

CHB number	
New	Additional
ACT	MiCard

Social Security

Claim for Child Benefit

Date of receipt

Please read the CH2 notes **before** completing this form in **ink**

Important: Please answer **all** the questions that **apply** to you and send **all** the documents we ask for.

Part 1 About you

Please tell us about yourself.

1 Title
(please tick only one box)

Mr Mrs Miss Ms Other

2 Surname or family name

3 Other names

4 Full address

Postcode

5 Previous name(s) (if any)
(include your maiden name)

6 Date of birth

dd / mm / yyyy

7 National Insurance (NI) number

Letters Numbers Letter

8 Daytime telephone number

If we may contact you by email, please provide your email address.

9 Have you lived continuously in the Isle of Man for the last 27 weeks immediately before the date of your claim (this is the date we receive your claim)?

Yes

No

10 If you answered "No" to question 9 and you have a partner (see Part 2 for a definition of "partner"), has your partner lived continuously in the Isle of Man for the last 27 weeks?

Yes

No

11 Please answer both questions (a) and (b).

(a) Are you subject to immigration control?
See page 1 of the CH2 notes.

Yes No

(b) Have you been granted your current immigration status in the last 3 months?

Yes No

If Yes, on what date was your immigration status granted?

dd / mm / yyyy



The Treasury

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12 Please tell us:

(a) Your nationality (we may need to see your passport)

(b) Your previous country of residence (if any)

(c) How long you lived in that country (if applicable)

(d) Your date of arrival in the Isle of Man (if applicable)

13 Are you a member of HM Armed Forces or a civil servant working abroad? Yes No

14 Have you ever claimed Child Benefit in the Isle of Man before? Yes No
Tick **Yes** if you are currently getting Child Benefit.

15 What is your Marital or Civil Partnership status? (please tick one box)

Married or in a civil partnership
 Living with a partner as if you are married or in a civil partnership
 Single
 Widowed

Divorced
 Separated (if you have separated within the last 12 months please provide us with the date you separated)

16 From what date would you like to claim child benefit?

Part 2 About your partner

We treat 2 people as partners of each other for child benefit if –

- a) they are married to each other or are civil partners of each other and are members of the same household; or
- b) they aren't married to, or civil partners of, each other but are living together as if they are.

17 Partner's title (please tick only one box) Mr Mrs Miss Ms Other

18 Partner's surname or family name

19 Partner's other names

20 Partner's date of birth

21 Partner's National Insurance (NI) number
Letters Numbers Letter

Please ensure you give us your partner's correct NI number to avoid delay in paying your benefit.

22 Partner's nationality

23 Is your partner a member of HM Armed Forces or a civil servant working abroad? Yes No

24 Is your partner receiving Child Benefit now or are they waiting to hear if they can get Child Benefit? Yes No

If you answered "No" please go to **Question 27**.

25 Partner's Child Benefit number (if you know it). **CHB**

The Child Benefit number is on any letters we have sent them about Child Benefit. If you don't know the Child Benefit number, don't delay sending this form back to us.

26 The full name and date of birth of the eldest child your partner is receiving Child Benefit for.

Surname **Other names**

Sex (M or F) **Date of birth**

27 Has the person named above been your partner throughout the past 12 months? Yes No

28 If No on what date did you start living together? We may need to get in touch with you for further information.

29 YOU DO NOT NEED TO TELL US ABOUT CHILDREN YOU ALREADY GET CHILD BENEFIT FOR

Please list below the **full name, sex** and **date of birth** of each child for whom this claim is for. If this claim is for more than one child list them in order of age, elder or eldest first.

If any child in this claim was born outside the Isle of Man or the UK, we will need to see their passport, or if they don't have a passport, their travel documents used to enter the Isle of Man or the UK.

Surname or Family name As shown on the birth or adoption certificate	Other names As shown on the birth or adoption certificate	Sex (M or F)	Date of birth	School or College attended (if applicable)
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			dd / mm / yyyy	
			dd / mm / yyyy	
			dd / mm / yyyy	
			dd / mm / yyyy	
			dd / mm / yyyy	
			dd / mm / yyyy	

If you want to include more than 6 children in this claim please give particulars of the other children on a separate sheet of paper. Please sign and date it and attach it to this form.

30 Please state how many birth certificates you are enclosing (if none, write "NONE" – you will need to send them to us later – if we don't receive the birth certificate this will cause a delay in processing your claim). A birth certificate is required (full certificate if possible) for each child you are claiming Child Benefit for – named in question 29. Please see "How do I claim" on page 3 of the notes.

