



Use this form between **6 April 2017 and 5 April 2018**, to claim tax credits.

Use the Notes, 'Getting your tax credits claim form right', to help you. If you need more help, phone the helpline on 0345 300 3900 (or textphone 0345 300 3909). For our opening hours, go to [www.gov.uk/contact-hmrc](http://www.gov.uk/contact-hmrc)

For a copy of this form in:

- large print phone 0345 300 3900
- Welsh phone 0300 200 1900

Couples must claim tax credits jointly. You're part of a couple if you are either:

- married
- in a civil partnership
- living with someone as if you were married or in a civil partnership

There are some exceptions to this, see Notes, inside cover.

Decide whose details go in the 'YOU' column and whose in the 'YOUR PARTNER' column – please stick to this throughout the form.

For information on backdating your claim, see Notes, inside cover.

### Filling in this form

This form is machine read. It's important that you:

- write in capital letters using **black ink**
- write neatly inside the boxes using one box for each letter or number

J	O	N	A	T	H	A	N	R	I	C	H	A
R	D											

- leave blank any box that does not apply to you

Fill in all relevant boxes in full. Don't write 'Not Applicable' or strike through boxes that don't apply.

If you make a mistake, put a line through your entry and write the correct information underneath the boxes.

When you have filled in this form, please make sure that you've signed and dated the DECLARATION on page 11, then return it in the envelope provided.

## PART 1 PERSONAL DETAILS

### YOU

1.1 Title, enter MR, MRS, MISS, MS, or other title

Surname

1.2 First name(s)

1.3 Address

Postcode

House number

Rest of address, including house name or flat number

1.4 Date of birth

D	D	M	M	Y	Y	Y	Y
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1.5 National Insurance number. See Notes, page 1

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### YOUR PARTNER

1.1 Title, enter MR, MRS, MISS, MS, or other title

Surname

1.2 First name(s)

1.3 Address – leave blank if the address is the same

Postcode

House number

Rest of address, including house name or flat number

1.4 Date of birth

D	D	M	M	Y	Y	Y	Y
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1.5 National Insurance number. See Notes, page 1

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**PART 1 PERSONAL DETAILS** continued

**YOU**

1.6 Enter a phone number, we may need to contact you  
Daytime number in full

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Evening number in full – if different

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1.7 Are you male or female? Put 'X' in one box

Male       Female

1.8 Have you been subject to immigration control in the last month? See Notes, page 2

Yes       No

1.9 Do you usually live in the United Kingdom?  
See Notes, page 2

Yes       No

If 'No', enter the name of the country where you usually live in the box below

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1.10 Enter any other names you use, or have used, when contacting government departments. For example, your maiden name or former married name

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**YOUR PARTNER**

1.6 Enter a phone number, we may need to contact you  
Daytime number in full

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Evening number in full – if different

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1.7 Are you male or female? Put 'X' in one box

Male       Female

1.8 Have you been subject to immigration control in the last month? See Notes, page 2

Yes       No

1.9 Do you usually live in the United Kingdom?  
See Notes, page 2

Yes       No

If 'No', enter the name of the country where you usually live in the box below

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1.10 Enter any other names you use, or have used, when contacting government departments. For example, your maiden name or former married name

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**Disability**

See the Notes, pages 2 and 19 to 21, to find out if you qualify for more tax credits because of a disability. If you have a child who is disabled, tell us in PART 2.

**YOU**

1.11 If you qualify for the disability element then put an 'X' in this box

See Notes, page 2

1.12 If you receive, for yourself, highest rate care component of Disability Living Allowance or enhanced daily living component of Personal Independence Payment or higher rate of Attendance Allowance, put 'X' in this box

**YOUR PARTNER**

1.11 If you qualify for the disability element then put an 'X' in this box

See Notes, page 2

1.12 If you receive, for yourself, highest rate care component of Disability Living Allowance or enhanced daily living component of Personal Independence Payment or higher rate of Attendance Allowance, put 'X' in this box

**COUPLES**

This question is only for couples with children.

1.13 Is one of you working 16 hours a week or more and the other person is incapacitated, an inpatient in hospital, in prison either on remand or serving a custodial sentence, or entitled to Carer's Allowance? To show who is incapacitated,

You       Your partner      an inpatient in hospital, in prison either on remand or serving a custodial sentence, or entitled to Carer's Allowance, put 'X' in one box only. See Notes, page 6.



