Invalid care allowance: claim pack / Dept. of Social Security, the Benefits Agency.

Contributors

Great Britain. Department of Social Security. ICA Unit. Great Britain. Benefits Agency.

Publication/Creation

[Preston, Lancashire]: [Dept. of Social Security], [1992]

Persistent URL

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Help and Advice

If you would like to know more about Invalid Care Allowance

- you can phone us. Our phone number is 0253 856 123
- or you can phone Freeline Social Security. The phone call is free.
 Just ring 0800 666 555
- or you can get in touch with any Social Security office. The phone number and the address are in the phone book under SOCIAL SECURITY or BENEFITS AGENCY
- or you can get in touch with an advice centre like the Citizens Advice Bureau
- or you can get in touch with
 The Carers' National Association
 29 Chilworth Mews
 LONDON
 W2 3RG
 Phone 071 724 7776.
 But do not send your claim form to this address.

If you cannot get Invalid Care Allowance

If you cannot get Invalid Care Allowance, but you are looking after someone who gets Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care, you may be able to get help from the Home Responsibilities Protection Scheme.

This is a scheme to make sure people do not get less State Retirement Pension in the future just because they stay at home to look after someone. Ask for form **CF 411** *Home Responsibilities Protection*.

You can get this form from a post office or any Social Security office.

Please keep this wraparound leaflet for your information.

The notes in this wraparound leaflet give general information only and are not a complete statement of the law. The rates given in these notes were correct when the form was printed.

DS 700 (1992)



Invalid Care Allowance

Claim Pack



Invalid Care Allowance is for people who look after someone who gets

Attendance Allowance

Constant Attendance Allowance

Disability Living Allowance

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An Executive Agency of the Department of Social Security

7

Who can get Invalid Care Allowance?

Invalid Care Allowance is a Social Security benefit to help people who look after someone who gets Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care. Invalid Care Allowance is taxable. It is paid to the person who does the caring – not the person being cared for.

From 6 April 1992, Invalid Care Allowance is £32.55 a week.
Please answer these 4 questions to see if you may be able to get Invalid Care Allowance.

1 Are you at least 16 but under 60 if you are a woman -

	os il you are a mare:	Yes
2	Are you looking after someone for at least 35 hours a week?	No Yes
3	Is the person you are looking after getting Attendance Allowance or Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care?	No Yes
4	Do you normally live in Great Britain? By Great Britain we mean England, Scotland, Wales, Northern Ireland and the Isle of Man. If you are part of a forces family overseas please.	No Yes

No 🗌

If you have ticked **Yes** to all 4 questions, you may be able to get Invalid Care Allowance.

But you cannot get Invalid Care Allowance if

- you are on a course of full-time education
- or vou are on holiday from a course of full-time education By full-time education we mean 21 hours or more of supervised study each week.
- you earn £40 a week or more when you have taken off the money that we allow for expenses. The expenses we allow are for things like childminding fees, fares to work and National Insurance (NI) contributions.
 - If you are not sure about the amount that you earn after you have taken off the expenses that we allow, please claim anyway.



When to claim

To claim Invalid Care Allowance the person you look after must be getting Attendance Allowance

- or Constant Attendance Allowance
- Or Disability Living Allowance at the middle or higher rate for help with personal care.

Remember you can find this out from the letter we sent the person you are looking after to tell them about the result of their claim for Disability Living Allowance.

If you look after someone who gets any of these benefits

Claim nov

> You may be entitled to Invalid Care Allowance.

If you look after someone who is waiting to hear about a claim for Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care

Do not cla

Wait until they get Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care before you make your claim.

If you look after someone who has **not** claimed Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care

Do not clai

 Wait until they get Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care before you make your claim for Invalid Care Allowance

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You can find out more about Attendance Allowance, Constant Attendance Allowance and Disability Living Allowance from any Social Security office.

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How to claim

Just fill in the claim form. Although it may look rather long, do not be put off. It will not take you as long as you think to fill in – you will not have to answer all the questions.

If you have any difficulty filling in the claim form someone else can do it for you. But you must sign it. You can ask a friend or an advice centre. Or you can ask at any Social Security office.

