Carer's Allowance

Claim form for people getting State Pension

Carer's Allowance gives financial help to people who cannot take up full-time paid work as they provide regular care to a disabled person.

The quickest and easiest way to claim Carer's Allowance is online. Check if you can get Carer's Allowance and make a claim at www.gov.uk/carers-allowance

We have many different ways we can communicate with you

If you would like us to communicate with you by Braille, British Sign Language, a hearing loop, translations, large print, audio or something else please contact us. Please see details below.

About this form

- Only use this form to claim Carer's Allowance if you are getting State Pension. If you are not getting State Pension, contact us to find out how to claim.
- Check if you can get Carer's Allowance by using the checklist on **page 2** of the notes.
 - If you cannot get Carer's Allowance, go to **www.gov.uk** to see what other help you might be able to get.
- You, the carer, must fill in this form, not the person you provide care for.
- Please fill in this form with BLACK INK and in CAPITALS.
- Please answer all the questions and send us all the documents we ask for.
- Contact us if you cannot fill in this form or send us the documents we ask for, because this might delay your claim.
- This form and the notes are available in large print or Braille. Please ring **0800 731 0297**.
- If you have speech or hearing difficulties, you can contact us by textphone on **0800 731 0317**. The textphone service does not receive messages from mobile phones.

Calls to **0800** numbers are free from landlines and mobiles.

Normally, you can expect us to get back to you within 6 weeks. This may change at busy times of the year.

Remember

When you claim Carer's Allowance, the person you provide care for may stop getting any severe disability premium they get with their benefit. It could also affect their Council Tax reduction, but this would need to be checked with their local council.

There is more information about how Carer's Allowance affects other benefits in the Notes and at **www.gov.uk/carers-allowance**

You **must** tell the person you are providing care for, or their legal representative, **before** you claim Carer's Allowance.



About your Carer's Allowance

When do you want your Carer's Allowance claim to start?

You must give us an exact date or your claim will be delayed. If you do not fill in the day, month and year, we cannot accept your claim and we will send this form back to you.

Day	Мо	nth	Year	Exam	ple o	of an e	xact	t date:	
	/	/		11	/	01	/	2019	
Please m We will a later.									

Part 1: About you – the carer

Title For example Mr, Mrs, Miss, Ms. Surname or family name	
All other names in full	
All other surnames or family names you have used or have been known by	Letters Numbers Letter
Your National Insurance (NI) number	You can get this from your NI number card, letters about benefits, payslips or form P60. If you do not tell us your NI number, it could delay your claim.
Your date of birth	
What is your marital or civil partnership status?	single separated divorced or civil partner partnership dissolved living with partner widowed or surviving civil partner

Part 1: About you – the carer continued

Address	
	Postcode
Phone number	
Mobile number To help us deal with your claim or any queries you may have as quickly as possible, please give us your mobile phone number so we	
If you have speech or hearing difficulties and want us to contact you by textphone, tick this box.	
If you live in Wales and would like us to contact you in Welsh, tick this box.	
What is your nationality? For example, British. If you have a current passport, please give your nationality as shown on your passport.	
Which country do you normally live in?	
Which country are you living in now?	

Part 1: About you – the carer continued

Great Britain through years before the date claiming from? Great Britain is Englar and Wales.	nout the 3 e you are	Yes If No , please tell us in the table below about any countries you have lived in or visited in the 3 years before the date you are claiming from. If you had more than 5 visits abroad, tell us about them in Part 5 .					
Country	From	То	Reason for being there. For example, you live there, for a holiday, for work.	Was the person you look after with you? Yes or No			
	/ /	/ /					
	/ /	/ /					
	/ /	/ /					
	1 1	/ /					
	/ /	/ /					
Do you, or a member family, get any benef pensions from a cour than Great Britain? By family we mean your civil partner and dechildren and adults.	fits or ntry other our spouse		ave answered Yes to this questi act you for more information.	on we			
Have you, or a member of your family, claimed any benefit or pension which has not yet been decided, from a country other than Great Britain?		No Yes If you have answered Yes to this question we will contact you for more information.					
Are you, or a member of your family, working in or paying insurance to, another EEA state or Switzerland? For a list of EEA countries, see page 4 of the Notes or go to www.gov.uk/claim-benefits-abroad/where-you-can-claim-benefits			ave answered Yes to this questicact you for more information.	on we			

Part 2: About your partner

Tell us about your partner, if you have one.

We use partner to mean:

- a person you live with who is your husband, wife or civil partner, or a
- a person you live with as if you are a married couple

We look at any money your partner gets from benefits when we work out if you can get Carer's Allowance.

Have you lived with a partner at any time since the date you want to claim from?	No Go to Part 3. Yes
Their title For example Mr, Mrs, Miss, Ms.	
Their surname or family name	
All their other names in full	
All other surnames or family names they have used or have been known by	
Their National Insurance (NI) number	Letters Numbers Letter You can get this from their NI number card, letters about benefits, payslips or form P60. If you do not tell us their NI number, this could delay any benefit you may be entitled to.
Their date of birth	1 /
Their nationality	
Have you separated from your partner since the date you want to claim from?	No Yes When did you separate?

