Your appeal - Complete this form and take or send it to us.

| About you | | | | |
|---|---|-----------------------|--------------------------------|--|
| Your claim number | | | | |
| Your title | | Mr/Mrs/Miss/Ms | | |
| Your surname | | | | |
| All your other names | | | | |
| Your date of birth | | / / | | |
| National Insurance (NI) number | | | | |
| Get this from your NI number card, payslips, tax papers or letters from DWP. | | | | |
| Your address | | | | |
| | | | | |
| | | | | |
| | | | Postcode | |
| Daytime phone number | | Code | Number | |
| Have you arranged for someone to help you with your appeal? | | No No | | |
| | | Yes Please | tell us their name and address | |
| Their full name | | | | |
| Their address | | | | |
| | | | | |
| | | I Post vide | | |
| | | | Postcode | |
| Sign this box to authorise this person to act for you | | | | |
| | | | | |
| About the decision | | | | |
| For which benefit(s) are you appealing? | | Housing Benefit (Unde | er-occupancy rules) | |
| What is the date of the letter telling you about the decision? (Without this date, your appeal will not be considered.) | | | | |
| Your signature | | | | |
| You should sign here. If someone has been officially appointed to act for you or has the authority to act for you, they should sign here. | | | | |
| Signature | | | | |
| Date | / | ′ / | | |

Do not use this form to appeal about Council Tax Support. If you want to appeal about Council Tax Support you need to appeal to the Valuation Tribunal.

www.leeds.gov.uk 05/12 INVESTOR IN PEOPLE

About your appeal

Use the space below to say why you do not agree with the decision.

You must say **why** you think the decision is wrong. It is not enough to say 'I do not agree with the decision' or 'The money is not enough'.

The reasons you give should be like these examples: -

"My rent was £75 per week but you have stated it was £35 per week.", or

"I moved into the property on 1 November not 1 December."

If you are appealing against more than one decision, you must say why you do not agree with each one.

If you are appealing more than one month after the date of the decision, you must say why your appeal was delayed.

If you need more space, use another sheet of paper.

Remember to put your name and NI number on any extra sheets of paper.

Your appeal - Use this space to say why you do not agree with the decision. Use BLOCK CAPITALS

(1) YOU HAVE FAILED TO BASE YOUR DECISION UPON THE ACTUAL FACTS AND CIRCUMSTANCES OF MY CASE, OR AN INSPECTION OF MY HOME.

Please provide me with a copy of your policy which sets out how you define 'bedroom' for the purposes of the HB Regulations 2006 as amended by SI no.3040, and any other documentation which explains how you have reached your decision in my particular case including (i) a full explanation of how the council decided how many bedrooms are contained in my home and what involvement - if any - my landlord had in this process and (ii) a full explanation of how the property was assessed as being under-occupied in view of the composition of my household.

- (2) I BELIEVE YOU HAVE APPLIED A BLANKET POLICY, AND UNLAWFUL APPROACH, IN DETERMINING THAT I HAVE A SPARE ROOM.
- (3) I BELIEVE YOU HAVE FAILED TO TAKE INTO CONSIDERATION THE FOLLOWING SPECIFIC FACTS IN MY CASE:

Please consider this letter as a request for an EXPLANATION OF YOUR DECISION and AN INTERNAL REVIEW ON THE GROUNDS ABOVE

Make sure you have filled in all parts of this form and signed it. Then, take or send this form to:

Leeds Benefits Service Selectapost 15 Leeds LS2 8BA

Telephone: (0113) 222 4404

Minicom: (0113) 222 4410

Remember, you must make sure we get your appeal within one month of the date of our decision.

www.leeds.gov.uk 05/12