

Notification of remand in custody

HCTB6 07/08

Local authority address

Prison address stamp

Part A

Surname or family name

Mr/Mrs/Miss/Ms/other

Other names

Any other names you have used

Address benefit claimed for

 Postcode

National Insurance (NI) number
if you know it

Letters Numbers Letter

Date of birth

 / /

Is anybody else living at the
address you are claiming for?

No

Yes What is their name and relationship to you?

Have you sublet the property?

No

Yes

Part B – to be filled in by the claimant

I can confirm the following as at the date of this document:

Date of first
reception

 / /

Estimated date of
trial or sentencing

 / /

I confirm that I do not get any income while in custody and I intend to return to my home address. I will inform you if there are any further changes to my circumstances.

Claimant's
signature

Date

 / /

Part C

For office use only

This inmate has/has not signed a disclaimer allowing the release to you of any information you may require from me to administer their Housing Benefit or Council Tax Benefit claim. I can confirm the sentencing details noted above are correct.

Signature

Date

 / /

Name

Title

Phone
number

 Code Number

Prison number

When contacting us please quote prison number on ALL correspondence and enquiries.