



Housing Benefit and Council Tax Support

SELF EMPLOYED EARNINGS INFORMATION

Local Authority Reference No: _____

SECTION 1 - ABOUT YOU

Name _____

Address _____

Post Code _____

SECTION 2 - ABOUT YOUR BUSINESS

Name of Business _____

Business Address _____

Post Code _____

Do you rent business premises? YES NO

If YES, please note the address above and supply a copy of your tenancy agreement for the rented premises

Type of Business _____

Date business commenced: _____ **Start date of current financial year** _____

Average number of hours worked per week _____

Is your business a partnership? YES NO

If YES, please provide your partnership agreement and state the names of all partners:

What percentage of the total profit/loss is yours? _____

Is your husband/wife/partner on the payroll of the business? YES NO

If YES, what are his/her earnings? £ _____ every _____

SECTION 2 (cont)

Are there any other people on the payroll of the business? YES NO

If YES, please list your employees in full below:

NAME	HOURS WORKED PER WEEK	HOURLY RATE

Please continue on a separate sheet if necessary

Do you use part of your own home for business purposes? YES NO

If YES, please give details, including how many hours a week you use your home for business purposes:

Is your business a limited company? YES NO

If YES, please supply your remuneration statement and go to section 5

SECTION 3 - ABOUT THE BUSINESS INCOME

Please detail the name and address of your accountant:

Do you have prepared accounts(audited or otherwise) for the last financial year? YES NO

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

If NO, please state the reason why and the date you expect to have them:

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

SECTION 4 - INCOME AND EXPENDITURE

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

Please note if you have recently set up your business then you must still project your earnings for at least a three month period.

Please state if these are actual or projected earnings:

Actual

Projected

What is the exact period covered?

From _____

To _____

This should be your last financial year OR if you have not been trading for a year it should be the date your business started until current date.

SECTION 4 - PART A

SALES/TAKINGS/INCOME	£
Plus VAT REFUNDED	£
Plus INCENTIVE SCHEME ALLOWANCE	£
Plus CLOSING STOCK By this we mean the stock the business had left at the end of the financial year (or account period)	£
Less COST OF SALES (Purchases)	£
Less VAT PAID OUT	£
Less OPENING STOCK By this we mean the value of stock the business had on hand on the first day of the financial year (or account period)	£
GROSS PROFIT	£

SECTION 4 - PART B - 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**).

DRAWINGS (Cash or Stock)		£
<u>WAGES PAID OUT</u>	TO SELF	£
	TO SPOUSE/PARTNER	£
	TO OTHERS	£
<u>RENT, RATES AND MORTGAGES</u>		
RENT (Business premises or portion of your home rent attributed to business)		£
MORTGAGE (Business premises only)		£
BUSINESS RATES		£
<u>STOCK CHARGES AND PURCHASES</u>		
STOCK CHARGES		£
OTHER PURCHASES (Please itemise)	Description _____	£
	Description _____	£
	Description _____	£
	Description _____	£
BANK CHARGES		£
ACCOUNTANT COSTS		£
HIRE / LEASING COSTS		£
<u>ADVERTISING AND STATIONERY</u>		
ADVERTISING		£
STATIONERY		£
<u>MOTORING EXPENSES</u>		
Who owns the vehicle?	SELF <input type="checkbox"/>	BUSINESS <input type="checkbox"/>
If business, do you use other than for business?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
What percentage of your car use is for personal use?	<input type="text"/> %	
CAR LEASE		£
ROAD TAX		£
PETROL/DIESEL		£
REPAIRS		£
INSURANCE		£

SECTION 4 - PART B - EXPENSES (cont)		
INTEREST PAYMENTS ON BUSINESS LOAN(S) (Please enclose copy of loan agreement)		£
CAPITAL REPAYMENT ON BUSINESS LOAN(S) (Please enclose copy of loan agreement)		£
REPAIR / REPLACEMENT OF BUSINESS ASSET (e.g. Equipment)		£
Were the repairs covered by insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
BAD DEBTS		£
Please give details:		
OTHER EXPENSES (e.g. Business entertainment; Cleaning; Heating and Lighting; Postage, etc)		
Description _____		£
Description _____		£
Description _____		£
Description _____		£

**YOU MAY BE REQUIRED TO PROVIDE PROOF OF ANY EXPENSE ITEMS LISTED.
THE REVENUES & BENEFITS OFFICE WILL CONTACT YOU IF NECESSARY.**

SECTION 4 - PART C	
Is it reasonable to assume that the trading figure for the next financial year (or period stated) will be similar to those given above?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If NO, please explain the likely differences:	

Please now complete section 5

SECTION 5 - OTHER OUTGOINGS

Do you hold a National Insurance exemption certificate? YES NO

If NO, please provide evidence of your contributions Amount paid: £ _____ every _____

Do you make contributions to a personal pension scheme? YES NO

If YES, please detail amount Amount paid: £ _____ every _____

You must provide proof of the scheme(s) to which you belong and of the payments made.

How we will use your information

Further information on how we will use your information can be found on www.glasgow.gov.uk/privacy

Your declaration

NB If this change in your circumstances entitles you to Housing Benefit and Council Tax Support that you did not previously receive, we will treat this form as your application for this unless you tell us otherwise.

Warning: It is an offence to give false information.

I have completed and submitted this Housing Benefit and Council Tax Support application form. Where I have completed the form with assistance from another party, I have supplied the answers.

I understand that you will use the information I have provided to process my application for Housing Benefit and Council Tax Support. You may check other sources as allowed by law. You may also use this application to assess entitlement to Single Person Discount for Council Tax, Social Security benefits, clothing grants, income maximisation for assessment of care packages that I have made or may take, school clothing grants or to assess changes in relation to home care services.

The applicant should sign here:

Signature	Date
-----------	------

STOP FRAUD NOW - Whistle Blow Line: 0141 287 3777

Report fraud or abuse of the Benefit system. Calls will be treated in strict confidence.

If someone has filled in this form on your behalf they should sign here:

Declaration: To the best of my knowledge, the information I have provided is true and accurate.

Signature	Date
Relationship to the person applying:	Phone Number: