

Self-Employed Earnings Information – For new businesses trading for less than 13 weeks

This form is for new businesses which started trading within the last 13 weeks. Please complete **PART ONE** including any actual trading figures to date and then complete **PART TWO** with an estimation of your expected trading figures for the next 13 weeks.

PART ONE

Your Benefit Claim Number (if known):

Section 1- About You

Name of Self-Employed person

Address of Self-Employed person including postcode

Section 2 – Company Directors

Are you a Director of a limited company or business?

Yes No

If you ticked 'No', go to **Section 3** of this form.

If you ticked 'Yes' you only need to complete this section and then sign the declaration in **Section 12**, as you are not classed as self-employed.

Company Directors only:

Company Directors are not self-employed. Please provide your last 5 weeks/2 months/3 fortnightly payslips, and confirmation from a company official of all income and payments you are receiving from this business.

Do you receive any share or dividend income from the company?

Yes No

What is the value of your share dividend per annum?

£_____

What is the capital value of the company?

£_____

Section 3 – About Profit and Loss Accounts

Do you have any profit and loss accounts prepared by an accountant (audited or otherwise) for the last trading year?

Yes No

If 'Yes', you **only** need to provide these accounts. This form does not need to be completed unless we asked for information for a different period.

If 'No', please fully complete, sign and return this form.

Section 4 – About the Self-Employed Business

Name of business

Business address including
postcode

What type of self-employed
business is this?

Date business started

/ /

Please confirm below the period you are giving us details for. As this form is for new businesses only, 'A' should be the date you started trading and 'B' should be the date you are completing this form.

A - Start date of period

/ /

to **B** – End date of

period

/ /

What is the average number of hours you work per week?

_____ per week

Are you a sole trader?

Yes No

What was the total gross income for your trading period A to B above. This is the business's total income before expenses.

£ _____

Please list any Government funding below:

New Enterprise Allowance

£ _____

Other Government funding, please indicate _____

£ _____

Is your business a partnership?

Yes No

If 'No' go to **Section 5**.

If 'Yes' - how many other business partners are there? _____

what percentage of the total gross income above is yours? _____%

_____%

If you are a member of a couple, is your actual partner an associate in the business?

Yes No

If 'Yes' what percentage of the profit/loss is theirs?

_____%

Section 5 – Home Partly Used for Business

Do you use part of your own home for business purposes? Yes No

If 'No' go to **Section 6**. If 'Yes' give details below:

How many rooms in total are there in your home? _____

Which room (or rooms) do you use for business purposes? _____

Is the room (or rooms) used only part of the time for business use? Yes No

If 'No' go to **Section 6**. If 'Yes' give details below:

What percentage of the time is for business purposes? _____ %

Section 6 – Business Expenses

If you are a self-employed childminder do not fill in this section, go to **Section 7**.

List all your self-employed business-related expenses in column B).

Specify what percentage of any expense is for personal use. For example, if you include telephone calls as an expense, you must tell us the percentage in column C). If no part of an expense is for personal use, write 0%.

Please give the amount of expense for the period you have stated in Section 4.

PLEASE NOTE: Not all expenses declared on this form can be used in the calculation of your Housing Benefit and/or Council Tax Reduction.

A) Type of expense	B) Amount of expense	C) % of personal expense
Accountancy fees	£	
Admin charges	£	
Advertising	£	
Bank charges	£	
Building costs	£	
Building maintenance	£	
Business entertainment	£	
Business rates (NNDR)	£	
Capital allowances	£	
Capital on loans for repairs or replacements	£	
Charges to convert foreign currency to £	£	
Cleaning of business premises or equipment	£	
Debt recovery costs	£	
Delivery charges	£	
Depreciation	£	
Expansion costs	£	
Hire or leasing charges	£	
Insurance for business liabilities/assets	£	
Interest on loans for repairs or replacements	£	
Legal fees	£	
Losses incurred before the trading period	£	
Losses from any other business offset	£	
Materials	£	
Membership fees for professional bodies	£	
Postage and printing	£	
Proven bad debts	£	
Repair costs for insured equipment or machinery	£	

Repair costs for uninsured equipment or machinery	£	
Replacement costs for equipment or machinery	£	
Rent wholly and exclusively business use	£	
Security for business premises	£	
Set up costs	£	
Special clothing e.g. overalls and uniforms	£	
Subcontractor fee 20% or 30% for builders on CIS	£	
Subscription fees for professional bodies	£	
Subsistence	£	
Stock Purchases	£	
Telephone broadband charges	£	
Transport/travel costs	£	
VAT paid to HMRC (excluding refunds)	£	
Wages for employees other than yourself	£	
Other expenses not listed above (give details below)		
	£	
	£	
	£	
	£	
	£	
Vehicle expenses (give details below)		
Who owns the vehicle(s)? SELF/BUSINESS		
Is/are the vehicles(s) used solely for business? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If 'Yes' do you have your own vehicle for personal use? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If 'No' what proportion of the total mileage is business use? _____%		
Road Tax	£	
Fuel - Petrol/Diesel	£	
Repairs and Maintenance	£	

Section 7 – National Insurance

Are you exempt from paying Class 2 National Insurance Contributions? Yes No

If 'Yes' please provide your Certificate of Small Earnings Exception.