Send the claim form back to us. Our address is ICA Unit
Department of Social Security
Palatine House
Lancaster Road
PRESTON
PRI 1NS.

Our phone number is 0253 856 123.

What happens after we get your claim?

- 1 We will let you know that we have got your claim form.
- 2 We will write and tell you if you can get Invalid Care Allowance.

For people who are getting Income Support, Housing Benefit or Community Charge Benefit

If you or your partner get Income Support on its own or with any of the benefits in the list on the next page, claim Invalid Care Allowance. The amount of Invalid Care Allowance we pay you is taken off the Income Support you or your partner get. But you may get an extra amount of money called the *Carer Premium*.

The Carer Premium is extra money added on to your Income Support if you get Invalid Care Allowance.

And if you are getting Housing Benefit or Community Charge Benefit on its own or with any of the benefits in the list on the next page, you should claim Invalid Care Allowance. The Local Authority take the *Carer Premium* into account when they work out how much Housing Benefit or Community Charge Benefit you can get.

You must tell the office that pays your Income Support, Housing Benefit or Community Charge Benefit that you get Invalid Care Allowance in order to get the extra help.

Please turn over ▶

About extra money added on to Invalid Care Allowance

You may be able to get extra money added on to your Invalid Care Allowance for

- · the person you are married to
- your partner if they look after a child or children for you
 By partner we mean someone you live with as if you are married to them.
- someone else who lives with you if they look after a child or children for you
- children.

But we will need to know about Child Benefit and any other money coming in.

Invalid Care Allowance and other Social Security Benefits

If you are getting any of these benefits it could affect whether you can get Invalid Care Allowance

- State Retirement Pension
- Unemployment Benefit
- Sickness Benefit or Invalidity Benefit
- Widow's Benefit
- Severe Disablement Allowance
- War Widow's Pension
- Maternity Allowance
- Industrial Death Benefit
- Unemployability Supplement paid with Industrial Injuries Disablement Benefit or War Pension
- a training allowance.

If the amount of benefit you get is less than the amount of Invalid Care Allowance you could get, we will pay you the difference.

If someone is getting any of these benefits which includes extra money for you we will arrange for the extra money to stop. We will pay the Invalid Care Allowance to you.

BUT If you get Widow's Benefit you may be able to get National Insurance (NI) credits, so claim anyway. There is more information about NI credits later in these notes.

More information about Invalid Care Allowance

Christmas Bonus

You will get a tax-free bonus with your Invalid Care Allowance shortly before Christmas each year unless you get this payment with another benefit.

National Insurance credits

For each week that we pay you Invalid Care Allowance, you will get a National Insurance (NI) credit. These credits may help you to qualify for other Social Security benefits such as State Retirement Pension.

If you are a widow and you cannot get Invalid Care Allowance because you are getting Widow's Benefit, claim anyway because we can still give you NI credits.

We cannot give you NI credits if you are a married woman and you have chosen to pay reduced rate contributions and your option is still in force.

If you look after more than one person

You can only get one payment of Invalid Care Allowance each week even if you look after more than one person who gets Attendance Allowance, Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care.

The time you spend looking after someone

If you stop looking after the person you care for, for a short time, you may still get Invalid Care Allowance. For example, you may be able to get Invalid Care Allowance when

- · you take a short holiday
- the person you look after goes into hospital
- you go into hospital.

But you must always tell us if you stop looking after someone – even if it is only for a week.

Form DS 700	For office use only	
PART 1 About you		PART 1
■ This form is to claim Invalid Care Allowance. Before you fill in this form please read the notes in the wraparound leaflet.	Remember you must fill in this claim form — not the person you look after. Please answer all the questions that apply to you.	Do not send this claim form in to us until the person you look after gets Attendance Allowance or Constant Attendance Allowance or Disability Living Allowance at the middle or higher rate for help with personal care.
Surname		Charles and the state of the st
Other names		
All the other surnames you have had These might be surnames you had before you were married.		
Title	Mr/Mrs/Miss/Ms	
Marital status If you tick other, please tell us about this in PART 17.	single widowed separated married other other	
Date of birth		
Address		
Postcod	е	
Daytime phone number This may help us to deal with your claim more quickly. If you do give it to us we will not tell anyone else.	Code	
National Insurance (NI) number This will help us to deal with your claim more quickly. You can find this on • letters from a Social Security office • your National Insurance number card.	Letters Numbers Letter	

You can get Invalid Care Allowance from any time up to 12 months before the date we get your claim form.

