



Payment of Housing Benefit

Payment of Housing Benefit/Local Housing allowance is made by direct transfer to your bank or building society account.

Please complete the form overleaf and return it to the Benefits Section to benefits.bournemouth@bcpcouncil.gov.uk or by post or in person. Alternatively please call 01202451592 and provide your account details. The account must be in your name or your partner's name. It cannot be paid to a friend or other family member or anyone else.

Payments cannot be made to Post Office Card Accounts or ISA Accounts.

Four weekly payments are paid into bank accounts on a **Thursday** and Fortnightly payments on a **Friday**.

I don't have a bank account!

Basic bank accounts are available from most high street banks and building societies. To open a basic bank account you will need to provide proof of your identity and address. When opening your account, remember to stress that you want to open a basic bank account. Do not be pressured into opening another account, which is unsuitable and may lead to future problems such as overdrafts. Basic accounts offer free automated transactions (e.g. Direct Debits and Standing Orders) and a cash card for use at cash machines.

If you cannot be paid into an account you can ask us to pay your benefit/local housing allowance direct to your landlord. If you want information on these circumstances please call and ask for information on our safeguard policy or visit our website and search for safeguard policy.

Our ref: BC9

**REQUEST FOR DIRECT PAYMENT OF HOUSING BENEFIT
TO PERSONAL ACCOUNT**

CLAIM REFERENCE

NAME

ADDRESS

TELEPHONE NUMBER

EMAIL ADDRESS

BANK/BUILDING SOCIETY

BANK/BUILDING SOC. ADDRESS

SORT CODE

ACCOUNT NUMBER

Building Society roll/account no (if applicable)

Please pay my Housing Benefit into my personal account. I confirm that I reside at the address stated above and I will inform you immediately if I move. I know that I must keep you informed of any changes in my circumstances previously notified to you, and if anyone moves into or out of my home. I am aware that it is an offence not to advise you of any change in my circumstances that may affect my benefit and if you pay me too much benefit I will have to pay it back.

Please pay me every Four Weeks –

Please pay me every Two Weeks -

Signed: _____ Date: _____