your landlord?**

Please indicate whether you would expect the payments to the landlord to be a temporary or permanent arrangement. For example, it could be while you are in hospital or until other priority debts have been repaid.

**Declaration** - I understand the following:

- the information I have provided may lead to my Housing Benefit being paid direct to my landlord
- you may share any information I have provided on this form with other sections of this council or the Dept for Work & Pensions, if the law allows this.

**Signature:**

**Date:**

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**If you are completing this form on behalf of the tenant, please fill in the following section:**

Your name:

Relationship to the tenant:

Contact address / telephone:

**Declaration:**

I declare that the information I have given in this form is correct and I authorise you to make enquiries to check any of the information or evidence I have provided.

I understand that you may need to contact the tenant and that you will need to tell them about the information I have given you.

Signature .....

Date: .....

*Completion of this form does not guarantee that payments of Housing Benefit will go directly to the landlord. Each application is assessed on it's own individual merits.*

Please return this form, together with evidence to support the information to:

Sevenoaks District Council, PO Box 102, Argyle Road, Sevenoaks, Kent TN13 1GT

## **Guidance Notes**

### **Request for payments of Local Housing Allowance (LHA) to be paid to the landlord**

#### **What is this form for?**

The Benefits service has to make all payments of Local Housing Allowance (LHA) to you, but we can consider making payments to your landlord where you will have difficulty managing your affairs.

#### **Who should complete this form?**

You should complete this form, but family or friends, a carer, an advice or welfare agency, the landlord or letting agent or another service within the Council can also complete it on your behalf. You must always sign the form, and be fully aware that it may lead to your benefit being paid directly to your landlord.

Written evidence needs to be provided to support the information given in this form. This can be from various sources depending on a persons individual circumstances.

#### **What happens next?**

Send the form together with relevant supporting evidence to the Benefits section. Tell us as much information as possible so that we can make a quick decision. In some cases it may be necessary to gather evidence or to interview you and/or your representative. We will write you and anyone else affected, about our decision and of the right to appeal. Whilst the decision is being made payments may be sent to you.

#### **How will the LHA be paid?**

Where we decide to pay your landlord, they will only receive LHA up to the amount of the contractual rent. If there is any excess, this will be paid to you. Your landlord will be paid every 4 weeks, in arrears.

#### **How we use collect and use information**

The information collected on this form and the supporting evidence will be used to make a decision regarding the payment of your benefit. We may check information that you provide, or information provided by a third party, with other information we hold, to check the accuracy of information; to prevent or detect crime; and to protect public funds in other ways, as permitted by law. We may also share this information with other council departments or bodies administering public funds for these purposes. We will not disclose information about you to anyone, unless the law permits us to.

The council is the Data Controller for the purposes of the Date Protection Act 1998. If you want to know more about the information we have about you, or the way we use your information, you can ask us.