

WHERE TO FIND US

St Edmundsbury Council offices are open Monday to Friday

Monday-Thursday

9.00am-5.00pm

Friday

9.00 to 4.00pm

If you have a problem or require benefit advice please do not hesitate to contact us,

St Edmundsbury House

Western Way

Bury St Edmunds

Suffolk IP33 3YS



St Edmundsbury
BOROUGH COUNCIL

Tel: 01284 757269 / 757274

or

Council Offices

Lower Downs Slade

Haverhill

Suffolk CB9 9EE



St Edmundsbury
BOROUGH COUNCIL

Tel: 01440 765108

INDEPENDENT ADVICE

Contact your local advice agency

Citizens Advice Bureau

90 Risbygte Street

Bury St Edmunds

Tel: 01284 753675

or

Citizens Advice Bureau

4 Swan Lane

Haverhill

Tel: 01440 704012



St Edmundsbury
BOROUGH COUNCIL

REVENUES & BENEFIT SERVICE

How to claim
an overlap of
Benefit

WILL I BE ENTITLED TO AN OVERLAP?

Housing Benefit can only be paid for two properties simultaneously if you are obliged to take up the tenancy on your new property before the period of notice required by your landlord (in respect of your previous accommodation) has expired. Normally Housing Benefit will only be paid at your new address from the date that you actually move into that property. The maximum period that benefit can be paid for two properties at the same time is **four weeks**.

The only occasions where a person can be treated as occupying their home prior to moving in are where the delay in taking up residence was caused by either:

- i) the requirement to adapt the new home to meet the disablement needs of the tenant, or a member of their family; or
- ii) having to wait for the decision on an application for a Social Fund Payment to meet a need related to moving into the new dwelling (provide confirmation of this if applicable).

and

is 60 or more, or has a child under 6, or someone in the family satisfies the conditions for a disability premium; or

- iii) liability started when they were in hospital or residential accommodation.



St Edmundsbury Borough Council

Request for Overlap of Housing Benefit

Please complete the following if you wish to request an overlap of Housing Benefit in respect of your previous address.

1) Your name Claim Reference

2) Your Previous Address

3) Your Current Address

4) The date you handed in your notice at your previous address

5) The date the tenancy of your old address ended (i.e. the date of the end of the notice period)

6) The date you actually moved from your previous address to your current address

7) The date the new tenancy was offered

8) The date the new tenancy was accepted

9) The date the new tenancy starts as shown on your tenancy agreement

Finally, please use the box below to let us know of anything you feel may be useful in support of your application (continue on separate sheet if necessary).

Signed Date