

Do you currently have a bank account? Yes No

Do you currently have a Credit Union account? Yes No

HOW WOULD YOU PREFER US TO COMMUNICATE WITH YOU? PLEASE TICK.

Letter	Office Visit
Telephone	Home Visit
Text Message	Email

DO YOU REQUIRE ANY OF THE FOLLOWING SUPPORT SERVICES:

Information provided in larger print	Information provided on audio tape
Information provided in Braille	Access to a signer
Information provided through interpreter	Other Support, e.g. help filling in forms
Specify language:	Please specify:
Debt Counselling Service	No support needed

Signature

Date

Tenant Information Update



Working together for positive change

Tenant Information Update

Name:

Address:

Telephone Number:

Mobile Number:

Do you have access to the Internet? Yes/No

Email address:

National Insurance No:

DOB: / /

Housing Benefit: Full Part None

If working please specify amount of hours per week:

How many bedrooms are currently in your home?

How many people currently live in your home?

Do you have a carer who normally stays with you?

PLEASE LIST EVERYONE LIVING IN YOUR HOME AS PART OF YOUR TENANCY:

	First Name	Last Name	Date of Birth	Gender	Relationship to you
You					
Your Partner					
Person 1					
Person 2					
Person 3					
Person 4					
Person 5					
Person 6					

Benefits, State Pensions and Tax Credits

PLEASE TICK TO INDICATE IF YOU, OR YOUR PARTNER, ARE RECEIVING ANY OF THE FOLLOWING:	YOU	YOUR PARTNER
Housing Benefit		
Rates Relief		
Income Support		
Job Seekers Allowance		
Employment & Support Allowance		
Working Tax Credits		
Child Tax Credits		
Child Benefit		
State Retirement Pension		
Pension Credit		
Carers Allowance		
Occupational Pension		
Attendance Allowance - Higher Rate		
Attendance Allowance - Lower Rate		
PIP Mobility component - standard		
PIP Mobility component - enhanced		
PIP daily living component - standard		
PIP daily living component - enhanced		
Bereavement Allowance		
Disability Living Allowance - High Rate		
Disability Living Allowance - Middle Rate		
Disability Living Allowance - Lower Rate		
Maternity Allowance		