

Ref:

**CERTIFICATE OF EARNINGS**

PRIVATE AND CONFIDENTIAL

**Part A – to be filled in by employee**

Send this completed form to: Revenues & Benefits Service, Dover District Council, White Cliffs Business Park, Dover, Kent CT16 3PJ

Please fill in Part A of this form and then **ask your employer to fill in Parts B and C**. Send the completed form to the address above as soon as possible. **Don't delay returning** your Housing Benefit and Council Tax Benefit application form.

Name  
Address
  

Employer's name:  
Address:  
  
Employer's phone:
  
  


National Insurance number:

**Part B – to be filled in by employer only**

Please help your employee by filling in Parts B and C of this form and returning it to the Benefits address above as quickly as you can. If you hold different name, address or National Insurance details to the information shown above, please provide them.

What date did their employment start? What was the date of their last pay increase? How often is your employee paid? weekly fortnightly four-weekly monthly How is your employee paid? cash cheque BACS other (please state) For the **current financial year**, please state your employee's:

<b>Gross Pay to Date</b>	£	:	<input type="text"/>
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<b>Tax to date</b>	£	:	<input type="text"/>
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<b>Net National Insurance to date</b>	£	:	<input type="text"/>
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For the above figures, please state the exact date used 

Please complete **Table 1** below with details of their last 5 weeks' **actual earnings** (if paid weekly), 6 weeks' (if paid fortnightly), 8 weeks' (if paid four-weekly) or 2 months' (if paid monthly). Figures must include overtime, bonus and commission.

**If they have not yet worked for at least this length of time, please complete Table 2 instead.**

**Table 1 – To be used for declaring ACTUAL earnings only, including any SSP or SMP paid.**

Date Paid	Gross Pay	Income Tax Deductions	Employee's National Insurance Contributions	Employee's Contributions to Pension Scheme	Working Tax Credit	SSP or SMP	Hours Worked	Take Home Pay (net)
	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	<input type="text"/>	£ : <input type="text"/>
	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	<input type="text"/>	£ : <input type="text"/>
	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	<input type="text"/>	£ : <input type="text"/>
	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	<input type="text"/>	£ : <input type="text"/>
	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	£ : <input type="text"/>	<input type="text"/>	£ : <input type="text"/>

Are earnings for this period unusually high or low? No Yes If 'YES', which one? High Low 

**This form continues overleaf - please turn over.**

**Part B (continued) – to be filled in by employer only**

**Table 2 – To be used for declaring ESTIMATED earnings only.**

Estimated Gross Pay	Estimated Income Tax Deductions	Estimated Employee's National Insurance Contributions	Estimated Employee's Contributions to Pension Scheme	Estimated Hours Worked	Estimated Take Home Pay (net)
£ :	£ :	£ :	£ :		£ :

Are the earnings you have estimated likely to vary? No  Yes

**Additional information**

Use this space to provide any extra information relevant to this certificate, for example SSP or SMP details.

**Part C – to be filled in by employer only**

Please authenticate this certificate with the Company's official stamp in the space provided, or if you do not have a stamp, attach a sheet of official headed notepaper.

Employer's signature:
Please print your name:
Position held in the Company:
Your contact phone number:
Date:

<b>Company's official stamp here:</b>
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**Office locations and useful information**

**Please fill in and return this form:**

**By post:** Revenues & Benefits Service, Dover District Council, White Cliffs Business Park  
Dover, Kent CT16 3PJ

**Or by hand at one of the following offices:**

Aylesham Area Office, Aylesham Health Centre, Queens Road, Aylesham CT3 3BB. Open: Wednesday 9am to 12.30pm and 1.30pm–4.30pm

Deal Area Office, Deal Library, Broad Street, Deal CT14 6ER Open: Monday, Wednesday and Friday 9am to 5pm

Dover Gateway, Castle Street, Dover CT16 1PD Open: Monday to Friday 9am to 5pm and Saturday 9am to 1pm

Sandwich Area Office, The Guildhall, Sandwich, CT13 9AH Open: Tuesdays and Thursdays 9am to 12.30pm and 1.30pm to 4.30pm

**Useful phone numbers:**

**Revenues & Benefits Service 01304 872199**

Our phone lines are open from 9am to 5pm

For all other Council services, please phone (01304) 821199.

We are committed to ensuring that money paid out in benefits goes to those who are entitled to receive it. If you are aware of anyone abusing the system, you can call our Investigation Section on (01304) 872190.

**Leaflets:** The Revenues & Benefits Service has a series of leaflets providing help and information, available from the above offices.