**PART 2 CHILDREN**



**Give details of children under 20 that you (or your partner if you have one) are responsible for.** See Notes, pages 3 and 4, for what we mean by 'responsible' and which children you should include. **If you are responsible for more than 2 children, fill in form TC600A Additional pages and return with this claim form. If you are not responsible for any children under 20, go straight to PART 4.**

**CHILD 1**

**2.1 Surname as shown on their birth certificate**

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**2.2 First name(s) as shown on their birth certificate**


**2.3 Date of birth**

D	D	M	M	Y	Y	Y	Y
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**2.4 Put 'X' in boxes that apply to this child**

- you pay for registered or approved childcare while you work. See Notes, pages 3 and 4
- Disability Living Allowance or Personal Independence Payment is paid for this child. See Notes, page 4
- highest rate care component of Disability Living Allowance, enhanced daily living component of Personal Independence Payment is paid for this child. See Notes, page 4
- the child is or was, certified as severely sight-impaired or blind, by a consultant ophthalmologist. See Notes, page 4

**2.5 If you, or your partner, became responsible for this child on a date other than their date of birth, enter the date you became responsible. See Notes, page 4**

D	D	M	M	Y	Y	Y	Y
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**CHILDREN AGED BETWEEN 16 AND 20**

**2.6 If this child is in full-time non-advanced education or on an approved training course put 'X' in the box.** See Notes, page 4, if this child is over 16

**2.7 If this child is registered with a careers service, Connexions, local authority support service, or similar organisation, enter the date they left full-time non-advanced education or approved training.** See Notes, page 3

D	D	M	M	Y	Y	Y	Y
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**CHILD 2**

**2.1 Surname as shown on their birth certificate**

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**2.2 First name(s) as shown on their birth certificate**


**2.3 Date of birth**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**2.4 Put 'X' in boxes that apply to this child**

- you pay for registered or approved childcare while you work. See Notes, pages 3 and 4
- Disability Living Allowance or Personal Independence Payment is paid for this child. See Notes, page 4
- highest rate care component of Disability Living Allowance, enhanced daily living component of Personal Independence Payment is paid for this child. See Notes, page 4
- the child is or was, certified as severely sight-impaired or blind, by a consultant ophthalmologist. See Notes, page 4

**2.5 If you, or your partner, became responsible for this child on a date other than their date of birth, enter the date you became responsible. See Notes, page 4**

D	D	M	M	Y	Y	Y	Y
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**CHILDREN AGED BETWEEN 16 AND 20**

**2.6 If this child is in full-time non-advanced education or on an approved training course put 'X' in the box.** See Notes, page 4, if this child is over 16

**2.7 If this child is registered with a careers service, Connexions, local authority support service, or similar organisation, enter the date they left full-time non-advanced education or approved training.** See Notes, page 3

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---



PART 2 CHILDREN continued

YOU

2.8 **Child Benefit reference number.** If you get Child Benefit, enter the reference number, if known, in the box below. You can find it on any Child Benefit letters you've had. **If you don't know it, leave the box blank.**

C H B

YOUR PARTNER

2.8 **Child Benefit reference number.** If you get Child Benefit, enter the reference number, if known, in the box below. You can find it on any Child Benefit letters you've had. **If you don't know it, leave the box blank.**

C H B

PART 3 CHILDCARE COSTS – HELP FOR WORKING PARENTS

**i** **Do you pay childcare costs?** If so, you may get extra help towards them through tax credits. Before you make any entries in this PART read the Notes, pages 5 and 6, to see if your childcare costs qualify.

You can claim help with childcare costs if your child is 15 or under (but see Notes, page 3, box 2.4), and you work 16 hours a week or more. Couples – you can claim help with childcare costs as a couple, if both of you work 16 hours a week or more, or if one partner works 16 hours a week or more and the other partner is incapacitated, an inpatient in hospital, in prison either on remand or serving a custodial sentence or entitled to Carer's Allowance.

Answer questions 3.1 to 3.7. **If you use more than 1 childcare provider**, fill in form TC600A Additional pages and send it back with this claim form.

CHILDCARE PROVIDER

3.1 **Name of the childcare provider.** See Notes, page 5

3.2 **Their address**

Postcode

House or building number

Rest of address, including house or building name

3.3 **Their phone number – in full**

3.4 **Enter the name of the local authority or other body (for example, Ofsted) that registered or approved your childcare provider.** See Notes, page 5

3.5 **Provider's registration or approval number.**  
See Notes, page 5

3.6 **How many of the children named in this claim are cared for by this provider?**

Children

3.7 **Work out the average weekly amount you pay this childcare provider using the Notes, page 6.** If you've arranged to start using the childcare in the next 7 days, see Notes, page 6

£  .



