



# Malvern Hills District Citizens Advice Bureau

## MONEY ADVICE PACK

Your Name

### PLEASE READ THE FOLLOWING NOTES BEFORE FILLING-IN THE FORMS

*Please complete these forms as fully as possible. The information requested is **ALL** needed so we can advise you on the best way to deal with your situation. All your information is treated confidentially.*

#### **Personal Details**

We need to know about you and the other members of your household, as people's circumstances affect how much money is needed for essentials. For example, a disabled family member might need special food or extra heating.

#### **Budget Sheet**

We need to know **EXACTLY** how much money you have coming into your household and where it goes. This is so we can see what, if any, funds you have available to make offers to creditors.

#### **Priority Creditor information**

Priority debts are when you get behind on payments of rent, mortgage, council tax, electricity, gas, hire-purchase, fines, County Court Judgments – they are all priority creditors, because failure to keep up with payments can have serious effects, for example, you could lose your home if you do not pay your rent or mortgage.

#### **Non-priority creditor information**

Credit cards, catalogues, door-to-door lenders, storecards, bank loans, overdrafts. Getting behind on payments to these creditors is less serious.

#### **Form of Authority**

The form is for you to give us your permission to write to creditors and others on your behalf.

#### **Client Agreement**

This is so you understand what we each need to do for a successful outcome to your case.

When you have filled in the forms please return them to us. We will then see how we can best help you. We will contact you within a week of receiving your information to let you know the next step.

#### **When you attend an appointment it is very important that you bring:**

- **any papers relating to your creditors and debts**
- **evidence of any income received, eg, letters from benefit agency, payment books or payslips.**

**Malvern Hills District CAB**  
The Grange, Grange Road, Malvern

For opening hours, please see our website [www.malvern-hills-cab.org.uk](http://www.malvern-hills-cab.org.uk)

## PERSONAL DETAILS

All the information requested is relevant and will remain confidential. These details are required to enable us to check that you are in receipt of your entitlements and decide how best to help you.

Your Name: ..... NI No: .....

Your Partner's Name: ..... NI No: .....

Address: .....  
.....

Can we contact you on these telephone numbers?:

Home: ..... Work: ..... Mobile: .....

Contact?:   yes/no                                   yes/no                                   yes/no

If you are in employment: (a) how many hours do you work per week/month? .....

(b) how many hours does your partner work per week/month? .....

Number of Adults: ..... Number of Children: .....

Date of Birth: ..... Date of Birth: .....

Date of Birth: ..... Date of Birth: .....

Disabilities/Health Problems: .....  
.....

Housing Status—Please tick box where appropriate:

Home Owner       Private Tenant       Housing Association

*Please state which one:* .....

Outstanding mortgage amount: ..... How much is your full rent?.....

How much is your full council tax? .....

Are you in receipt of Housing Benefit?:           yes/no

Are you in receipt of Council Tax Benefit?       yes/no

Relationship—Please tick box where appropriate:

Single     Married     Living Together     Separated     Divorced     Widowed

Other: .....

# BUDGET SHEET

Name: \_\_\_\_\_

Date: \_\_\_\_\_

| <b>INCOME</b>                        |                      |                                    | Monthly <input type="checkbox"/> | Weekly <input type="checkbox"/> |
|--------------------------------------|----------------------|------------------------------------|----------------------------------|---------------------------------|
| <b>SALARY</b>                        |                      |                                    |                                  |                                 |
| Client's salary/wages (take home)    |                      |                                    |                                  |                                 |
| Partner's salary/wages (take home)   |                      |                                    |                                  |                                 |
| <b>OTHER</b>                         |                      |                                    |                                  |                                 |
| Maintenance or child support         |                      |                                    |                                  |                                 |
| Boarders or Lodgers                  |                      |                                    |                                  |                                 |
| Non-dependant contributions          |                      |                                    |                                  |                                 |
| Student loans and grants             |                      |                                    |                                  |                                 |
| <b>BENEFITS</b>                      |                      |                                    |                                  |                                 |
| Jobseekers Allowance (income-based)  |                      |                                    |                                  |                                 |
| Jobseekers Allowance (contrib-based) |                      |                                    |                                  |                                 |
| Income Support                       |                      |                                    |                                  |                                 |
| Working Tax Credit                   |                      |                                    |                                  |                                 |
| Child Tax Credit                     |                      |                                    |                                  |                                 |
| Child Benefit                        |                      |                                    |                                  |                                 |
| Incapacity Benefit or SSP            |                      |                                    |                                  |                                 |
| DLS/Attendance Allowance             |                      |                                    |                                  |                                 |
| Carer's Allowance                    |                      |                                    |                                  |                                 |
| Housing Benefit                      |                      |                                    |                                  |                                 |
| Council Tax Benefit                  |                      |                                    |                                  |                                 |
| <b>PENSIONS</b>                      |                      |                                    |                                  |                                 |
| State pension                        |                      |                                    |                                  |                                 |
| Private or work pension(s)           |                      |                                    |                                  |                                 |
| Pension Credit                       |                      |                                    |                                  |                                 |
| <b>ASSETS</b>                        | <b>Current Value</b> | <b>Mortgage/Finance O/standing</b> |                                  |                                 |
| House/flat                           |                      |                                    |                                  |                                 |
| Vehicle                              |                      |                                    |                                  |                                 |
| Savings                              |                      |                                    |                                  |                                 |
| Number of vehicles                   |                      |                                    |                                  |                                 |
| <b>Total (A)</b>                     |                      |                                    |                                  |                                 |
| <b>NOTES</b>                         |                      |                                    |                                  |                                 |