31 Is each child living with you now?

Yes

No

If **No**, please tell us the name of each child who isn't living with you and the address where the child is living.

Name

Address

32 Has each child lived with you for the last 12 months or from birth if less than 12 months old?

Yes

No

If **No**, please tell us the name of each child who has lived elsewhere, the address they lived at and the date the child started to live with you (if applicable).

Name

Address

Date

33 Is each child your own child?

(a legally adopted child counts as your own).

Yes

No

34 If the answer to question 33 is No please give the following information about any child who isn't your own. But if such a child is being legally adopted by you write "adoption pending" against that child's name.

Child's name

Mother's full name

Father's full name

35 Have you or anyone else claimed Child Benefit for any of the children named in question 29 either in the Isle of Man, the United Kingdom or abroad?

Yes No

If Yes, please give the full name of the person who made the claim

Their date of birth

And the address the claim was made from

<input type="text"/>
<input type="text"/>
<input type="text" value="Postcode"/>

36 Please tick the appropriate box or boxes if you or your partner have recently claimed or are receiving any of the following Social Security benefits:

Income Support

Employed Person's Allowance

Income-based Jobseeker's Allowance

Another benefit (please specify)

Income Tax Division will normally be able to give us the information we need to determine what your income is for the purposes of your claim for Child Benefit. If this isn't possible we will get in touch with you.

If you are a new mother, you are entitled to claim Child Benefit under our exceptional circumstances, from the date of birth for your new child/children.

Please tell us the gross amount of total income for tax purposes you expect to have in the 2024-25 tax year by completing the table below and sending the information we ask for. If you receive your income weekly or monthly, multiply the amounts received by the number of weeks/months in the year that you expect to receive income for.

Please note that we may ask the Income Tax Division of the Treasury and the people who are paying income to you for more information to help us decide what income each of you are likely to have in 2024-25.

Income you think you will have from 6 April 2024 to 5 April 2025

	Your annual income	Your partner's (if you have one) annual income
Gross wages or salary	£	£
Net profit from self-employment	£	£
Bank or building society interest	£	£
Rental income	£	£
Income from shares or stocks (dividends or interest)	£	£
Any other income which you have to pay IOM tax on	£	£
Totals	£	£

To help us confirm what income you are likely to have in the 2024-25 tax year please send us any of the information mentioned below (if either of you has it) with this form. We won't be able to process your claim until we have the information we need.

Gross wages or salary

Your pay slips for the last 3 months or all of your pay slips if you've been employed by a new employer for less than 3 months.

Net profit from self-employment

Your most recent profit and loss account or any other evidence of your income and expenditure if you're self-employed.

Bank or building society interest

Your last 3 bank or building society statements showing the interest each of you received.

Rental income

Your last 3 months rental income and expenditure statements or a copy of the last 3 months' bank statements showing the net income you receive from renting your property.

Income from shares or stocks (dividends or interest)

The last statements sent to you recording any dividends from shares or interest from stocks paid to you for the last 12 months.

Any other income which you have to pay IOM tax on (but not child benefit)

Any other information or evidence showing what other income you have which you have to pay IOM tax on.

If you provide any of the above information, but you don't think it will help us confirm what income you are likely to have in the 2024-25 tax year, then please tell us why when you send it in. We will return anything you send us if you ask us to do so.

If you're already getting paid another social security benefit by us and you don't wish to change how they are all paid to you, please don't complete this Part. Please go to Part 8.

If you are not being paid another social security benefit by us or you do wish to change how you are currently paid benefit by us then please read the bullet points below and complete the relevant section.

- Child Benefit can be paid weekly or every 4 weeks into your bank or National Savings and Investments (NS&I) investment account. If you want to be paid this way please complete **(a)** below, or
- you can collect your Child Benefit weekly by MiCard at a Post Office of your choice. For this method of payment you will need to enrol for a MiCard. If you want to be paid this way please complete **Part 7(b)**.

Part 7(a)

Payment into a bank account

The account can be:

- a bank cheque or deposit account (but not a mortgage account nor a business account) or
- a National Savings and Investments (NS&I) investment account (but not an ordinary account).

The account may be:

- in your name, your spouse's or partner's name, or in the name of a person authorised to receive benefits or act on your behalf, or
- in the joint names of you and your spouse or partner, or in the joint names of you and a person authorised to receive benefits or act on your behalf.

