



Resources Directorate
Housing Benefit

Please specify your claim
reference number below if
known

Claim ref: _____

Questionnaire for Specified Accommodation Schemes

(This form must be completed before claims for Housing Benefit are made)

Name of Landlord:

The nature of the scheme:

When did the scheme open, or is due to open?

Accommodation address:

How many units does it have?

What is the type of unit? (i.e. shared accommodation/self-contained studios, one bed flats etc.):

Is the home a Registered Care Home (Housing Benefit is not payable to occupants of registered care homes)	Yes	No
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About the landlord:

Is the accommodation 'provided by'

A housing association, whether registered or unregistered: If yes, what is the name of the HA? (Please provide evidence)	Yes	No
A registered charity If yes, please advise the name and the registration number: (Please provide evidence)	Yes	No
A non-profit-making voluntary organisation If yes, please provide the name: (Please provide evidence)	Yes	No

If none of the above, please give details:

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Please provide documentary evidence to show your legal interest in this property

About care and support

Will/does the landlord provide the care, support or supervision?	Yes	No
If yes:		
Does the landlord have a contract with the provider?	Yes	No
If yes, who is the provider:		
If no:		
Is a provider acting on the landlord's behalf to give the care, support or supervision?	Yes	No
Who provides the care and support service?		
Who contracts for the care and support service?		
How is the care and support funded? Please give details:		

About the rent:

Please provide a copy of the tenancy agreement that will be, or is currently used.		
Do/will clients have their own tenancy agreements and be liable to pay rent?	Yes	No
Are all clients charged the same rent, irrespective of Benefit eligibility?	Yes	No
If your answer is 'No', please explain.		
Does the rent include Service Charges?	Yes	No
If yes, please provide a copy of the rent breakdown, including details of communal and personal services charges with the amounts.		
Is there an element of care and support included in the eligible service charges?	Yes	No
If yes, please give details of how much this is and what it is for:		
Does the property have a room for an overnight carer?	Yes	No
If yes, do all of the tenants require use of an overnight carer?	Yes	No
Does a carer stay every night?	Yes	No
If no, please give more details:		

Please provide a full breakdown of the Core rent.		
Please provide a full breakdown of the Enhanced/Intense Management charge.		
Please provide a full breakdown of the Management Overhead on rent charge.		
Please provide a full breakdown of the Voids on rent charge.		
Are there any other charges the clients are liable for? If yes, please provide details:	Yes	No
Are clients expected to make up the shortfall between the rent and benefit eligibility for the accommodation charge from their own funds?	Yes	No
If no, who makes up the shortfall?		

About Council Tax

Are the clients responsible for their own Council Tax? If no, who is responsible?	Yes	No
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About the clients:

Who nominates the clients?		
Who makes the decision that the accommodation is suitable for the client?		
Have their individual needs been assessed?	Yes	No
If so, to what extent are they deemed capable of 'Independent Living' even if requiring an element of care and support?		
Do any of the clients receive an element for accommodation costs from the Department of Work and Pensions?	Yes	No
If yes, please provide details.		

About the length of stay:

<p>Please indicate which best describes the accommodation provided</p>	<ul style="list-style-type: none">• homelessness hostel• transitional supported accommodation for vulnerable young people such as care leavers or teenage parents; offenders/ex-offenders; substance or alcohol misuse; veterans or mental ill health• refuges or other housing with support, for victims of domestic abuse• dispersed accommodation with support• bail accommodation for offenders/ex-offenders, those under the Bail Accommodation and Support Services (B.A.S.S.) for England and Wales• Other (please specify below)
<p>Does the agreement feature planned move-on or transition to settled accommodation within 2 years</p>	<p>Yes</p> <p>No</p> <p>Other (please specify)</p>
<p>Separate to the length of the tenancy, how long are you expecting to provide the accommodation to your tenant?</p>	<p>Up to 2 years</p> <p>More than 2 years</p>

Completed by:

Name:

Title:

Organisation:

Department:

Signature:

Date: