Harborough District Council
Request for Local Housing Allowance to be paid to landlord

From April 7th 2008 under the Local Housing Allowance Scheme (LHA), Housing Benefit payments will be made direct to the tenant unless there are special circumstances to be considered.

If you think that receiving direct payments will cause you/your client serious problems please complete this form and return it to us. We will need to see written evidence to support the request.

Reason for request

☐ I / the tenant is 8 weeks or more in arrears with the rent

☐ The tenant is unlikely to pay the rent

☐ I / the tenant is likely to have difficulty paying the rent

Tenant details

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
<tr>
<td>Housing Benefit claim Number (if known)</td>
<td></td>
</tr>
</tbody>
</table>

Landlord details

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>
We will need evidence that you / the tenant is in rent arrears. This could be a statement that shows the rent due and the rent that has been paid during the last 12 months or since the tenancy started:

The statement must include:

- Tenancy start date
- Rent charged
- Frequency that payments are due
- Current rent arrears outstanding
- Dates and amounts of all payments received in the last 12 months
- The statement must be signed and dated

Who is the completing the form?

I (name) .................................................................am completing the form myself

I (name) ...............................................................from (organisation)...........................................

.................................................................am completing the form on behalf of the tenant
Please explain below why you consider that Local Housing Allowance payments should be made to the landlord (please continue on the back page)
Please provide any evidence that supports this request, if you cannot provide evidence there may be a delay before a decision is made.  
(tick all evidence supplied)

- [ ] Rent statement
- [ ] Tenants statement
- [ ] Letter from support worker
- [ ] Letter from GP / Hospital
- [ ] Letter from solicitor / CAB
- [ ] Other ……………………………………(please specify)
- [ ] Other ……………………………………(please specify)
- [ ] Other ……………………………………(please specify)

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**Declaration to be completed by the tenant**

Even if someone has filled in this form for you, you must sign this declaration if you can.

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

Signature……………………………………………………………………………………….. ….

Date…………………………………………………………………………………………………..

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**Declaration to be completed if someone other than the tenant has completed this form**

I declare that as far as possible, I have confirmed with the tenant that the information I have written on this form is correct

Signed…………………………………………………………………………………………..

Relationship to the tenant…………………………………………………………………..

Organisation……………………………………………………………………………………

Date……………………………………………………………………………………………..
Further information to support your request

<table>
<thead>
<tr>
<th>Signature</th>
<th>date</th>
</tr>
</thead>
</table>

Please return the form to

Housing Benefits
Harborough District Council
Adam and Eve Street
Market Harborough
Leicestershire
LE16 7AG