

If you call or write to us, please use this reference:
[Reference number or NINO]



Department for
Work and Pensions

Title, Initial, Surname
Address Line 1
Address line 2
Address line 3
Address line 4
Postcode

Building/Office location
Office type
Street
Town
Post Code

www.gov.uk

Telephone: 0000 000 0000
Textphone: 0000 000 0000

Your claim for Employment and Support Allowance (ESA)

We need more information about your work

Dear

We need to check we still have the right information about the work you are doing while claiming Employment and Support Allowance (ESA).

Please answer the questions on pages 3 and 4 and send back your your answers **by** .

What you need to do

This letter includes a set of questions.

If you have any questions about this letter or you need it in Braille, large print, audio, please call us on **0345 608 8545**

Step one: Please answer the questions on pages 3 and 4 of this letter.

Step two: Please use the freepost envelope we sent you to send back your answers. We must get your answers **by** .

If you're still working for an employer please send your last two pay slips with your reply.

If you're self-employed please send your last two bank statements or your last, agreed, self-assessment tax return with your reply.

If you need help to answer the questions, or there is a reason why you cannot send them back **by** , please call Jobcentre Plus **straightaway on 0345 608 8545.**

What happens next

Once we get your reply we will look at your answers. We will let you know if we need any more information. You do not have to contact us.

Please tell us about any changes

It's important that you tell us straightaway about any changes that could change the amount of benefit you get. For example, you need to tell us if you have a new health condition, or your existing health condition gets worse. You must also tell us if your condition gets better, or there is a change to your, or your partner's, income or savings.

Find out more about the changes we need to know about at www.gov.uk and search for ESA40.

If you do not tell Jobcentre Plus **straightaway** about these changes then you could be paid more or less money than you should.

More information

For more information about your benefit, please visit www.gov.uk

Yours sincerely,

Office Manager

Equality and Diversity

We are committed to treating people fairly, regardless of their disability, ethnicity, gender, sexual orientation, transgender status, marital or civil partnership status, age, religion or beliefs. Please contact us if you have any concerns.

Call charges

Calls to 0345 numbers cost no more than a standard geographic call, and count towards any free or inclusive minutes in your landline or mobile phone contract.

Your reply

Name: Title, Initial, Surname

NINO: [Reference number or NINO]

Please answer the questions below and send your answers back using the freepost envelope we have sent you.

Part 1: About your work

Have you stopped working?

No Please tell us about your work below.

Yes When did you stop work?

dd/mm/yyyy / /

If you have stopped work you don't need to answer any more questions. Please go to the declaration.

Employer or company name
and address

Postcode

Job title

--

Please tell us the sort of things you
do at work

--

How much do you earn?

£

Tick the box that applies.

Weekly Monthly

How many hours do you work
on average per week?

hours per week

If you are still working for an employer please send your last two pay slips with your reply

If you are self-employed please send your bank statements or self-assessment tax return with your reply.

Please go to part 2, Declaration

Part 2

Declaration

I declare the information I have given on this form is correct and complete

I understand I must report all changes in my circumstances promptly and by failing to do so I may be liable to prosecution or face a financial penalty. I will phone **0345 608 8545**, or write to the office that pays my benefit, to report any change in my circumstances.

If I give false or incorrect information or fail to report changes in my circumstances promptly, I understand that my benefit may be stopped or reduced and any overpayment may be recovered. In addition, I may be prosecuted or face a financial penalty.

I also understand that the Department may use the information which it has or may get in the future to decide whether I am entitled to:

- the benefit I am claiming
- any other benefit I may claim
- any other benefit I may claim in the future.

Your signature

Date