PART 4 WORK DETAILS

**i** This PART is about work you get paid for, including work as a self-employed person. The minimum number of hours you need to work to qualify for Working Tax Credit depends on your circumstances. For more information, see Notes, pages 7 to 10.

YOU

4.1 Do you currently do paid work? See Notes, page 7. If you're starting paid work within the next 7 days put 'X' in the 'Yes' box  
 Yes  No – go straight to PART 5

4.2 Do you usually work in the United Kingdom? See Notes, page 7  
 Yes  No  
If 'No', enter the name of the country where you usually work

4.3 How many hours a week do you usually work? If your hours vary from week to week, or you do seasonal work, see Notes, pages 7 to 9  
 hours

4.4 If you have stopped claiming or will stop claiming:  
• Income Support, or  
• **income-based** Jobseeker's Allowance, or  
• **income-related** Employment and Support Allowance, or  
• Pension Credit  
enter either, the date you started work if this was in the last 31 days, or the date your hours changed that meant you no longer qualify for these benefits, or the date you will start work in the next 7 days

If you are an employee or a self-employed person you must fill in box 4.5 also:  
• if you are an employee, fill in boxes 4.6 to 4.10  
• if you are a self-employed person fill in boxes 4.11 and 4.12  
• if you are both, fill in boxes 4.6 to 4.12 on the next page

YOUR PARTNER

4.1 Do you currently do paid work? See Notes, page 7. If you're starting paid work within the next 7 days put 'X' in the 'Yes' box  
 Yes  No – go straight to PART 5

4.2 Do you usually work in the United Kingdom? See Notes, page 7  
 Yes  No  
If 'No', enter the name of the country where you usually work

4.3 How many hours a week do you usually work? If your hours vary from week to week, or you do seasonal work, see Notes, pages 7 to 9  
 hours

4.4 If you have stopped claiming or will stop claiming:  
• Income Support, or  
• **income-based** Jobseeker's Allowance, or  
• **income-related** Employment and Support Allowance, or  
• Pension Credit  
enter either, the date you started work if this was in the last 31 days, or the date your hours changed that meant you no longer qualify for these benefits, or the date you will start work in the next 7 days

If you are an employee or a self-employed person you must fill in box 4.5 also:  
• if you are an employee, fill in boxes 4.6 to 4.10  
• if you are a self-employed person fill in boxes 4.11 and 4.12  
• if you are both, fill in boxes 4.6 to 4.12 on the next page





**PART 4 WORK DETAILS** continued

**YOU – EMPLOYED**

4.5 How many paid jobs do you have?

4.6 Employer's name

If you've more than one employer, tell us about the job where you work the most hours

  
  

4.7 Your employer's PAYE tax reference

See Notes, page 10 for where you can find this

 / 

4.8 Your payroll number, if you have one

Look on your latest payslip for this

4.9 Employer's pay office address

Postcode

Building number

Rest of address, including building name

4.10 Employer's pay office phone number – in full

**YOUR PARTNER – EMPLOYED**

4.5 How many paid jobs do you have?

4.6 Employer's name

If you've more than one employer, tell us about the job where you work the most hours

  
  

4.7 Your employer's PAYE tax reference

See Notes, page 10 for where you can find this

 / 

4.8 Your payroll number, if you have one

Look on your latest payslip for this

4.9 Employer's pay office address

Postcode

Building number

Rest of address, including building name

4.10 Employer's pay office phone number – in full

**YOU – SELF-EMPLOYED**

4.11 Your tax reference

You'll find this on your tax return

4.12 If you have not yet sent us your first tax return, enter the date you started self-employment

**YOUR PARTNER – SELF-EMPLOYED**

4.11 Your tax reference

You'll find this on your tax return

4.12 If you have not yet sent us your first tax return, enter the date you started self-employment





**PART 5 INCOME DETAILS**

**i** The amount of tax credits you get depends on your income (both incomes for couples). Give income details in boxes 5.2 to 5.6.

However, if you (or your partner if you have one) get Income Support (other than in the form of a run-on payment or if your Income Support is taxable), income-based Jobseeker's Allowance, income-related Employment and Support Allowance or Pension Credit, put 'X' in the appropriate box at 5.1 and go straight to PART 6.