Part 3: About the person you provide care for

Remember

You **must** tell the person you are providing care for, or their legal representative, **before** you claim Carer's Allowance.

Their title For example Mr, Mrs, Miss, Ms.	
Their surname or family name	
All their other names in full	
Their National Insurance (NI) number	Letters Numbers Letter You can get this from their NI number card, letters about benefits, payslips or form P60. If they are aged 16 or under, their NI number is the reference number on letters about Disability Living Allowance for them.
Their date of birth	/ /
Their address You do not have to live at the same address as the person you provide care for.	
	Postcode
What is this person's relationship to you?	
Are they getting Armed Forces Independence Payment?	No Yes
Is the person you care for receiving a disability benefit from an EU country?	No Yes
If Yes , what is the name of the benefit?	
Which country is paying the benefit?	
Please send in a recent notification regarding this benefit award if you have one.	

Have you spent 35 hours or more each week providing care for this person since the date you want to claim from?	No Yes
Is another person getting the carer element of Universal Credit for providing care for them? There is more information about what happens if there is more than one carer on page 4 of the Notes booklet.	No

Has the person you provide care for been in hospital, a care home or respite care for at least a week in the 6 months before the date you want to claim from?	No Go to the next page. Yes Tell us about this below. If they had more than 3 periods in hospital, a care home or respite care, tell us about them in Part 5 .					
Period 1						
They were in	hospital. a care home or respite care.					
When were they in hospital, a care home or respite care?	From / / / /					
While they were in hospital, a care home or respite care, did you still provide care for 35 hours a week?	No Yes					
If they were in a care home or respite care, were they getting care from a medical professional during this time?	No Yes					
Period 2						
They were in	hospital. a care home or respite care.					
When were they in hospital, a care home or respite care?	From / / to					
While they were in hospital, a care home or respite care, did you still provide care for 35 hours a week?	No Yes					
If they were in a care home or respite care, were they getting care from a medical professional during this time?	No Yes					
Period 3						
They were in	hospital. a care home or respite care.					
When were they in hospital, a care home or respite care?	From / / to					
While they were in hospital, a care home or respite care, did you still provide care for 35 hours a week?	No Yes					
If they were in a care home or respite care, were they getting care from a medical professional during this time?	No Yes					

Have you been in hospital or a care home or respite care for at least a week in the 6 months before the date you want to claim from?	No Go to the next page. Yes Tell us about this below. If you had more than 3 periods in hospital, a care home or respite care, tell us about them in Part 5.
Period 1	
You were in	hospital. a care home or respite care.
When were you in hospital, a care home or respite care?	From / / to /
If you were in a care home or respite care, were you getting care from a medical professional during this time?	No Yes
Period 2	
You were in	hospital. a care home or respite care.
When were you in hospital, a care home or respite care?	From / / to / /
If you were in a care home or respite care, were you getting care from a medical professional during this time?	No Yes
Period 3	
You were in	hospital. a care home or respite care.
When were you in hospital, a care home or respite care?	From / / / /
If you were in a care home or respite care, were you getting care from a medical professional during this time?	No Yes

Have there been any other times you have not provided care for the person named on page 6 of this form for 35 hours a week in the 6 months before the date you want to claim from? This includes holidays.	No Yes	Go to the nex				
Period 1						
When did you not provide care for 35 hours a week?			am/pm	on	1	/
	То		am/pm	on	/	1
The person you provide care for was	at	holiday. home. mewhere else.				
You were	at	holiday. home. mewhere else.				
Period 2				Г		
When did you not provide care for 35 hours a week?	From		am/pm	on	/	/
	То		am/pm	on	/	/
The person you provide care for was	at	holiday. home. mewhere else.				
You were	at	holiday. home. mewhere else.				

Period 3							
When did you not provide care for 35 hours a week?	From		am/pm	on	/	1	/
Tor 33 flours a week!	То		am/pm	on	/	1	1
The person you provide care for was	at h	holiday. nome. newhere else.					
You were	at h	holiday. nome. newhere else.					
Part 4: Other details							
Have you been on a course of education since the date you want to claim from? If you are on holiday or temporary leave from your course, still tick Yes .	No Yes	Please give d We will cont					
Have you been employed at any time in the 6 month period before the date you want to claim from? Still tick Yes if you are off work because you are sick, on paid or unpaid leave. If you are a company director, you should tick Yes.	No Yes	Please give d We will cont					
Are you or have you been self- employed at any time since the week before the date you want to claim from? By self-employment we mean: • working for yourself • being a partner or sleeping partner in a business • receiving income from property or land you own, or • renting out any part of the home you live in for example, to a lodger	No Yes	Please give d					

Part 4: Other details continued

Have you received any payments for the person you provide care for or anybody else since the date you want to claim from? For example payments for fostering, adult placements, direct payments or any payments from your local council.	No Yes
What is this payment called?	
Who pays you?	Do at a a d a
How much do they pay you	Postcode
and how often?	£ every

Part 5: More information

Use this box to tell us anything else you think we need to know.

