

Request for a Review

Housing Benefit/ Council Tax Reduction/ Discretionary Housing Payment

Use this form if you think that a decision we have made about your Housing Benefit, Council Tax Reduction or Discretionary Housing Payment is wrong and you would like us to look at it again.



About You

Title:

Surname:

First Name(s):

Date of Birth:

National Insurance Number:

Claim Number:

Address:

Daytime Telephone Number:

Post Code

Mobile Telephone Number:

Has someone helped you
with your request?

YES

NO

If you have answered 'yes', please provide the
following details.

Their full name:

Their full address:

Post Code

Daytime Telephone Number:

Please sign below to authorise this person to act on your behalf and to allow us to disclose information to this person regarding your request for a review.

Signed:

Date:

About the Decision

Please tick to let us know which benefit(s) you think are wrong

Housing Benefit

Council Tax Reduction

Discretionary Housing Payment

If you can, please tell us the date on the decision letter that you do not agree with:

We need to receive your form within one calendar month of the date of the decision letter.

If you think your form will be late, please tell us why below.

Why do you think our decision is wrong?

Please use the space on the next page to say why you do not agree with the decision and why you think it is wrong. It is not enough to say, "I do not agree with the decision" or "The money is not enough". The following examples give you an idea of what is required:

Examples

- ☛ "You have used the wrong wages to work out my benefit. I was paid only £100 during the Christmas week and here is evidence of my wages for this week";
- ☛ "You have informed me that I have not been awarded backdated benefit for the period 1st March to 10th April. I am not happy with this, as I was in hospital for this period and unable to return my form to you. Please find enclosed a letter from my doctor confirming this was the case";
- ☛ "I do not agree that the Housing Benefit overpayment of £250 should be recovered from me as I was unaware that my tenant had started working";

If you use any extra sheets of paper, then please make sure you put your name, address and claim number on each sheet.

[Large empty rectangular box for content]

Your Signature: _____	Date: _____
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What to do now

- Make sure you have completed the form in full and signed it.
- Please return the form to us by one of the methods given below:



Send to:

Appeals Team, FREEPOST CARDIFF COUNCIL HOUSING
BENEFIT, PO Box 6000, Cardiff CF11 0WZ



Phone:

029 2038 5888



Fax:

029 2082 7441



In Person:

Second Floor, Central Library Hub, The Hayes, Cardiff CF10 1FL
Or to your local Hub - contact us on 029 2087 2087 for details.