

Revenues and Benefits Office  
Newcastle under Lyme Borough Council  
Castle House  
Barracks Road  
Newcastle under Lyme  
Staffordshire  
ST5 1BL



Name: _____	Date: _____
Address: _____	Property Ref: _____
_____	Benefit Ref: _____
_____	Alternate Ref: _____

**CHANGE OF CIRCUMSTANCES – HOUSING BENEFIT**

I wish to report the following change(s) in my circumstances which I believe may affect my Benefit entitlement:

I attach the necessary documentary evidence to confirm the above. I understand my entitlement will be reviewed on the information declared above and I will be notified in due course.

I expect my current employment to last 5 weeks or more:

**DECLARATION**

*I declare that the information given on this form is correct to the best of my knowledge and that there are no other changes to my circumstances. I am aware that to make a false statement is a serious offence and it is the Council's policy to prosecute where any statement can be proven to be false. In certain circumstances a penalty may be imposed where a false statement leads to a loss by the Council.*

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Tel: \_\_\_\_\_ Email: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Customer Services Clerk)

**For more information contact tel: 01782 715500 or email: [benefits@newcastle-staffs.gov.uk](mailto:benefits@newcastle-staffs.gov.uk)**