The person you provide care for needs to know you are claiming Carer's Allowance because this may affect some of their benefits.

There are 3 statements in this section. One of them must be signed. The questions will help you decide who needs to sign.

Can the person you provide care for sign a statement?

No	If the person you provide care for cannot sign Statement 1 because of a health condition, a disability, or because they are under 16, someone who acts for them can sign on their behalf. Please go to Statement 2 on page 16 .
Yes	Please ask them to read the notes below, then to sign Statement 1 . Then go to page 18 .

Notes for the person being cared for

If you get a severe disability premium with your income-based Jobseeker's Allowance, Income Support, income-related Employment and Support Allowance or Housing Benefit, that premium might stop if we pay Carer's Allowance to your carer.

If your Pension Credit includes an extra amount for severe disability, that extra amount might stop if we pay Carer's Allowance to your carer.

For more information about this, contact the office that deals with your benefit or entitlement.

This could also affect any reduction in Council Tax you may be entitled to. To find out more about it, please contact your local authority.

If we pay Carer's Allowance to your carer, your Personal Independence Payment, Disability Living Allowance, Attendance Allowance, Constant Attendance Allowance or Armed Forces Independence Payment will not be affected.

continued

Statement 1

I understand that the carer named on **page 2** is making a claim for Carer's Allowance and that this may affect some of my benefits.

I understand that you will look at details of my claim for Personal Independence Payment, Disability Living Allowance, Attendance Allowance, Constant Attendance Allowance or Armed Forces Independence Payment as part of their claim for Carer's Allowance.

Please tick one of the following boxes:

riedse tick one of the following box	es:
I can confirm that the carer named on page 2 provides care for me for at least 35 hours a week.	
I cannot confirm that the carer named on page 2 provides care for me for at least 35 hours a week.	Please tell us why:
Signature	
Date	

continued

Statement 2

Do you act for the person you provide care for?	No Please go to Statement 3 on page 17 . Yes Please read and sign the statement below. Then go to page 18 .			
Please tick one of the following boxes:				
I am acting for benefit purposes for the person being cared for and I am their	parent or guardian. attorney. appointee. judicial factor. deputy. curator bonis.			
I understand that my claim for Carer's Allowance may affect some of their benefits. I understand that you will look at details of their claim for Personal Independence Payment, Disability Living Allowance, Attendance Allowance, Constant Attendance Allowance or Armed Forces Independence Payment as part of my claim for Carer's Allowance.				
Signature				
Date				

continued

Statement 3	
Does someone else act for the	No Go to page 18.
person you provide care for?	Yes Please ask them to read and sign the statement below. Then go to page 18 .
Please tick one of the following boxes:	
I am acting for benefit purposes for the person being cared for, and I am their	parent or guardian. attorney. appointee. judicial factor. deputy. curator bonis.
And tick one of these boxes:	
I can confirm that the carer named on page 2 provides care for the person named on page 6, for at least 35 hours a week.	
I cannot confirm that the carer named on page 2 provides care for the person named on page 6 for at least 35 hours a week.	Please tell us why:
Lunderstand that this claim for Carer'	s Allowance may affect some of their benefits.
I understand that you will look at dete	ails of their claim for Personal Independence Payment, e Allowance, Constant Attendance Allowance or Armed Forces
Signature	
Full name	
Date	/ /

Part 7: Declaration

Even if someone else has filled in this form for you, you must sign the declaration yourself.

By submitting this claim you agree that the information you have given is complete and correct.

While you are getting Carer's Allowance, you will report changes to your circumstances straightaway by calling **0800 731 0297**, or by textphone on **0800 731 0317**. Or you can report changes to your circumstances by accessing **www.gov.uk/carers-allowance**

If you give wrong or incomplete information, or you do not report changes straightaway, you may:

- be prosecuted
- need to pay a financial penalty
- have your Carer's Allowance reduced or stopped
- be paid too much Carer's Allowance and have to pay the money back

If we pay you less than we should, we may pay you the money that we owe you.

Signature			
Date	/	1	

What to do now

- Check that you have answered all the questions.
- Get in touch with us if you cannot fill in the form. Your Carer's Allowance may be delayed. If you have speech or hearing difficulties, you can contact us by textphone on **0800 731 0317**. The textphone service does not receive messages from mobile phones.
- Check that you have signed the form.
- Send the form to us in the envelope that came with this claim pack. The envelope does not need a stamp. Our address is:

Carer's Allowance Unit Mail Handling Site A Wolverhampton WV98 2AB

How the Department for Work and Pensions collects and uses information

When we collect information about you we may use it for any of our purposes. These include:

- social security benefits and allowances
- child maintenance
- employment and training
- investigating and prosecuting tax credits offences
- private pensions policy and
- retirement planning

We may get information about you from other parties for any of our purposes as the law allows to check the information you provide and improve our services. We may give information about you to other organisations as the law allows, for example to protect against crime.

To find out more about our purposes, how we use personal information for those purposes and your information rights, including how to request a copy of your information, please visit **www.gov.uk/dwp/personal-information-charter**