



# Lone Pensioner Allowance Application Form

Account ID:

Ratepayer ID:

Date issued:  /  /

**People aged 70 and over who live alone are entitled to a 20% allowance off their rates. If someone else lives with you, you may still be entitled to this allowance. Please see Guidance Notes at the back of this form.**

**This allowance is not affected by your income or savings and we will not ask you to provide any financial details.**

**Please complete Sections 1 – 4 and return to the address provided on the form.**

**Do you own your property?** Yes  No  (Please tick)

If you ticked yes continue with the completion of this form.

If you ticked no and you are a tenant who pays rent on the property or if you are buying your home under the co-ownership or rental purchase schemes or ownership of the property has been transferred to someone else and it is not part of your estate please contact the Housing Executive on 08448 920902 or visit [www.nihe.gov.uk](http://www.nihe.gov.uk) to download an application form.

## Section 1 – Details of applicant

Name:

Address:

Date of birth:  /  /

Contact telephone number:

National Insurance Number:

*(This can be found on your state pension letter or your pension swipe card)*

## Section 1 continued – Details of applicant

Is this your sole or main residence? Yes  No   
 (See Section 3 of the guidance notes)

Do you live alone in the property? Yes  **Go to Section 2** No

If you ticked no you may still be entitled to the allowance providing the people that live with you meet certain conditions. See section 1 of the guidance notes. Please provide details of the person/persons living in the property with you below.

Name	Date of birth	Relationship to you, if any	Do they fall into one of the criteria listed below? If so, please state which criteria they fall into

**A resident carer.** If you have someone living with you to provide care we will contact you to obtain more information about them.

**In long time care or in hospital.** Please send us a letter signed by their health professional confirming the date they went into hospital or care and how long they will remain there.

**Is severely mentally impaired.** Please contact us and we will issue you a form which you can have completed by the persons GP confirming they have a severe mental impairment which appears to be permanent.

**Anyone under 18 or over 18 if someone is getting child benefit for them.** Please send us a copy of their birth certificate if they are under the age of 18 or a copy of the Child Benefit award letter if they are over 18.

**If you provide care for the person who lives with you.** If you have someone living with you who you provide care for we will contact you to obtain more information about that person.

## Section 2 – Applicant’s proof of identification / date of birth

Please enclose a **photocopy** of one of the following:

Birth Certificate

Drivers Licence

Passport

Senior Smart Pass

Medical Card

**You can also bring this form and your proof of identification to any Land and Property Services or NIHE office to have your identification verified. If you have any difficulty providing any of the above documents please contact us on 0845 300 6360 or text phone on 0845 300 6361.**

## Section 3 – Further help with your rates

Further help with your rates may be available through the Housing Benefit and Rate Relief schemes; however you will have to complete a separate claim form and give full details of your income and savings.

**Would you like us to send you a claim form for Housing Benefit and Rate Relief?**

Yes

No

## Section 4 – Declaration

- 1 I confirm that I live alone or that I have provided details of the person/persons living with me. The information I have provided in this application form is true and complete. If I supply or allow to be supplied, any information which I know to be false I may be liable to criminal prosecution.
- 2 I understand that I must tell Land and Property Services if any of my circumstances change.
- 3 I am aware that I may have to pay rates that become due as a result of any overpayment of Lone Pensioner Allowance.
- 4 I confirm that I give my consent for the Land and Property Services to seek any further information from other sources to assess this claim.
- 5 I understand that I must continue to make payments to my rate account while awaiting a decision on my application.

**Name in CAPITALS:**

**Signature:**

**Date:**

**If you completed this application form on behalf of the ratepayer please provide the following information:**

**Name:**

**Contact Telephone Number:**

**Signature:**

**Relationship (if any) to Applicant:**

## Data Protection Act 1998

We will use the information which you provide on this form to process your application for Lone Pensioner Allowance. Occasionally we may pass this information to other organisations, but only if we have to do so by law or under the Data Protection Act 1998.

**Please return the completed form to:**

Land and Property Services  
Lone Pensioner Allowance Team  
Londonderry House  
21-27 Chichester Street  
Belfast BT1 4JB

Telephone: 0845 300 6360  
Text phone: 0845 300 6361

# Lone Pensioner Allowance Application – Guidance Notes

## 1 Persons living with you

Lone pensioner allowance can be awarded to ratepayers who are 70 or over and live alone. If someone lives with you, you may still be entitled to the allowance if they are:

- **A resident carer.** If you are aged 70 or over and get a prescribed benefit and have a person living with you who provides care for more than 35 hours per week, who is not a disqualified relative. A disqualified relative means a person who is the spouse of the other or they live together as husband and wife or if the person is the civil partner of the other or if they live together as if they were civil partners.
- **Someone who is in hospital, nursing home or residential care.** If the main residence of the person is in a hospital, nursing home or residential care home the allowance may still be granted subject to the provision of information requested in Section 1.
- **A person who is severely mentally impaired.** If a doctor has stated that the person living with you has a severe mental impairment which appears to be permanent (however caused). A form will need to be completed by their doctor to confirm this.
- **Anyone under 18 years old or over 18 if someone is in receipt of child benefit for them.** If you have stated that the person/persons living with you is/are under 18 we will need to see a photocopy of their birth certificate to confirm this. If they are over 18 and someone is getting child benefit for them we will need to see proof that child benefit is being paid.
- **If you provide care for the person who lives with you.** If you have someone living with you who you provide care for we will contact you to obtain more information about that person.

## 2 Award of allowance

A standard 20% allowance will be awarded where Land and Property Services is satisfied that the applicant has met the conditions of the scheme. This allowance will be applied after any other exemption, relief, rebate, allowance or benefit.

## 3 Sole or main residence

Any allowance granted shall only be made in respect of a dwelling house which is the sole or main residence of the person entitled to the allowance. Where an applicant has more than one property (including properties outside Northern Ireland) the allowance can only be awarded on the property within Northern Ireland that the applicant considers to be their main dwelling.

## 4 Submission of application

Applications can be submitted by post or at any Land and Property Services office or at any Northern Ireland Housing Executive office where your identification can also be verified.

<b>FOR OFFICIAL USE</b>	Official Stamp
Identification Witnessed by (print) _____	
Signature _____ Date _____	
Office Address _____	
Telephone _____	
Type of Identification Witnessed	Birth Certificate <input type="checkbox"/> Drivers Licence <input type="checkbox"/>
	Smart Pass <input type="checkbox"/> Passport <input type="checkbox"/> Medical Card <input type="checkbox"/>