

## Landlord request form Local housing allowance safeguard policy Direct payment to landlord request

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Local housing allowance (LHA) is paid to the tenant rather than the landlord. However, where vulnerability of a tenant is proven under one of the four criteria listed under Section 2, payment maybe made directly to the landlord. It is important that you give as much information and supporting evidence as possible so that the right decision can be made quickly.

Section 1- Tenant and landlord details			
Housing benefit claim number (if known):			
Tenant's details			
Surname or family name	Address including room and or flat number		
Other names			
Telephone number			
Landlord's details			
Name	Address		
Landlord reference (if known)	Postcode		
Telephone number - work	Telephone number - mobile		
Email address	Fax		
Section 2 – Please tick which criteria the req	uest for direct payments is being made under		
Criteria 1 - The tenant is likely to have d	ifficulty managing their affairs		
Criteria 2 - The tenant is unlikely / impro	bable to pay the rent		
Criteria 3 - The tenant is eight weeks or			
Criteria 4 – To secure or retain a tenancy	у		

Please complete the section that is relevant to your request for direct payments.

## Section 3

Criteria 1 or 2
Direct payments under both these criteria are discretionary and help protect claimants who are likely to experience difficulties, or prevent claimants who are likely to act irresponsibly, from falling into rent arrears. Such tenants are vulnerable because they may have learning and/or physical disabilities, medical and/or mental health conditions, addiction issues, difficulty speaking English, difficulty managing money, a history of rent arrears, or inability to maintain rent payments.
Please provide details and supporting evidence. Where your tenant has rent arrears, a rent statement is required.
Criteria 3  Direct payments under this criteria are mandatory when a tenant has accrued the equivalent of eight or more weeks rent arrears. Details and supporting evidence of the rent arrears and recovery action is required.
Recovery Action Please tick the appropriate box(s) relating to the action you have taken or provide a detailed account of recovery. (this list is not exhaustive)
Court action Referred to another agency Payment plan Notice seeking possession Notice to quit Other

Rent (inc	luding freq	uency):		Tenancy start date:		
From	То	Rent due	Rent paid	Arrears to date	Action taken	
	ars to date			£		
Signed				Dated		
Criteria 4						
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A signed statement to confirm that the rent has been reduced to an affordable rent

in exchange for direct payments

Negotiations have taken place so that the tenant's rent at a level that is affordable to the tenant.	is not increased because it is currently
What date should the rent have increased?	£
What was the proposed rental increase?	£
How much will the rent remain at?	£
Please provide the following to demonstrate that the te	nancy has been secured / retained:-

- A copy of the agreement which shows that a contractual rent increase was due at this date and
- A copy of the amendment to the rental agreement, and
- A signed statement to confirm that the rent has not been increased and will remain an at affordable level in exchange for direct payments

## Supporting evidence

Please list which evidence you are providing to support this request and indicate which criteria it supports and if it is attached or to follow. Suggested types of evidence are given, however this list is not exhaustive; please add any other evidence you are providing to the list.

Evidence	To support	Attached	To follow
	Criteria		
	1,2,3 or 4		
Rent statement			
Statement from your tenant			
Letter from a support worker (eg social worker/probation officer)			
Letter from GP / medical professional			
A copy of the tenancy agreement			
A copy of the amendment to the current rental agreement			
A copy of the agreement which shows that a contractual rent increase was due at this date			
A signed statement to demonstrate that the tenancy has been secured / retained			

## **Declaration**

- The information given is true and correct
- I believe it to be in the best interest of my tenant for their benefit to be paid directly to myself

Signed	Date:

When you have completed this form please send it to:

FREEPOST RSJC-KKBE-ABXZ, Revenues and benefits, Hull City Council, PO Box 15, Hull. HU1 2AB

Or you can hand it in to any of our customer service centres