

**Welwyn Hatfield Council – Benefit Service**

**Application to Appoint an Appointee – Housing/Council Tax Benefit**

Reference.....

If you cannot manage your own affairs because you are sick, disabled or elderly you can choose someone to act for you. If you feel you can manage your own affairs, we will not accept an appointee.

If you want to do this please complete this form.

**Claimants Name..... Telephone No.....**

**Claimants Address.....**

**I give the appointee named below permission to act as my appointee.**

**Signature of Claimant ..... Date.....**

**Notes for Appointee**

When you agree to act as an appointee, you must take full responsibility for this person's claim for benefit. This means that you must make any new claims and tell us about any change in the person's circumstances. This is done as though you are the person claiming, so you need to know this person's full financial situation. All correspondence relating to their claim will be sent to you, if you are accepted as an appointee.

**Appointee Name..... Telephone No.....**

**Appointee Address.....**

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**I agree to act as Appointee for ..... and take full responsibility for their claim for benefit.**

**Signature..... Date.....**