

Dispute a benefit decision form

Please fill in this form if you **disagree with a housing benefit or council tax support decision** and send it to:

Benefits Service
Cotswold District Council
Trinity Road
Cirencester
Gloucestershire
GL7 1PX

Date:

Claim reference number:

What you can do if you are unhappy with our decision

If you receive a letter from us about your claim and you do not understand something or you require more information then you can either:

Ask for an **explanation**, this will usually be given verbally. We will try to resolve your query in full and ensure that you are happy with the explanation you are given. You can ask for this explanation by ringing, writing or visiting us.

Ask for a written **statement of reasons**. This will give you a more information on how we worked out your claim. If you want a written statement of reasons you must request it in writing.

If you would like either of these you must contact us within **1 month** of the date of the letter.

If you think that we have made a mistake with your claim or you do not agree with the way we have worked out your benefit:

It may help if you ask for an **explanation** or **statement of reasons** as detailed above.

If you are still unhappy you can ask us to look at your claim again. This is called reconsideration. If you would like a reconsideration then please complete the bottom of this form to tell us why you think your claim is incorrect. A Senior Officer will look at your claim and check the reasons you have given us.

You can ask for your claim to be dealt with by an independent appeals tribunal. This is called an **appeal**. If you want more information about how to appeal then please contact us. We will always look at your claim again to make sure that we cannot change anything before we send your appeal to the appeals service.

Whether you want to ask for a **reconsideration** or wish to **appeal** about a decision we have made on your claim, you must do so in writing within **1 month** of the date of the letter containing the decision you are unhappy with.

If you are unable to contact us within 1 month because of special circumstances then please tell about those circumstances when you contact us.

Please complete and return this form within 1 month of the decision if you want us to look at your claim again

Full name

Address

I would like the Council to look at my claim again because...
(Please give details of why you think your claim is wrong)

Your signature..... Date.....

Name

The Council are the Data Controllers for the purposes of the Data Protection Legislation

We will only use your personal information in accordance with the Legislation and for the purposes of Revenues & Benefits. We will not give information about you to anyone else, or use information about you for other purposes, unless the law allows us to.