

Income-related Benefits - Change of Address

What to do

Complete **Parts 1 to 4**, making sure that you have answered all the questions and signed the declaration.

If you have a mortgage, please ask your mortgage lender to complete **Part 6**.

Send the form back to us as soon as you can. You can either post it to us at the address on the back page or take it to a Social Security office.

If you have any questions about your claim, please contact us.

Part 1

About you

Your title

(please tick only one box)

Mr

Mrs

Miss

Ms

Other

Please specify

Your surname or family name

Your other name(s)

Your new address

Postcode

Your telephone number

Your date of birth

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Your National Insurance (NI) number

Letters

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Numbers

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Letter

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Please tick a box below to tell us which benefit you are getting.

Employed Person's Allowance

Income-based Jobseeker's Allowance

Income Support



Isle of Man
Government

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The Treasury

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1. What date did you move into your new address?

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2. Are you the owner of your new address?

No Yes

3. Are you paying any money for your new address?

No Go to question 7

Yes Please tell us what the money is for and how much you are paying

Rent

£		every
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Mortgage interest - please ask your mortgage lender to complete **Part 5** of this form

Rates

£		every
---	--	-------

Board and lodging charge

£		every
---	--	-------

Service charge

£		every
---	--	-------

Residential or nursing home fee

£		every
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Please send proof of the amount you pay with this form.

4. Does the money you pay include any of the things listed below?

No Yes Please tick the boxes to say which things are included

- | | | | | |
|-----------------------------------|----------------------------------|------------------------------------|---|--|
| <input type="checkbox"/> Lighting | <input type="checkbox"/> Heating | <input type="checkbox"/> Hot water | <input type="checkbox"/> Use of kitchen | <input type="checkbox"/> Part furnishings |
| <input type="checkbox"/> Lunch | <input type="checkbox"/> Dinner | <input type="checkbox"/> Breakfast | <input type="checkbox"/> Furnishings | <input type="checkbox"/> Use of gas or electricity for cooking |

5. Who do you pay the money to?

Name

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Address

Postcode

Telephone number

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6. Is the person you pay the money to related to you?

No Go to question 7

Yes What is the relationship?

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7. Is anybody else living in the property with you?

(Answer **No** to this question if you are living in a hotel, guest house, residential home or nursing home and do not have a partner or dependant children living with you.)

No Go to question 8

Yes Please tell us about these people below

Name	Age	Relationship to you	The name of any Social Security benefit they receive
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

8. If you are paid your benefit by Mi-Card do you want to change the Post Office you collect your benefit from?

No Go to question 9

Yes Please tell us which Post Office you now wish to collect your benefit at

9. Please use this space to tell us anything else you think we may need to know, then go to your declaration

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

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 understand that if I give information that is incorrect or incomplete, legal action may be taken against me.

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

Your signature

Date

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Part 5

About your mortgage

Are your payments covered by an insurance policy? No Yes

Please ask your bank or building society to complete the section below. If you prefer, you can ask them to provide you with a letter which you can then send to us – but the letter must give all the information that we have asked for on this form.

If you wish to claim for help towards interest repayments on a home improvement loan, please tick this box. We will get in touch with you about this.

If your bank or building society cannot complete this form straight away, ask them for a letter which gives the same information that we have asked for on this form. Send this form back to us as soon as you can. Do not wait until you receive the letter from your bank or building society.

Part 6

To be completed by your bank or building society

I can confirm that the person(s), named in Part 1 of this form have a loan(s) which was taken out either for the purpose of acquiring an interest in the property named in Part 1 of this form or which was wholly to pay off another loan which had been taken out for this purpose.

The current amount of the loan outstanding is £

The interest rate currently applied to the loan is %

The current amount of the second loan outstanding is £

The interest rate currently applied to the loan is %

The current amount of the third loan outstanding is £

The interest rate currently applied to the loan is %

Signature on behalf of Date

Company stamp

Contact details

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

Telephone: 01624 685656
Email: socialsecurity@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.



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