**YOU**

5.1 If you receive any of the following, put 'X' in that box. If you've just made a claim and are waiting to hear if you'll be paid, see Notes, page 11. DO NOT fill in if you're due to start work in the next 7 days and will stop claiming any of the following:

- Income Support
- Income-based Jobseeker's Allowance, or income-related Employment and Support Allowance
- Pension Credit

**YOUR PARTNER**

5.1 If you receive any of the following, put 'X' in that box. If you've just made a claim and are waiting to hear if you'll be paid, see Notes, page 11. DO NOT fill in if you're due to start work in the next 7 days and will stop claiming any of the following:

- Income Support
- Income-based Jobseeker's Allowance, or income-related Employment and Support Allowance
- Pension Credit



**i** In the rest of this PART give details of your income for the year 6 April 2016 to 5 April 2017. There is no need to include pence in the figures you give – round down to the nearest pound. If you want more help working out your income see Notes, pages 12 to 16. If you (or your partner if you have one) made a trading loss, or paid gross pension contributions or made Gift Aid payments, go to [www.gov.uk](http://www.gov.uk) and search for Working Sheet TC825 to help you work out your income before you make any entries in boxes 5.2 to 5.6.

**YOUR INCOME**

Do not include Child Benefit, Child Tax Credit, Working Tax Credit, Pension Credit, Disability Living Allowance or Personal Independence Payment. See Notes, page 11 for what income and benefits in kind you need to include.

5.2 Taxable social security benefits received in the year from 6 April 2016 to 5 April 2017. See Notes, page 11 for details of the benefits to include

£       .

5.3 Earnings as an employee from all jobs for the year 6 April 2016 to 5 April 2017. (If you were self-employed put your income in box 5.5.) Enter your total earnings for the year, before tax and National Insurance contributions are taken off. Look for the 'total pay' or 'total for year' figure on your P60 End of Year Certificate. See the Working Sheet on page 12 of the Notes for deductions you can make including Gift Aid payments, pension contributions, Statutory Maternity, Paternity, Adoption and Shared Parental Pay. If you had more than one job in the year – one after the other or at the same time – you need to give us your total pay from all of them. For more help see Notes, pages 11 and 12

£       .

**YOUR PARTNER'S INCOME**

Do not include Child Benefit, Child Tax Credit, Working Tax Credit, Pension Credit, Disability Living Allowance or Personal Independence Payment. See Notes, page 11 for what income and benefits in kind you need to include.

5.2 Taxable social security benefits received in the year from 6 April 2016 to 5 April 2017. See Notes, page 11 for details of the benefits to include

£       .

5.3 Earnings as an employee from all jobs for the year 6 April 2016 to 5 April 2017. (If you were self-employed put your income in box 5.5.) Enter your total earnings for the year, before tax and National Insurance contributions are taken off. Look for the 'total pay' or 'total for year' figure on your P60 End of Year Certificate. See the Working Sheet on page 12 of the Notes for deductions you can make including Gift Aid payments, pension contributions, Statutory Maternity, Paternity, Adoption and Shared Parental Pay. If you had more than one job in the year – one after the other or at the same time – you need to give us your total pay from all of them. For more help see Notes, pages 11 and 12

£       .



**PART 5 INCOME DETAILS** continued



**Remember, we need details for the year 6 April 2016 to 5 April 2017.**

The Notes, pages 12 to 16, explain how to work out your annual income and tell you how to contact us if you need more help.

**YOUR INCOME**

**5.4 Company car and fuel, taxable vouchers, and benefits in kind** – for the year from 6 April 2016 to 5 April 2017.

If you received any of these from your employer, we need to know their total 'cash equivalent'. Look for these figures on **form P11D** which your employer should have given you by July 2017. See Notes, pages 13 and 14, will help you to work out the total amount you received

£       .

**5.5 Income from self-employment**

- If you haven't sent us a tax return for the year to 5 April 2017 or if your business receives rental income, see Notes, pages 13 and 15. These explain how to work out your profit from self-employment.
- If you've sent us a tax return for the year to 5 April 2017, enter your total net profits, minus the gross amount of any contributions made to a pension scheme. See Notes, page 15. If you made a loss, enter '0.00'

£       .

