

# Basingstoke CAB Benefits Checklist

Surname: .....	Title .....	NI No. ....
Forenames: .....		Date of Birth .....
Partner's Full Name: .....	Title .....	NI No. ....
Surname if different: .....		Date of Birth .....

Address: .....	Other Party .....
Postcode: .....	Postcode .....
Home Tel: .....	Tel No .....
Can we leave messages? Yes / No	Can we leave messages? Yes/No

**BRIEF DESCRIPTION OF ENQUIRY**

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**INCOME MAXIMISATION**

Benefits to be claimed and other actions e.g. tax rebate

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**OTHER PEOPLE WHO LIVE WITH YOU (e.g. child, grown up child, relative, friend or lodger):**

Name	Age	DOB	Status e.g. Student, Employed, Disabled	Dependent Y/N	If Non dependent what are their Earnings/income (net/gross - week/month)

**Current EMPLOYMENT: Please quote weekly figures only**

	Hours Worked	Gross Pay	Net Pay	O/Pension	
Client		£	£	£	
Partner		£	£	£	

**For tax credit purposes we require your GROSS income for the last tax year if you (and your partner) were in work, and the GROSS figure for any pension contributions (and your partner) made during the last tax year. This information will be on your P60:**

Your Gross income ..... Your pension payments .....

Your partner's gross income ..... Your partner's pension payments .....

Do you receive any maintenance or Child Support? Yes /No If yes, how much? .....

Do you have any child care costs with registered childminder? Yes/No If yes, how much? .....

Please tell us if you get different wages for term time and holidays .....

Do you receive the winter fuel payments? Yes / No / N/A

Do you receive reduced TV licence cost? Yes / No

*Please turn over*