But we will only pay you Invalid Care Allowance for the weeks you meet all these rules

- you must be at least 16 but under 60 if you are a woman — 65 if you are a man
- you must be looking after someone for at least 35 hours a week
- the person you are looking after must be getting Attendance Allowance
 - or Constant Attendance Allowance
 - or Disability Living Allowance at the middle or higher rate for help with personal care
- you must normally live in Great Britain
- you must not be on a full-time course of education
- you must not be on holiday from a full-time course of education
- if you work you must earn £40.00 a week or less when you have taken off the money we allow for expenses.
 The expenses we allow are for things like childminding fees, fares to work and National Insurance (NI) contributions.

What date do you want to claim Invalid Care Allowance from? 1

PAF		No 🔲	alid Care Allowance before?	ART 3
1 1	st claim?	Yes What date did you I	W.	
	erence number if you know it. of your order book or on letters	Please tell us the re This will be on the fror about the benefit.		

PART 4 About any time y	ou have spent abroad	PART 4
Are you in Great Britain now? By Great Britain we mean England, Scotland, Wales, Northern Ireland and the Isle of Man.	No Yes	
Do you normally live outside Great Britain?	No Yes Where do you normally live?	
Have you been out of Great Britain for a total of at least 26 weeks in the last 52 weeks?	No Yes Please tell us about the dates you were out of Great Britain	
	From To Reason	
Have you been out of Great Britain for a total of at least 26 weeks in the 52 weeks before the date you put in PART 2?	No Yes Please tell us about the dates you were out of Great Britain since the date you put in PART 2 From To Reason	
Have you been out of Great Britain with the person you look after, for more than 4 weeks, since the date you put in PART 2?	No Yes We will write to you about this	

-	-		
PART 5 About your part	ner		PART 5
Do you have a partner? We use partner to mean a person you are married to or a person you live with as if you are married to them.	No Yes	Please go to PART 6 Please tell us about your partner Surname Other names All the other surnames they have had These might be surnames they had before they were married. Title Date of birth Address	Mr/Mrs/Miss/Ms
		National Insurance (NI) number This will help us to deal with your claim more quickly. You can find this on letters from a Social Security office their National Insurance number card their payslips letters from the Inland Revenue.	Letters Numbers Letter

About other bend	ento	PANIO
Have you or your partner claimed or had any of these benefits since the date you put in PART 2? Please look through the list and tick Yes or No for each benefit.		
Please tick Yes if you or your partner are waiting to hear about the benefit.	YOU	YOUR PARTNER
income Support	No Yes Name of the office that deals with the benefit	No Yes Name of the office that deals with the benefit
Unemployment Benefit	No Pres Name of the office that deals with the benefit	No
State Retirement Pension	No	No
Sickness Benefit or Invalidity Benefit	No	No Yes Name of the office that deals with the benefit
Severe Disablement Allowance	No Yes Name of the office that deals with the benefit	No Yes Name of the office that deals with the benefit

L

PART 6 About other bend	efits — continued	PART 6
	YOU	YOUR PARTNER
Maternity Allowance	Yes Name of the office that deals with the benefit	No ☐ Yes ☐ Name of the office that deals with the benefit
Job Release Allowance	No	No Yes Name of the office that deals with the benefit
Unemployability Supplement paid with Disablement Benefit or War Pension	No	No Yes Name of the office that deals with the benefit
Widow's Benefit	No Yes Name of the office that deals with the benefit	No Yes Name of the office that deals with the benefit
War Widow's Pension	No	No Yes Name of the office that deals with the benefit
Industrial Death Benefit	No	No Yes Name of the office that deals with the benefit



PART 6 About other be	nefits-	– continued	
Has anyone else got any extra money for you, added on to a Social Security benefit, allowance or pension since the date you put in PART 2? For example, this could be extra money that your partner	No □ Yes □	Please tell us about them	
gets with their State Retirement Pension.		Their name	
		Their address	
			Postcode
		Name of the benefit, allowance or pe	ension
		Reference number This is on the front of their order book or or about the benefit.	on letters