| <b>EXPENDITURE</b>                       |  | Monthly <input type="checkbox"/> | Weekly <input type="checkbox"/> |
|--|--|----------------------------------|---------------------------------|
| <b>ESSENTIAL EXPENDITURE 1</b>           |  |                                  |                                 |
| Rent                                     |  |                                  |                                 |
| Ground rent & service charges            |  |                                  |                                 |
| Mortgage                                 |  |                                  |                                 |
| Other secured loans                      |  |                                  |                                 |
| Mortgage endowment & MPPI                |  |                                  |                                 |
| Building & Contents insurance            |  |                                  |                                 |
| Pension and life insurance               |  |                                  |                                 |
| Council Tax                              |  |                                  |                                 |
| Gas                                      |  |                                  |                                 |
| Electricity                              |  |                                  |                                 |
| Water                                    |  |                                  |                                 |
| Other utilities (coal, oil, calor gas)   |  |                                  |                                 |
| <b>ESSENTIAL EXPENDITURE 2</b>           |  |                                  |                                 |
| TV licence                               |  |                                  |                                 |
| Magistrates' court fines                 |  |                                  |                                 |
| Maintenance or child support             |  |                                  |                                 |
| Hire purchase or conditional sale        |  |                                  |                                 |
| Child care costs                         |  |                                  |                                 |
| Adult care costs                         |  |                                  |                                 |
| <b>PHONE</b>                             |  |                                  |                                 |
| Landline                                 |  |                                  |                                 |
| Mobile                                   |  |                                  |                                 |
| <b>TRAVEL</b>                            |  |                                  |                                 |
| Public transport                         |  |                                  |                                 |
| Other (e.g. taxis)                       |  |                                  |                                 |
| Car insurance                            |  |                                  |                                 |
| Road tax                                 |  |                                  |                                 |
| Petrol                                   |  |                                  |                                 |
| MOT and car maintenance                  |  |                                  |                                 |
| Breakdown or recovery                    |  |                                  |                                 |
| Parking charges or tolls                 |  |                                  |                                 |
| Number of cars                           |  |                                  |                                 |
| <b>HOUSEKEEPING</b>                      |  |                                  |                                 |
| Food and milk                            |  |                                  |                                 |
| Cleaning and toiletries                  |  |                                  |                                 |
| Newspapers and magazines                 |  |                                  |                                 |
| Cigarettes and tobacco                   |  |                                  |                                 |
| Alcohol                                  |  |                                  |                                 |
| Laundry and dry cleaning                 |  |                                  |                                 |
| Clothing and footwear                    |  |                                  |                                 |
| Nappies and baby items                   |  |                                  |                                 |
| Pet Food                                 |  |                                  |                                 |
| <b>OTHER</b>                             |  |                                  |                                 |
| Health (dentist, prescriptions, glasses) |  |                                  |                                 |
| Repairs & house maintenance              |  |                                  |                                 |
| Hairdressing and haircuts                |  |                                  |                                 |
| Cable, satellite and internet            |  |                                  |                                 |
| TV, Video and other appliance rental     |  |                                  |                                 |
| School meals and meals at work           |  |                                  |                                 |
| Pocket money and school trips            |  |                                  |                                 |
| Lottery and pools etc                    |  |                                  |                                 |
| Gifts (Christmas, birthdays etc)         |  |                                  |                                 |
| Vet bills and pet insurance              |  |                                  |                                 |
| <b>Total (B)</b>                         |  |                                  |                                 |

## PRIORITY CREDITOR INFORMATION SHEET

Name ..... Address.....

| No | Creditor (name & address) | A/C no or Ref | Recovery stage * | Usual payment | Current balance outstanding |
|----|---------------------------|---------------|------------------|---------------|-----------------------------|
| 1  |                           |               |                  |               |                             |
| 2  |                           |               |                  |               |                             |
| 3  |                           |               |                  |               |                             |
| 4  |                           |               |                  |               |                             |
| 5  |                           |               |                  |               |                             |
| 6  |                           |               |                  |               |                             |

| No | Secured Creditor (name & address) | A/C no or Ref | Recovery stage * | Usual payment | Current balance outstanding |
|----|-----------------------------------|---------------|------------------|---------------|-----------------------------|
| 1  | Mortgage:                         |               |                  |               |                             |
| 2  | 2nd Charge on Property            |               |                  |               |                             |
| 3  |                                   |               |                  |               |                             |