**YOUR PARTNER'S INCOME**

**5.4 Company car and fuel, taxable vouchers, and benefits in kind** – for the year from 6 April 2016 to 5 April 2017.

If you received any of these from your employer, we need to know their total 'cash equivalent'. Look for these figures on **form P11D** which your employer should have given you by July 2017. See Notes, pages 13 and 14, will help you to work out the total amount you received

£       .

**5.5 Income from self-employment**

- If you haven't sent us a tax return for the year to 5 April 2017 or if your business receives rental income, see Notes, pages 13 and 15. These explain how to work out your profit from self-employment.
- If you've sent us a tax return for the year to 5 April 2017, enter your total net profits, minus the gross amount of any contributions made to a pension scheme. See Notes, page 15. If you made a loss, enter '0.00'

£       .

**OTHER INCOME**

**If you received any other income from 6 April 2016 to 5 April 2017 that you have not included at boxes 5.2 to 5.5, enter the amount in box 5.6.**

Do not fill in this box if your total other income is less than £300.

Other income includes:

- **gross income from savings, investments and dividends** include interest from any bank or building society (but not Individual Savings Accounts (ISAs) or other tax-free accounts)
- **State Pension** or any other pensions
- **income from property** or land in the United Kingdom that you let (but not if you let a furnished room in your home for £7,500 a year or less)
- **gross trust income**
- **foreign income** see Notes, page 16
- **notional income**

You **must** use the Working Sheet in the Notes, page 16, to work out your total. Include any **other income** above £300, plus the full amount of any **Adult Dependant's Grant** and **miscellaneous taxable income**. See Notes, page 16.

For example, if your total other income is £421, only include £121 (£421 minus £300). Then add the **full** amount of any Adult Dependant's Grant or miscellaneous taxable income. So, if you have £50 miscellaneous income, enter £171 (£121 plus £50).

**If you are claiming as a couple it is your joint other income that counts.**

**5.6 Total other income**

£       .

**ESTIMATED INCOME**

When you (or your partner if you have one) fill in this form you may not have all the information you need to give us about your income. If any of the amounts shown at 5.2 to 5.6 include estimates, we need to know.

**5.7 Have you, or your partner used estimates when working out your income?**

Put 'X' in one box only

Yes  No





## PART 6 PAYMENT DETAILS

- i** **Claiming tax credits**  
If you have children – fill in the Child Tax Credit section.  
If you are working – fill in the Working Tax Credit section.  
If you have children and are working – fill in both the Child Tax Credit and the Working Tax Credit sections.

### CHILD TAX CREDIT

Child Tax Credit is paid to the main carer. The main carer is the person mainly responsible for looking after the children. It will be paid direct into a bank or building society or Post Office® card account. So make sure you fill in these account details in 6.5 to 6.9 on page 10. You can choose whether you want to be paid weekly or every 4 weeks.

#### Couples

Tell us which one of you is the main carer. Before deciding see Notes, page 17.

#### 6.1 Choose how often you want us to pay you Child Tax Credit.

Put 'X' in one box only. See Notes, page 17

Weekly  Every 4 weeks

#### 6.2 Couples only – which of you is the main carer? Put 'X' in one box only. See Notes, page 17

You  Your partner

**Make sure the person you choose gives account details in the appropriate column on page 10.**



### WORKING TAX CREDIT

Working Tax Credit is paid to a person who works. It will be paid direct into a bank or building society or Post Office® card account. So make sure you fill in these account details in 6.5 to 6.9 on page 10. You can choose whether you want to be paid weekly or every 4 weeks.

Couples who both work. We can only pay Working Tax Credit to one of you. You need to choose which one of you we should pay. Before deciding see Notes, page 17.

#### 6.3 Choose how often you want us to pay you Working Tax Credit.

Put 'X' in one box only. See Notes, page 17

Weekly  Every 4 weeks

#### 6.4 Couples who both work 16 or more hours a week. Choose which of you is to receive payment of Working Tax Credit. Put 'X' in one box only. See Notes, page 17

You  Your partner

**Make sure the person you choose gives account details in the appropriate column on page 10.**



**i We pay tax credits into a bank, building society or Post Office® card account.**

**Couples** – you only need to fill in both sides of this section if you want your Child Tax Credit and Working Tax Credit, paid into separate accounts.

**You need to give us details, of the account you want tax credits paid into at 6.5.**

See Notes, page 18.

