



Application for a Housing Benefit/Local Support for Council Tax Reconsideration or a Housing Benefit Appeal

Reconsideration

If you disagree with a decision that we have made, you can ask us to look at the decision again called a reconsideration.

To make a request for a reconsideration please complete the details over the page and return it to the Benefits Office. You need to give full details about why you disagree with the decision and why you think it is wrong.

If you are asking for a reconsideration of a Housing Benefit decision we must receive your request within one month of the date we first notified you of our original decision. If your request is received outside of the one month time limit you must also provide good reason for not making your request within the time limit allowed.

It is important that you give as much information as you can so that we are aware of all the facts when we deal with your request. You may wish to provide supporting evidence - for example, a letter from your doctor or care worker etc.

We will then write to you to tell you whether the decision has been changed or not. If the decision is not changed, or the decision is changed to pay you less benefit, you can then submit an appeal.

Appeal

If you wish to appeal against a decision regarding your Housing Benefit we must receive your appeal within **one month** of the date we first notified you of our original decision (where you have not already requested a reconsideration) or within **one month** of the date we notified you of the outcome of a reconsideration request. You need to give full details about why you disagree with the decision / outcome of the reconsideration request.

If your appeal is received outside of the one month time limit you must also provide good reason for not making your appeal within the one month time limit.

If the decision is not changed, or the decision is changed to pay you less benefit your appeal will then proceed to HM Courts & Tribunals Service to be determined by an independent Tribunal Judge.

If you wish to appeal against a decision regarding your Local Support for Council Tax you must have first requested a reconsideration. An appeal must then be made direct to the Valuation Tribunal within 2 months of the date that we notified you of the outcome of your reconsideration request. Appeal forms are available on their website at www.valuationtribunal.gov.uk

Name :

Address:

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Benefit Ref: Tel No:
(optional)

1. Please tick to show whether you wish to make a reconsideration or an appeal:

Housing Benefit/Local Support for Council Tax Reconsideration. I want you to look at your decision again.

Housing Benefit Appeal. If you cannot change your decision, I want you to forward my Housing Benefit Appeal to HM Courts and Tribunals Service.

2. Please tick to show which benefit you want us to look at again:

Housing Benefit

Local Support for Council Tax

Both

3. Please give the date that we first notified you of our decision - this is at the top of the decision letter we sent you. If this date is more than one calendar month old you must provide reasons for not requesting a reconsideration/appeal within the time limit allowed.
Do this on a separate sheet of paper.

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4. Please provide full details why you disagree with our decision and why you think it is wrong. It is important that you give us as much information as you can so that we have all the facts when we look at your claim again. Use an additional sheet of paper if necessary.

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DECLARATION

We will process your personal information in accordance with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

We may use your personal information in a number of ways, but only for the purposes for which it was given. We may share your information with, and obtain information about you from, other departments of the Council or other organisations where it is lawful to do so. Please see our Privacy Notice at www.scarborough.gov.uk/gdpr for more information and the contact details of our Data Protection Officer.

5. Your Signature : Date :

Please return this form to:
The Benefits Office, PO Box 148, Scarborough Borough Council, Town Hall,
St Nicholas Street, Scarborough, YO11 2ZH