**Priority debts are:**

rent and mortgage arrears  
 arrears on secured loans  
 council tax arrears  
 water rates arrears  
 fuel arrears  
 income tax and NI arrears  
 fines and court orders

**\* Recovery Stage**

Bailiffs (B)  
 Default Notice (DN)  
 County Court Judgment (CCJ)  
 Summons (S)  
 Eviction (E)  
 Possession Warrant (PW)

## NON PRIORITY CREDITOR INFORMATION SHEET

Name ..... Address .....

| No | (i) Creditor (name, address & tel number)<br>(ii) Debt collection agency (name, address & tel. no) | A/C no or Ref | Recovery stage * | Usual payment | Current balance outstanding | Is the debt insured?<br>Yes/no |
|----|--|---------------|------------------|---------------|-----------------------------|--------------------------------|
| 1  | (i)  |               |                  |               |                             |                                |
|    | (ii)   |               |                  |               |                             |                                |
| 2  | (i)  |               |                  |               |                             |                                |
|    | (ii)   |               |                  |               |                             |                                |
| 3  | (i)  |               |                  |               |                             |                                |
|    | (ii)   |               |                  |               |                             |                                |
| 4  | (i)  |               |                  |               |                             |                                |
|    | (ii)   |               |                  |               |                             |                                |
| 5  | (i)  |               |                  |               |                             |                                |
|    | (ii)   |               |                  |               |                             |                                |

**Non - priority debts are:**

all unsecured money debts  
eg:  
credit sale  
credit card  
bank loan/overdraft  
personal finance loan  
catalogue etc

**\* Recovery Stage**

Default Notice (DN)  
Bailiffs (B)  
County Court Judgment (CCJ)  
Summons (S)  
Eviction (E)  
Possession Warrant (PW)

For each debt, please indicate whose name the debt is in or whether jointly liable with anyone else for it.

## DETAILS OF YOUR DEBTS CONTINUED

**Any other debts?** Do you owe any money to anyone else?  
If so, please list below

1.

|   |                |
|---|----------------|
| Type of debt                            |                |
| who to<br>(full name and address) ..... |                |
| .....                                   |                |
| amount owed                             | usual payments |
| Reference/Account Number                |                |

2.

|   |                |
|---|----------------|
| Type of debt                            |                |
| who to<br>(full name and address) ..... |                |
| .....                                   |                |
| amount owed                             | usual payments |
| Reference/Account Number                |                |

3

|   |                |
|---|----------------|
| Type of debt                            |                |
| who to<br>(full name and address) ..... |                |
| .....                                   |                |
| amount owed                             | usual payments |
| Reference/Account Number                |                |

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|   |                |
|---|----------------|
| Type of debt                            |                |
| who to<br>(full name and address) ..... |                |
| .....                                   |                |
| amount owed                             | usual payments |
| Reference/Account Number                |                |



The Grange  
Grange Road  
Malvern  
WR14 3HA  
Tel: (01684) 563611  
e-mail:  
bureau@malvern-hills-cab.org.uk

**Chief Officer:** Mr Les Kinmond

## FORM OF AUTHORITY

Name(s) (Clients) .....

Address .....

.....

.....

**I/We** hereby authorise Malvern Hills District Citizens Advice Bureau to take up enquiries and receive information on my/our behalf.

Date .....

Signature .....

Signature .....

NI Number .....

Date of Birth .....



Community  
Legal Service



**CLIENT AGREEMENT**

We are pleased to provide this agreement between yourselves and the Malvern Hills District Citizens Advice Bureau.

Address: The Grange, Grange Road Malvern, WR14 3HA

Telephone: 01684 563611

Office Hours: Monday, Tuesday, Thursday, Friday 10.00 am - 4.00 pm

**We will:**

- 1. Assess your situation and inform you of possible options.
- 2. Negotiate on your behalf with your creditors or enable you to do so.
- 3. Keep you informed of any progress made.

**In return we ask that you:**

- 1. Inform us of your financial situation **in full** at your first appointment.
- 2. Attend appointments as arranged and/or reply to correspondence as requested. Inform us if you are unable to attend an appointment.
- 3. Keep to arrangements made.
- 4. Inform us of any change in your circumstances.
- 5. Don't make your own individual offers to creditors if we are negotiating for you.

We will aim to assist you with your financial situation within the restrictions of our working hours, workload, creditors' practice and the law.

If you wish to discuss any part of this agreement, please do so with your Money Advisor or the Bureau Manager. We will assume that this agreement is acceptable to you unless we hear to the contrary.

In the event of you not keeping to this agreement the Bureau has the option to withdraw from your case and to inform your creditors that we no longer act for you.

**Any service that you receive from Malvern Hills District Citizens Advice Bureau will be free, confidential and impartial.**

Signed: ..... Date: .....

Signed on behalf of Malvern Hills District CAB: .....

*Original/Client Copy*