

# Pension Credit

## Your application form



nidirect.gov.uk

### Help with this form

- You can phone the Northern Ireland Pension Centre Application Line. It is open Monday to Friday from 9am to 5pm. Calls to the application line are free except from some mobile phones.  
The number is **0808 100 6165** or for people with speech or hearing difficulties, the textphone number is **0808 100 1165**
- Before you fill in this form, please read the booklet **Notes to help you fill in the form** that came with this form
- You can ask a friend or advice centre to help you

### About your application

Please make sure you:

- Answer all the questions on the form that apply to you and your partner, if you have one, and
- Sign and date the form and send it back to us with all the documents we have asked for by  at the latest.

If we get your form back after this date it may affect the date we can pay you from. If you have received a Housing Benefit HB2 (PC) form, please check it and if correct sign and return it, along with this form to the Northern Ireland Pension Centre.

**Don't forget** to send us any documents we have asked for. We will return them to you as soon as we can. **This is usually within 5 working days of us getting them but sometimes can take longer.**

## Part 1: About You

Please fill in this form with BLACK INK and in CAPITALS

**Title** Mr.Mrs/Miss/Ms/Other

**Your surname or family name**

**All your other names, in full**

**Any other surnames or family names you have been known by or are using now.**

Include maiden names, all former married names and all changes of surname or family name

**Date of birth**

**Your National Insurance number**

**Your permanent address**

**Your contact address**

If it is different from above

**Daytime phone number**

If you have one

**What is this number?**

Please tick

**Your textphone number** if you have one, for people with speech or hearing difficulties

**Are you registered blind or severely sight impaired**

Letters	Numbers				Letter
<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"/>
Postcode

<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Home ☐ Work ☐ Mobile ☐ Textphone ☐

No ☐

Yes ☐