## Housing and Council Tax Benefit Self Employed Taxi Driver Income Sheet



Please complete this form (even if you have audited accounts) if you or your partner are a self employed taxi driver.

Section i						
Please state your full name						
Home address						
Telephone number (home)	Telephone number (mobile)			Telephone number (business)		
Section 2						
What date did you start this business?						
Do you have a business partner?		yes 🗆		no 🗆		
If yes provide the names and address of all partners and provide your partnership agreement (if you have one)						
What percentage of the business do you own?						
Do you pay wages and who is this paid to e.g. self, staff, partner/civil partner?						
How many hours per week do you work?						
If you have been trading for more than 12 months do you have any prepared accounts (audited or otherwise) for the last Financial Year? yes ☐ no ☐						
If Yes, I need to see original accounts (not a copy).						
If No, give reason why and the date you expect to have them.						
Section 3						
If you are newly self employed complete the following, if not go straight to section 4						
Estimate the weekly amount you will receive from your self emp	oloyment	1				
Have you drafted a financial project your income and expenditure?	ction of		ye (please pr	es 🔲 rovide a copy)	no	
Have you registered as self employed with HM Re and Customs			ye	es	no	