Notification to Local Authority of a Loss Of Benefit penalty

To:	From	
-----	------	--

Part 1 – Claimant and Partner Details

Claimant		Partner	
Surname		Surname	
Forenames		Forenames	
Address		Address	
NINo		NINo	
Date of Birth		Date of Birth	

(New FRAIMS list merge field with options: accepted a Caution / accepted an Administrative Penalty / was convicted) in respect of a benefit offence on

Is the request following the issue of form FPA6?

Yes	No

Please consider applying a Loss of Benefit penalty

Part 2 – Penalty period details

Determination Date

The start date of the disqualification period – this is the first possible date that a penalty can be applied

Benefit processors must align the disqualification period with the claimant's payday and payment period – see Part A6 of the HB/CTB guidance manual, Deciding and Paying Benefits, Loss of benefit provisions.

The disqualification period is a maximum of (New FRAIMS list text merge field with options: 4 weeks / 13 weeks / 26 weeks / 3 years)

Loss of Benefit penalty letter issued to claimant on



Part of the Department for Work and Pensions Date of claimant's/partners first conviction

Date of claimant's /partners subsequent conviction

Part 3 – Notification Details

A Loss Of Benefit penalty applies to the above claimant and/or partner

We have notified you as the benefit processing section responsible for considering a Loss of Benefit penalty to Housing Benefit.



Part of the Department for Work and Pensions