- You can use an existing account – you’ll find account details on your bank or cash card, cheque book, bank book or statement.
- If your account is with a building society, or former building society, you may need to provide details of your roll or reference number in box 6.8. You’ll find the roll or reference number on your bank or building society book or statement. You also need to provide details of the account number and sort code in boxes 6.6 and 6.7. See Notes, page 18.
- If you have a Post Office® card account please refer to your 'Welcome Letter' or statement for details of your account number and sort code. Leave box 6.8 blank and enter 'POST OFFICE' in box 6.9.
- If you don’t have an account, see Notes, page 18.



**YOU – ACCOUNT DETAILS**

6.5 Name(s) of account holder(s). See Notes, page 18


6.6 Account number

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6.7 Sort code

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6.8 If you have given details of a building society account, enter the roll or reference number, if any. Enter any hyphens or slashes that are shown as part of the number. For example, 1756 – 789808746 or 475869607/8797. Put the hyphen or slash in its own box


6.9 Name of bank or building society  
For Post Office® card account, enter POST OFFICE


**YOUR PARTNER – ACCOUNT DETAILS**

6.5 Name(s) of account holder(s). See Notes, page 18


6.6 Account number

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6.7 Sort code

			-			-		
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6.8 If you have given details of a building society account, enter the roll or reference number, if any. Enter any hyphens or slashes that are shown as part of the number. For example, 1756 – 789808746 or 475869607/8797. Put the hyphen or slash in its own box


6.9 Name of bank or building society  
For Post Office® card account, enter POST OFFICE




## DECLARATIONS



**You (both of you in the case of couples) must sign the DECLARATION.**

If you give false information or do not tell us about any part of your income, you may be liable to financial penalties and/or you may be prosecuted.

**I declare that** the information given on this form is correct and filled in to the best of my knowledge and belief and I am not in receipt of Universal Credit.

**I understand that:**

- you may check the income information I have reported with the income information you already hold about me
- if I am claiming tax credits as part of a couple, this is a joint claim, so:
  - we share responsibility for the information given
  - any tax credits overpaid may be recovered from both or either of us

**I acknowledge that** if more than one person is named on the form, each other's information will be disclosed to us both or our appointee (if appropriate) by HMRC in communications.

**YOU**

**Signature**

**Date**

DD MM YYYY

**YOUR PARTNER**

**Signature**

**Date**

DD MM YYYY



## APPOINTEE ACTING ON BEHALF OF CUSTOMER(S)



**You are not an appointee if you are simply helping the customer(s) to fill in this form.**

Usually, an **appointee** is a person who has been given the legal right to act on behalf of another person who is not able to control their own affairs or has a disability. See Notes, back page.

**APPOINTEE**

**I have filled in this form on behalf of the customer(s) because**

If you give any information you know to be false or incomplete, you may be liable to financial penalties and/or you may be prosecuted.

**I declare that** the information given on this form is correct and filled in to the best of my knowledge and belief.

**Signature**

**Date**

DD MM YYYY

**Your full name**  
(including title Mr/Mrs/Miss/Ms or other title)

**Your address**

**Postcode**

**House number**

**Rest of address, including house name or flat number**

**Your phone number – in full**

### What to do now

Sign the form then send it back in the envelope provided or send it to: HM Revenue and Customs, Tax Credit Office, Liverpool, Great Britain, L75 1AZ. It will need a stamp. **Make sure you pay the correct postage.** Don't send anything with it, unless we have asked you to do so. We aim to get back to you about your claim within 3 weeks of receiving it.



### Your ethnic group

We want to make sure tax credits are being claimed by all communities. The only way we can check this is by asking you about your ethnic group. Make one entry to tell us the ethnic group that you consider you belong to. You do not have to fill in this part of the form. If you do not wish to disclose your ethnic group, put 'X' in the box provided.

#### YOU

A White

B Mixed

White and Black Caribbean

White and Black African

White and Asian

Other, please state below

C Asian including British Asian

Indian

Pakistani

Bangladeshi

Other, please state below

D Black

Caribbean

African

Other, please state below

E Chinese or other ethnic group

Chinese

Other, please state below

F I do not wish to state my ethnic group

#### YOUR PARTNER

A White

B Mixed

White and Black Caribbean

White and Black African

White and Asian

Other, please state below

C Asian including British Asian

Indian

Pakistani

Bangladeshi

Other, please state below

D Black

Caribbean

African

Other, please state below

E Chinese or other ethnic group

Chinese

Other, please state below

F I do not wish to state my ethnic group

