Housing Benefit Request to withdraw or continue an appeal







Please use this form to withdraw your appeal, or ask us to forward it to the Tribunal Service.

First name:	Last name:
Address:	
	Postcode:
Daytime phone number:	Benefit claim number:
E-mail address:	
What you want to do	
Please tick one of the boxes below to say what you	would like to do:
I would like to withdraw my Housing Benefit appeal	
I would like you to continue with my Housing Benefit appeal and send it to the Tribunal Service	
If you have any comments you would like to add to support your appeal please tell us:	
Your signature:	Date: / /

Once you have filled in this form and signed the declaration please return it to your Local Authority:

Canterbury City Council PO Box 2033 Pershore WR10 9EE www.canterbury.gov.uk Dover District Council PO Box 2031 Pershore WR10 9EB www.dover.gov.uk

Thanet District Council PO Box 2032 Pershore WR10 9ED www.thanet.gov.uk