Section 8 – Personal Pension Scheme

If you pay into a personal pension scheme, please give details:

How much do you pay?	How often do you pay this? e.g. monthly
£	

You must provide proof of the scheme to which you belong and of the payments made.

Section 9 – Looking Forward

To help us decide when we next need to review your self-employed income, please indicate below when you expect have your profit and loss figures available for the next full trading year?

____/____ (MM/YYYY)

PART TWO

Section 10 - Self-employed earnings estimate declaration

As you have started self-employment in the last 13 weeks please use this sheet to give us a detailed estimate of your expected trading figures for the next 13 weeks.

What is the estimated gross income for the £ _____
next 13 weeks. This is your business's total expected income before expenses.

Section 11 – Estimated Business Expenses for the Next 13 Weeks

If you are a self-employed childminder do not fill in this section, go to **Section 12.**

List all your self-employed business-related expenses in column B).

Specify what percentage of any expense is for personal use. For example, if you include telephone calls as an expense, you must tell us the percentage in column C). If no part of an expense is for personal use, write 0%.

Please give the amount of expense for the period you have stated in Section 10.

PLEASE NOTE: Not all expenses declared on this form can be used in the calculation of your Housing Benefit and/or Council Tax Reduction.

A) Type of expense	B) Amount of expense	C) % of personal expense
Accountancy fees	£	
Admin charges	£	
Advertising	£	
Bank charges	£	
Building costs	£	
Building maintenance	£	
Business entertainment	£	
Business rates (NNDR)	£	
Capital allowances	£	
Capital on loans for repairs or replacements	£	
Charges to convert foreign currency to £	£	
Cleaning of business premises or equipment	£	
Debt recovery costs	£	
Delivery charges	£	
Depreciation	£	
Expansion costs	£	
Hire or leasing charges	£	
Insurance for business liabilities/assets	£	
Interest on loans for repairs or replacements	£	
Legal fees	£	

Losses incurred before the trading period	£	
Losses from any other business offset	£	
Materials	£	
Membership fees for professional bodies	£	
Postage and printing	£	
Proven bad debts	£	
Repair costs for insured equipment or machinery	£	
Repair costs for uninsured equipment or machinery	£	
Replacement costs for equipment or machinery	£	
Rent wholly and exclusively business use	£	
Security for business premises	£	
Set up costs	£	
Special clothing e.g. overalls and uniforms	£	
Subcontractor fee 20% or 30% for builders on CIS	£	
Subscription fees for professional bodies	£	
Subsistence	£	
Stock Purchases	£	
Telephone broadband charges	£	
Transport/travel costs	£	
VAT paid to HMRC (excluding refunds)	£	
Wages for employees other than yourself	£	
Other expenses not listed above (give details below)		
	£	
	£	
	£	
	£	
	£	
Vehicle expenses (give details below)		
Who owns the vehicle(s)? SELF/BUSINESS		
Is/are the vehicles(s) used solely for business? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If 'Yes' do you have your own vehicle for personal use? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If 'No' what proportion of the total mileage is business use? _____%		
Road Tax	£	
Fuel - Petrol/Diesel	£	
Repairs and Maintenance	£	

Section 12 – DECLARATION

Please read this declaration carefully before you sign and date it.

I understand the following.

- If I give information that is incorrect or incomplete, you may take action against me. This may include court action.
- You will use the information I have provided to process my claim for Housing Benefit and/or Council Tax Reduction. You may check some of the information with other sources as allowed by law.
- You may use any information I have provided in connection with this and any other claim for Social Security/Her Majesty's Revenue and Customs Benefits that I have made or may make. You may give some information to other organisations such as government departments, local authorities and private sector companies such as banks and organisations that may lend me money, if the law allows this.

I know I must let the council know about any changes in my circumstances, which might affect my claim.

I declare the information I have given on this form is correct and complete.

Signature of self-employed person

Date

Please return this form:

By post to - Revenues & Benefits Service, PO Box 238, Stanley, Co Durham, DH8 1FP, or

By Email to – benefits@durham.gov.uk including your Benefit Claim Number (if known) and the word 'claim' in the subject field and attaching a photograph or scanned copy of this form.

In Person at – one of our Customer Access Points