

Social Security Department
Centre for work, pensions and benefits
P.O. Box 55, La Motte Street
St. Helier, Jersey, JE4 8PE
Tel: +44 (0)1534 445505
Fax: +44 (0)1534 447447

Date:

SOCIAL SECURITY (JERSEY) LAW, 1974

Social Security Number of beneficiary:

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PART 1 – Payment of Rent arrears to Landlord

Beneficiary's full name
(name in block capitals)

Beneficiary's address
.....

I hereby authorise the Social Security Department to pay an additional £..... of my
.....
(please insert the type(s) of benefit/pension)

direct to

Beneficiary's Signature Date
Or Signature of Appointed Agent

PART II – Witness to Signature

(Note: The beneficiary's signature must be witnessed by some other person)

This authority was signed by the above-named person in my presence.

Signature of Witness Occupation of Witness

Name of Witness
(name in block capitals)

Address of Witness

Privacy Statement

The Social Security Department collects information for the purpose of dealing with all matters relating to the benefits and services it administers. We may check information about you with other information we have. We will not give information about you to anyone outside the Department unless the law allows us to or we have your consent. The Social Security Department is the Data Controller for the purposes of the Data Protection (Jersey) Law 2005.