

Self Employed Earners Income Form

Claim Ref (Office Use Only)

Yes

Yes

Information for filling in this form

- This form is to help us to work out your earnings from self-employment.
- Please complete the form in full. You must answer all the questions.
- We do not allow the same expenses as HM Revenues & Customs therefore certain expenses which you may claim when making your income tax return will not be listed here.
- Please do not include any of the following as we do not allow as an expense
 - Any money spent setting up your business
 - Any money spent expanding your business
 - The purchase of capital items (e.g. tools, computers, shop fittings, vehicles, furniture etc)
 - Depreciation of capital assets (e.g. vehicles, tools, fixtures & fittings etc)
 - Business entertainment (drinks, meals, promotional events)

Any losses carried forward from an earlier accounting period or from another business

Note: Do not complete this form if you are a Director of a Registered Limited Company

Part 1 – Your Details

Your Full Name

Do you employ anyone?

If Yes, what is the relationship?

with you?

If Yes, are they related to you or do they live

Your Home Address				
Part 2 – Busine	ss Details			
Business Name				
Business Address				
Business Phone		What date did	you start	
Number		trading in this	business?	
What type of				
work do you do?				
How many hours de	o you work on av	erage each week in the business	?	
Are you a -	Sole Trader	Partnership	Franchise	
		-	Holder	
If you are in a busin	ness partnership.	how many partners are in the b	ousiness?	•
How are the profits split between the partners (i.e. what % do you take)?			· · · · · · · · · · · · · · · · · · ·	%

No

No

Part 3 - Business Income

What period do these account cover? From: DD / MM / YY To: DD / MM / YY

Please note: This period will be referred to on this form as the 'accounting period'- the start date of this period must not be more than 1 year prior to today's date and therefore, the period must not exceed 365 days.

Please include the total income (takings) of your business in the accounting period. This means all the money that the business made during the accounting period before you made any deductions for your costs (expenses) or took money for your own use.

Income (including tips, gratuities etc)	£				
Did you buy stock for either use or resale in your business?					
No Please go to Part 4 Yes Please complete the Cost of Sales section below					
Cost of Sales					
a) Value of your stock at start of the accounting period	£				
b) Purchases of stock during the accounting period	£				
c) Value of your stock at the end of the accounting period	£				
Cost of Sales $(a + b - c)$	£				
Gross Profit (Income – Cost of Sales)	£				
Part 4 - Business Expenses (Running Costs excl Vehicle) Please only include amounts paid during the accounting period					
Wages paid to spouse	£				
Wages paid to other employees	£				
Telephone (business call costs only)	£				
Postage, Carriage & Delivery	£				
Advertising	£				
Bank charges (Business bank account/s only)	£				
Repairs which you paid for and did not claim on your insurance (e.g. machinery & tool repairs. Do not include vehicle repairs here)	£				
Please give details					
Trade subscriptions, professional membership fees etc	£				
Accountancy	£				
Other running costs (please give details below)	£				
Sub-Total (Office Use Only)	£				

Part 5 - Motoring Expenses (Running Costs)

Did you use a vehicle for the business during the accounting p	eriod?	
No Please Go to Part 6 Yes Please	e complete this part	
Make, Model & Type of Vehicle		
Registration Number Is it Petro	ol or Diesel?	
Do you use this vehicle for private use? Yes	No	
How often is this vehicle serviced? Every mon	nths, or every	miles
In this vehicle during the accounting period: –		
What was your total mileage?		miles
What was your business mileage?		miles
What was your private mileage?		miles
How much did you pay for your yearly Insurance Premium?	£	
How much did you pay for your yearly Road Tax?	£	
How much did you pay for your yearly MOT?	£	
What amounts did you also pay out for the following during th	ne accounting period?	
Fuel for business use only	£	
Servicing (only include any service costs paid in addition to those in the MOT figure above)	£	
Vehicle Repairs which you paid for and did not reclaim on your insurance. Do not include anything reclaimed through insurance. Please give details below	£	
Other running costs (e.g. tyres) Please give details below	£	
Sub-Total (Office Use Only)	£	

Part 6 - Business Loan Repayments Did you make any repayments for a business loan duri	ing the accounting period?
No Please go to Part 7 Yes	Please complete this part
For what purpose was the loan taken out?	
<u> </u>	
What is the name & address of the lender	
1 +	w much were the nthly repayments?
How much in total did you repay during the assessment period?	£
How much of this was for the interest only?	£
Sub –Total (Office Use Only)	£
Part 7 - Business Premises Expenses Do you have separate business premises? (i.e. other th	an working from your home address)
No Please go to Part 8 Yes	Please complete this part
How much is your annual business rent?	£
How much are your annual business rates?	£
Please only include below amounts which you have pa	aid during the accounting period
Business Rent	£
Business Rates	£
Heating & Lighting of the business	£
Water Rates for business use	£
Business Insurance	£
Other (please give details below)	£
Sub-Total	£

Part 8 Declaration • I declare that the details on this form represent the true figures for my business income and expenses, as requested, for the period • I understand that you may contact me to check the details on this form and that I may be required to provide evidence to support the figures when requested. • I understand that the Council can prosecute me if I give false information on this form, or if I provide false or altered documents relating to these accounts, or if I withhold information. • I will write to you straight away if there are any changes to my circumstances so that you can work out my benefit again. If I do not, and I get too much benefit, the Council can ask me to pay it back and may prosecute Date Signature of person claiming Please do not write below this line For Office Use Only £ Gross Profit (Sales less Cost of Sales) £ Less expenses sub-total Part 4 £ Less expenses sub-total Part 5 £ Less expenses sub-total Part 6 £

Annual Net Profit

Less expenses sub-total Part 7

Net Profit in accounting period

Number of days in accounting period

(If the number of days in the accounting period is less than one year, to get the annual figure divide the Net Profit by the number of days in the accounting period and x 365)

Notes & Workings Out

Please return completed form to:

£

£

Mid Sussex Revenues & Benefits PO Box 10607 Nottingham NG6 6DU