PART 7 About work for	an employer	PART 7
Have you ever worked for an employer? Work could be full-time part-time casual work job sharing being included in a tax return as a worker or being a company director.	No Please go to PART 10 Yes What date did you last work? If this date is before the date you put in PART 2 then go to PART 10.	
Do you have a job now?	No Please tell us about your most recent job in BOX 1 and the job before that, if you had one in BOX 2 Yes Please tell us about the job you are doing now in BOX 1 and the job before that, if you had one in BOX 2 If you need any more space please use PART 17 at	
	the end of this form BOX 1 — Your most recent job BOX 2 — Your job before	THE REAL PROPERTY.
Date the job started		
Date the job finished		
Type of job		
Clock or payroll number		

PART 7	About work for a	n empl	oye	r — coi	ntinued				PART
		BOX 1 —	- Your	most rece	nt job	BOX 2	— You	r job before	е
nployer's name and address									
			-						
	Postcode								
nployer's phone number		Code				Code			
age before anything was take	en off	£				£			
w often were you paid?		Weekly		Please give	e details of your last 5 payments	Weekly		Please giv	re details of your last 5 payments /thing was taken off
		Fortnightly	0	Please give	e details of your last 3 payments thing was taken off	Fortnight	ly 🗆	Please giv	ve details of your last 3 payments ything was taken off
		4-weekly		Please give	e details of your last 2 payments thing was taken off	4-weekly		Please giv	ve details of your last 2 payments ything was taken off
		Monthly		Please give	e details of your last 2 payments	Monthly			re details of your last 2 payments of thing was taken off
		Other		Please give	e details of your last 3 payments thing was taken off	Other		Please giv	ve details of your last 3 payments ything was taken off
		Pay week or month er	nding		Wage before anything was taken off	Pay week or month e			Wage before anything was taken off
		1		1	£		1	1	£
		1		1	£		/	1	2
		1		1	£		1	1	2
		1		1	٤		1	1	2
		1		1	2		1	1	3

ART 7 About work for	an employer — continued	PART
your earnings vary?	BOX 1 — Your most recent job No ☐ Yes ☐ We will write to you about this	BOX 2 — Your job before No Yes We will write to you about this
b you get anything other than money in this job? is could be things like free board and lodgings, free meals or cheon vouchers.	No Please tell us what you get	No ☐ Yes ☐ Please tell us what you get
emember please send in payslips as proof of your earning at if you do not have payslips you must send in a atement from your employer showing your earnings fore anything was taken off.	s.	

PART 8 About your trave	elling	expenses to	and from work	SI VA		PART
Have you had any travelling expenses to and from work in the jobs you have told us about? We take your travelling expenses to and from work into account when we work out if you can get Invalid Care Allowance.	No ☐ Yes ☐		out the travelling expenses to obs you have told us about in			
Have you any travelling expenses now?	No 🗆	Please tell us about the most recent job in BC you had one in BOX 2	the travelling expenses for your DX 1 and the job before that, if	100	1-1-1	
	Yes Please tell us about the travelling expenses for the job you have now in BOX 1 and the job you had before that, if you had one in BOX 2					
		at the end of this fo				
		— Your most recent	job		2 — Your job before	
Did you use public transport?	No 🗆	0		No 🗆		
	Yes 🗆	Cost of fares each week	Please go to PART 9	Yes 🗌	Cost of fares each week	£ Please go to PART 9
Did you use your own transport?	No 🗆 Yes 🗆			No 🗆 Yes 🗆	O organia	-
Was public transport available?	No 🗆 Yes 🗆	Why did you not use i	t?	No 🗆 Yes 🗆	Why did you not use	it?
		How much would it have cost?	2		How much would it have cost?	2
Miles travelled each week		miles			miles	
Cost of travelling expenses each week	3			3		

