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## Self-Employed Form

Name .....

Address .....

.....

..... Postcode .....

Claim Reference .....

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### Section One - About your business

Name of / what is your business .....

Business Address .....

.....

..... Postcode .....

Date business commenced .....

Start date of current financial year .....

Average number of hours worked .....

Is your business a partnership? YES / NO

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

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

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

If yes, what are his/her earnings? .....

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

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

If yes give details: .....

.....

.....

## Section Two - About the business income

Do you have any prepared accounts (audited or otherwise) for the last financial year?

YES / NO

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

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

.....  
.....

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

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## Section Three - 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 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 that your business started until the current date. However, if you have only recently started up in business please supply an estimated profit and loss account which gives details of your likely income and expenses for the first three months trading.

### Income

Sales / Takings / Income £ .....

Plus Enterprise Allowance £ .....

Gross Profit £ .....

### Expenses

**You must only include amounts that relate solely to the business**

e.g. - Telephone - if calls are made you must work out the amount for business use only and only declare this amount.

**Remember, Business use only**

Wages paid out: To self £ .....

To spouse/partner £ .....

To others £ .....

Rent (please specify what this is for) £ .....

Business rates £ .....

Heating and lighting £ .....

Cleaning £ .....

Telephone £ .....

Business insurance £ .....

Advertising £ .....

Printing and stationery £ .....

Accountant charges £ .....

Bank charges £ .....

Other expenses £ .....

Please give details .....

.....

**Motoring Expenses**

Car lease £ .....

Road Tax £ .....

Petrol/Diesel £ .....

Repairs £ .....

Insurance £ .....

**You may be required to provide proof of any expense items listed. The housing benefit section 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

If NO, please explain the likely differences .....

.....

.....

**Other expenses**

**National Insurance**

Do you hold an exemption certificate? YES / NO

If NO, please provide evidence of you contributions £ .....  
Weekly / Monthly / Annually

**Personal pension contributions**

Contribution to personal pension scheme £ .....  
Weekly / Monthly / Annually

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

## Section Four - 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, the Revenues Division may take action against me. This may include court action.

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 the information I have provided in connection with this or any other claim for Social Security benefits that I have made or may make. You may give some information to other government organisations, if the law allows this.

I know I must let the Revenues Division know about any change in my circumstances which might effect my claim.

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

Signature of self-employed person

Signature of person claiming if different from above

Date

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### **Data Protection**

The Borough Council of King's Lynn & West Norfolk will use your information for benefit purposes. We may share the information you have provided with other government departments or agencies and local authorities to check the accuracy of the information, as permitted by law. You have the right to ask for a copy of the information we hold on you, which is subject to the Data Protection Act 1998 (for which we may make a small charge), and to correct any inaccuracies.