

**PAYMENT OF HOUSING BENEFIT  
DIRECT TO YOUR LANDLORD**

**Chesterfield Borough Council  
Benefits Section  
Revenues Hall  
PO Box 100  
85 New Square  
Chesterfield  
S40 1BR**



**Claimants name:** .....  
**Claimants address:** .....  
.....  
.....  
.....

If your rent is to be paid direct to your landlord please ask your landlord to complete this form and return it to the address above. Sign to say that you agree to direct payments to your landlord.

**Claimants signature:** .....

Landlords Name: .....
Landlords Address: .....
.....
.....

**IMPORTANT NOTICE TO LANDLORDS:** Benefit paid direct will be made by bank transfer every four weeks. A statement for this period will be sent to you under a separate cover.

Full name and postal address of your Bank or Building Society. ..... ..... ..... .....	<b>Account Details</b>		
	Name of account holder .....		
	Branch Sort Code	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	Account Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Some Building Societies also require a ROLL NUMBER. If you are unsure about this contact your Building Society who will be able to help you.

**ROLL NUMBER**

**Landlord's signature:** .....