do with work	PART 9
ase go to PART 10 need to know about all the other expenses in the s you have told us about in PART 7	
ase tell us about the expenses for your most tent job in BOX 1 and the job before that, if you done in BOX 2	
ease tell us about the expenses for the job you we now in BOX 1 and the job before that, if you d one in BOX 2	
f you need any more space please use PART 17 at the end of this form	
The same of the sa	
Your most recent job	BOX 2 — Your job before
a week	£ a week
a week	£ a week
a wesk	£ a week
a week	£ a week
a week	£ a week
a week	£ a week
S seed seed	need to know about all the other expenses in the you have told us about in PART 7 ase tell us about the expenses for your most ent job in BOX 1 and the job before that, if you one in BOX 2 ase tell us about the expenses for the job you e now in BOX 1 and the job before that, if you one in BOX 2 you need any more space please use PART 17 the end of this form Your most recent job a week a week a week a week

ART 9 About othe	r expenses to	do with work — contir	nued		PART
	BOX 1 — You	ur most recent job	BOX 2 — Your jo	b before	
cost of buying meals at work up to 15p per meal	3	a week	£	a week	
cost of paying someone to care for a child or some lise who lives with you while you are at work	neone £	a week	£	a week	
ther expenses in your job like the purchase or ire of a car, payment for temporary accommodate cost of buying or renting premises lease give details	£ £	a week	2	a week	

PART 10 About self-emplo	oyed work	PART 10
Have you been self-employed since the date you put in PART 2? Self-employed work could be working for yourself or being a partner in a business.	No Please go to PART 13 Yes	
Are you self-employed now?	No Please tell us about your most recent self-employed job in BOX 1 and the job before that, if you had one in BOX 2	La Principal de la Carta de Ca
	Yes Please tell us about the self-employed job you are doing now in BOX 1 and the job before that, if you had one in BOX 2	
	BOX 1 — Your most recent job	BOX 2 — Your job before
Date you started this self-employed work?		1 1
Date you finished this self-employed work?	1 1	1 1
Have you got an accountant for this work?	No Please send us a simple profit and loss account showing details of your business income and expenses Yes Please send us a statement from your accountant showing profit and loss for the last available trading year as agreed by the Inland Revenue Please tell us about your accountant. We will not	No Please send us a simple profit and loss account showing details of your business income and expenses Yes Please send us a statement from your accountant showing profit and loss for the last available trading year as agreed by the Inland Revenue
	contact them unless we have to	 Please tell us about your accountant. We will not contact them unless we have to
Their name and address		
Postcode		
Their telephone number	Code	Code

PART 11 About your trave	lling expenses to and from self-employed work	PART 11
Have you had any travelling expenses to and from work in the jobs you have told us about? We take your travelling expenses to and from self-employed work into account when we work out if you can get Invalid Care Allowance.	No Please go to PART 12 Yes We need to know about the travelling expenses to and from work in the self-employed jobs you have told us about in PART 10	
Have you any travelling expenses now?	No Please tell us about the travelling expenses for your most recent job in BOX 1 and the travelling expenses in the job before that, if you had one, in BOX 2	ate years in
	Yes ☐ Please tell us about the travelling expenses for the job you have now in BOX 1 and the travelling expenses in the job before that, if you had, one in BOX 2	
	If you need any more space please use PART 17 at the end of this form	
	BOX 1 — Your most recent job BOX 2 — Your job before	MANAGES SANS
Did you use public transport?	No ☐ Yes ☐ Cost of fares each week Please go to PART 12 No ☐ Yes ☐ Cost of fares each week Please	go to PART 12
Did you use your own transport?	No	
Was public transport available?	No	
	How much would it have cost? How much would it have cost?	
Miles travelled each week	miles	
Cost of travelling expenses each week	2	