Payment **can't** be made into any account that is in a child's name.

We can only pay benefits into one bank account. If you are already receiving another social security benefit this way we will have to use the same account for your Child Benefit.

Where the account is not in your name, this form should be signed by you or a person authorised to receive benefits or act on your behalf.

Please note, if the account includes the name of someone acting on your behalf, you're confirming that they'll use the money in the way you tell them to.

Please tell us which account you want your Child Benefit to be paid into

Name and address of bank

	Postcode

Sort Code number

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Account number

--	--	--	--	--	--	--	--

Type of account
(deposit, current etc.)

Name account is held in

How often do you want to be paid?

Weekly

Every 4 weeks

Additional Information regarding payment into a bank account**Finding out how much we have paid you**

You should check your account statements regularly.

If you think the wrong amount is paid

You should contact us straight away.

We may have paid you the wrong amount because we were not able to change the amount you are paid quickly enough to take account of some new information you give us. If this is the case you will normally have to pay the money back. But you may not have to pay the money back if it is decided that you were paid too much for some other reason.

If not enough money is paid to you, we will add the money we owe you onto the next payment, or we may make a special payment.

By giving us your account details:

- you agree that we will pay your Child Benefit into that account, and
- you understand what we have told you above about "If you think the wrong amount is paid".

Please now go to Part 8.

Which Post Office would you like to collect your Child Benefit from?

I need to enrol for a MiCard

If you think the wrong amount is paid

You should contact us straight away.

We may have paid you the wrong amount because we were not able to change the amount you are paid quickly enough to take account of some new information you give us.

If not enough money is paid to you, we will add the money we owe you onto the next payment, or we may make a special payment.

If we have paid you too much money because we were not able to change the amount you are paid quickly enough you may have to pay it back. But you may not have to pay it back if it is decided that you were paid too much for some other reason.

By enrolling for a MiCard:

- you agree that we will pay you by MiCard, and
- you understand what we have told you above about "if the wrong amount is paid".

If you're not signing this form on behalf of somebody else, please go to Part 9.

Even though you can complete this form for somebody else, they must still sign it themselves unless -

- they can't manage their own affairs
- they can't sign for themselves

You can only sign this form if one or more of the following boxes apply. Tick all the boxes that apply to you.

I have a power of attorney for them which has been registered with the Courts

Please send a copy of the deed which shows the date of the Court decision and the seal of the Court.

I'm a receiver for them under a court order

Please send a copy of the court order which appointed you as receiver with this form

The Social Security Division of the Treasury has already appointed me to get their benefits and deal with their Social Security matters

I wish to be appointed by the Social Security Division of the Treasury to receive their benefits and deal with their Social Security matters because they can't manage their own affairs or can't sign for themselves

We will get in touch with you about this.

Please tell us about yourself here -

Your full name

Letters

Numbers

Letter

Your National Insurance (NI) number

Your date of birth

Your address

<input type="text"/>
Postcode

Daytime telephone number

Email address (optional)

To find out more about how we use information, contact any of our offices or visit our Social Security Division [privacy notice](#) page on the gov.im website.

I/WE DECLARE that the information I/we have given on this form is true and complete.

I/WE UNDERSTAND that my/our personal details, including details of my/our income(s), will be shared between the Social Security and Income Tax Divisions of the Treasury for the sole purpose of assessing my/our entitlement to Child Benefit and, if necessary, relevant details relating to one partner may be disclosed by the Social Security Division of the Treasury to the other partner.

I/WE UNDERSTAND that if I/we give false or incomplete information I/we may be committing an offence for which I/we may be prosecuted.

I/WE CLAIM CHILD BENEFIT (in the case of couples, **both** partners must sign below)

Signature

Please print your full name

Partner's signature

Please print your partner's full name

Date

Remember – Child Benefit can only be backdated for up to **12 months** from the date we receive your claim.

If you delay sending us your claim you will lose money.

Please check that you have answered **all** questions that **apply** to you. If you don't, we may need to get in touch with you. This can delay payment.

Contact details

Address: Child Benefit Team
Social Security Division
Markwell House
Market Street, Douglas
Isle of Man
IM1 2RZ

Direct Dial No: (01624) 685656 (option 2)
Email: childbenefit@gov.im
Website: www.gov.im/socialsecurity

All calls to and from Social Security are recorded for the benefit of our customers and staff to assist in the provision of service standards and to prevent any potential disputes.



Isle of Man
Government
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The Treasury

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Form CH2 April 2024