NORTH NORFOLK DISTRICT COUNCIL HOLT ROAD CROMER NORFOLK NR27 9EN Telephone 01263 516349 Fax 01263 516106 www.northnorfolk.org

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Claim reference (if known):

Name: Address:

Self-Employed Form (1)
Section One - About your business
Trading name of the business
Business Address
Postcode
Business telephone number
Nature of work conducted(If you are an online trader i.e. Ebay/Amazon - please also provide your user name)
Date business commenced
Start date of your current financial year
Average number of weekly hours worked
Is your business a partnership? YES / NO
If yes, what percentage of the total profit/loss is yours?%
Name & address of business partner(s)
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

If yes give details:	ne for business purposes? YES / NO
Section Two - About the busine	ess income
Are you VAT registered? YES / N	10
If yes please provide your VAT renumber	-
Do you have any prepared accou year? YES / NO	unts (audited or otherwise) for the last financial
If YES, provide an original set of	accounts with this form - go to Section Four
	date you expect to have them
Section Three - Income and ex	penditure
	you do not have any prepared accounts for the re not been trading for a full year.
been trading for a year, it should current date. However, if you have	over your last financial year OR if you have not be the date that your business started until the re only recently started up in business please income and expenses for the first three months
State the exact dates these figure	ures cover:
From/20	To/20
Income	
Sales / Takings / Income:	£
Tips / Bonus etc:	£
New Enterprise Allowance:	£
VAT paid:	£
VAT refunded:	£
Opening stock:	£
Closing stock:	£
Cost of sales: (Purchases of materials, stock etc)	£

Expenses

You must only include amounts that relate solely to the business i.e. - Telephone expenses – If your telephone is for business and personal use you must work out the amount for business use only and only declare this amount.

Remember, Business use only	Rememb	oer, Bu	siness	use	only	V
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Wages paid out:	to self to spouse/partner: to others:	££
Rent (please specify what this is for):		£
Business rates:		£
Heating and ligh	ting:	£
Cleaning:		£
Clothing:		£
Telephone:		£
Business insurar (Excluding motoring in		£
Advertising:		£
Postage, printing	g and stationery:	£
Accountant char	ges:	£
Bank charges:		£
Hire & Leasing C (excluding long term v		£
Business loan re (Please provide your b	payments: pusiness loan agreement)	£
Costs incurred to the business i.e. vehicles. Building	purchases of tools,	£
Repair / replacer assets: (Do not incl any items replaced by		£
Business enterta	ainment:	£
Depreciation: (we	ear and tear)	£
Motoring expen	ises:	
Car Lease:		£
Petrol:		£
Road Tax:		£
Insurance:		£
Repairs:		£
What type of veh expenses relate	nicle do these to? Car, van, lorry etc	

Other expenses				
Description of expense	Amounts			
	£			
	£			
	£			
	£			
	£			
Netional Incomes				
National Insurance				
Do you hold an exemption certificate? Y If YES, please provide evidence of this	ES / NO			
Personal pension contributions				
Do you contribute towards a personal pension scheme? YES / NO If YES please confirm: Amount paid £Frequency: Weekly / Monthly / Annually				
You must provide proof of the scheme to payments you have made.	o which you belong and proof of the			
Future changes				
Is it reasonable to assume that the tradi similar to those provided above ? YES /				
If NO, please explain the likely difference	es			
	f of any of the income and expense items contact you if these details are required.			

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 Benefits Section 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 Benefits Section 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

Data Protection

North Norfolk District Council 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.