PART 12 About other exp	enses	to do with self-employed wor	k		PART 12
Have you had any other expenses in the self-employed jobs you have told us about? We take your other expenses in the self-employed jobs you have told us about into account when we work out if you can get Invalid Care Allowance.	No 🗆 Yes 🗆	Please go to PART 13 We need to know about all the other expenses in the self-employed jobs you have told us about in PART 10			
Have you any expenses now?	No 🗆	Please tell us about the expenses for your most recent job in BOX 1 and the expenses in the job before that, if you had one, in BOX 2 Please tell us about the expenses for the job you have now in BOX 1 and the expenses in the job before that, if you had one, in BOX 2			-
		■ If you need any more space please use PART 17 at the end of this form			
Please tick any of these expenses that you have in your job. And tell us how much they are. If you are not sure, please tell us roughly how much they are.					
	BOX 1	— Your most recent job	BOX 2 — Yo	our job before	
National Insurance (NI) contributions	£	a week	£	a week	
Cost of buying protective clothing or overalls	£	a week	£	a week	
Cost of washing or cleaning of protective clothing $\ \square$	٤	a week	£	a week	
Excessive wear and tear of normal clothing	£	a week	3	a week	
Money you pay to a Trade Union or other professional groups	£	a week	£	a week	-
Cost of buying tools and equipment	£	a week	£	a week	
				Total Control	-

PART 12 About other exp		o with self-employ		
Cost of buying meals at work up to 15p per meal	£	r most recent job	£ £	a week
Cost of paying someone to care for a child or someone else who lives with you while you are at work	3	a week	£	a week
Other expenses in your job like the purchase or hire of a car, payment for temporary accommodation, or the cost of buying or renting premises Please give details	£ 2	a week	3	a week

Have you been on a course of full-time education since the date you put in PART 2? Full-time education means 21 hours of supervised study each week. Please tick Yes if you are on holiday from a full-time course of education.	
Please tick Yes if you are on holiday from a full-time course of education.	

No 🗆	
Yes 🗆	Please tell us who you want to claim fo
	The person you are married to
	Your partner if they are looking after a child or children for you
	Someone else who looks after a child or children for you

About extra money added on to your invalid Care Allowance

PART 14

Claiming extra money for a child

You may be able to get an extra £10.85 a week for each child that you claim for. But the amount of money that your partner has coming in can affect your claim for extra money for a child.

If you want to claim for a child or children, please look at the table. It will tell you if you can get extra money.

How to use the table

- Look at your partner's wages before anything is taken off.
- Take off the expenses we allow. These are for things like childminding fees, fares to work and National Insurance (NI) contributions. To find out what other expenses we allow, look at PART 8 and PART 9 of this form.
- Look at the table and find the number of children you want to claim for.
- Look at the amounts under Your partner's earnings. We cannot pay you extra money for your children if your partner earns more than the amount in the table.

Do you want to claim extra money for a child or children?
If you are not sure whether you can claim for children
etill tick Ves

	Your partner's earnings			
Number of children	8.4.91 to 5.4.92	6.4.92 to now		
1 Child	£110	£115		
2 Children	£124	£130		
3 Children	£138	£145		
4 Children	£152	£160		
5 Children	£166	£175		

No 🗆	Please go to PART 15
Yes 🗆	Please tell us your Child Benefit reference number
	This on the front of your order book or on letters about the benefit

	Numbers			Letter
CHB				

PART 15 About the person	you look after		PART 15
Please tell us about the person you look after You can get this information from • their Attendance Allowance order book or • their Constant Attendance Allowance order book or • their Disability Living Allowance order book or • letters about these benefits. Surname Other names			
Title	Mr/Mrs/Miss/Ms		
Date of birth	1 1		
Address			
National Insurance (NI) number This will help us to deal with your claim more quickly. You can find this on letters from a Social Security office their National Insurance number card their payslips letters from the Inland Revenue.	Letters Numbers	Letter	

PART 15 About the person ye	pu look after — continued PART 15
What relation is this person to you? If no relation write NONE	
Have they been getting Attendance Allowance or Constant Attendance Allowance or Disability Living Allowance at any time since the date you put in PART 2?	No Please look again at page 2 of the wraparound leaflet Yes Please tell us which one Attendance Allowance Constant Attendance Allowance Disability Living Allowance at the middle or higher rate for help with personal care Benefit reference number You can find this on the front of the order book or on letters about the benefit.
	Date they made the claim
Do you look after this person for 35 hours or more each week?	No CY Yes
Have you had any breaks in looking after this person since the date you put in PART 2? A break means when you look after them for less than 35 hours	No ☐ Yes ☐ Please give us the exact dates and times of the breaks
each week.	From Time To Time Reason for the break
	■ If you need more space please use PART 17 at the end of this form





