

## Self Employed Declaration of Earnings

# City of Cardiff Council Housing Benefit, Council Tax reduction, Free School Meals

Complete this form only if you have been trading for at least one month.

### **About you**

Full name: Address:

Postcode:
Telephone number:
Claim reference number if known:
Allegant and an arm leave to a con-
About your business
Business name:
Business address:
Type of business:
Date business started:
Are you a Company Director? (If you are the business will have been registered with Companies
House): YES/NO
Average number of hours worked per week:
Do you have prepared accounts audited or otherwise for the last financial year? (Your HMRC self-
assessment form is not acceptable as proof of your self-employed income) YES/NO
If you've answered NO, give the reason and the date you expect to have them:
If you've answered YES you do not need to complete this form, please submit these accounts
Is your partner on the payroll of the business? YES/NO
If YES what are his/her earnings? £ every week/month

### **Income and Expenses**

We need details of all income and expenses over the last financial year 9 April to March. If you have not been trading for that long please details all income and expenses for the entire time you have been trading

What	is th	e EXA	ACT p	period o	of inco	me a	nd e	exper	nses	covere	d on	this f	orm?	)				
From	1	1	1	to	1	1												
What	is th	e TOT	TAL in	ncome	of the	busir	ess	s duri	ng th	is peri	od?	£						
				ness re this pe								nterp	rise <i>F</i>	Allow	ance	e or a	ny C	OVID
		_		s. Include le deta				-		to the I	busir	iess.	(If yo	u are	e a cl	hildm	inder	you
				ıt to sel <b>II cont</b> ı		ons					£.							
Wages paid out to spouse Include any NI contributions										£.								
				it to oth		ons					£.							
	Acc	ounta	ncy c	osts							£.							
	Ban	k chai	rges								£.							
	Ren	t for b	usine	ess pre	mises						£.							
				l and h e <i>mot</i> o		•		s			£.							
	Clea	aning									£.							
	Carı	riage,	pack	aging a	and de	livery	cos	sts			£.							
	Hea	ting &	light	ing for	busine	ess us	е				£.							

l	Legal fees	£					
I	Protective clothing	£					
;	Stationary and postage	£					
,	Advertising	£					
I	Purchase of stock and supplies	£					
;	Subscription to a professional organisation	£					
	Telephone <b>Amount for business use only</b>	£					
,	VAT payments and excess VAT payments	£					
I	Business insurance	£					
	If you pay business insurance please state what is covered						
I	Hire / Leasing charges	£					
i	If you pay hire or leasing charges please state what is hired / leased.  DO NOT INCLUDE CAR						
New E	Equipment and repairs to existing equipment						
	Have you paid for <b>repairs</b> to any business assets during the accounts period in Section 3?	YES / NO					
	How much was the repair?  Please provide proof if the repair was a large  amount	£					
	Have you bought any <b>new</b> business assets during the accounts period in Section 3?	YES / NO					
,	What was purchased?						
I	How much was the purchase(s)?						

Business Loans	
Are you repaying any business loans?	YES / NO
What was the loan(s) taken out for?  Please enclose a copy of the loan agreement(s)	
What are the loan repayments?	£every
How much of the total repayment is for interest?	£every
Motoring Expenses	
Do you use a vehicle for business?	YES/NO
Total spent on car lease for the vehicle	£every
Total spent on road tax for the vehicle	£
Total spent on fuel for the vehicle	£
Total spent on insurance for the vehicle	£
Do you also use the vehicle for personal use?	YES/NO
If yes above, how often is your vehicle used for personal use?	%
Is the vehicle insured for business use?	YES/NO
Bad Debt	
Please state the details of each actual bad debt, including any recovery action you have taken	
Do not include provisions for bad debt	

Other Expenses	
	£
	£
	£
	£
	£
	£
Future Trading	
Do you expect income and expenses for the next six months to be similar to those quoted above?	YES/NO
If 'NO' explain likely differences	
Any other information	
Please tell us about anything else that you think we s	hould know in the space below

#### **Declaration**

The information I have given the Council is true and complete. I understand that to give false information may lead to prosecution. I authorise the council to verify any information given by me, should they so desire. I undertake to notify any change in my income IMMEDIATELY if such changes occur.

Signature:	
Date:	

You can upload this form online using your mobile at <a href="www.cardiff.gov.uk/evidencebenefits">www.cardiff.gov.uk/evidencebenefits</a>, email it to us at <a href="mailto:benefits@cardiff.gov.uk">benefits@cardiff.gov.uk</a> or post it to:

Freepost Cardiff Council Housing Benefit

PO Box 6000

Cardiff CF11 0WZ

This form is available in Welsh / Mae'r ffurflen hon ar gael yn Gymraeg