APPLICATION FORM A TO BE COMPLETED BY APPLICANT

Built Heritage Investment Scheme 2017

IMPORTANT NOTE

As this is a leverage scheme, **the employment benefit of the scheme** will be reported upon by the LA to DAHRRGA. In order to do so, the applicant must outline the total number of estimated days (a day is defined as 8 hours) of employment required for the duration of the project at the application stage and types of jobs created in **Section 6** (and again at recoupment stage).

For further information required regarding this scheme, please contact your relevant local authority

PLEASE NOTE THE FOLLOWING BEFORE COMPLETING THIS FORM

- **Form A** must be fully completed
- Please **type** in the relevant information, if possible
- o If handwritten, please use **BLOCK CAPITALS** or ensure script is legible
- All date entries should be entered in the format DD/MM/YYYY
- o If the structure is not presently in use, its last use must be stated in Section 3
- If the structure is protected by any legislation other than the Planning Acts (e.g. the National Monuments Acts), this must be stated in **Section 4**
- Where planning permission has been applied for but no decision has been made, or where the decision is under appeal, state this and the date of application or appeal in Section 5
- Where notification is required under section 12 (3) of the *National Monuments* (*Amendment*) Act 1994 (Recorded Monuments) or under section 5 (8) of the 1987 Amendment Act (Register of Historic Monuments) details of the date on which the notification was sent to DAHG should be provided in **Section 5**
- Where Ministerial consent has been applied for but no decision has been made at the time of application to the Scheme, state this in Section 5 including the case reference number issued by the National Monuments Service
- The applicant must outline the total number of estimated days (a day is defined as 8 hours) of employment required for the duration of the project at the application stage in Section 6.
- Details of how the cost of the works, other than the amount of funding sought, is to be met must be stated in **Section 7**. The applicant must indicate the matching amount total and the source of matching funds
- The applicant must also indicate any grants, subsidies or assistance from statutory bodies, or sponsorship or assistance from a non-statutory source, received or being sought in Section 8. The applicant must also indicate if they have received a determination under Section 482 of the *Taxes Consolidation Act, 1997* (formerly Section 19 of the *Finance Act, 1982*), or are obtaining tax relief under the Living City Initiative or under the Home Improvement Scheme. If not, the applicant must indicate if they are in the process of applying for a determination or tax relief under *Section 482 of the Taxes Consolidation Act, 1982*)
- All proposed works should follow the conservation principles in the Department's Architectural Heritage Protection Guidelines for Planning Authorities (2011) and Advice Series publications. These are available from Government Publications or through any bookshop or to download from: <u>http://www.ahg.gov.ie/app/uploads/2015/07/Architectural-Heritage-Protection-Guidelines-2011.pdf</u>
- Bats are protected under the EU Habitats Directive. Any proposed works which may affect bats or their roosts should take cognisance of DAHRRGA's bat mitigation guidelines. These are available at: https://www.npws.ie/publications/search?title=bat+mitigation&keyword=&author=&series=All&year=&x=0&y=0
- Information provided on this form in relation to the structure may be displayed on DAHRRGA's or LA's website.



1. Applicant Details (if owner)		
Owner's Name:		
Address:		
Telephone/Mobile Number:		Email:
Charity Number: (if applicable)		
Tax Reference Number:		Date:

2. Applicant Details (if not owner)

Name:	
Address:	
Telephone/Mobile Number:	Email:
Charity Number: <i>(if applicable)</i>	
Tax reference Number:	Date:
Please indicate if the consent of the owner been obtained to apply under this scheme and attach consent to this Form.	

3. Structure Details

Name:	
	Address:
Year of construction: (if known)	
Existing use:	Proposed use: (if different)

4. Classification				
		Yes or No	If yes: enter regis number	tration
	(a) protected under the National Monuments Acts?		RMP:	
	(b) a protected structure?		RPS:	
Is the structure:	(b) a proposed protected structure?			
	(d) in an ACA?*		Name of ACA:	
	(e) included in the NIAH?**		NIAH:	Rating:

* ACA = Architectural Conservation Area

** NIAH = National Inventory of Architectural Heritage (<u>www.buildingsofireland.ie</u>)

5. Statutory Notifications

	Yes or No	If yes: enter date applied/received
		Date applied:
Do the proposed works require or have they been granted planning permission?		Planning Status:
		Planning Ref. No:
Do the proposed works require notification to the Minister under the		Date of notification:
National Monuments Acts?		
Do the proposed works require Ministerial		Date applied:
Consent or have they received consent under Section 14 of the National Monuments Act, 1930 (as amended)?		Date received:
wonuments Act, 1950 (as amended)?		Reference No:
Do any other Statutory Requirements apply?		Details:

6. Project Summary

In no more than 300 words, summarise the proposed works having regard to:		
(a) The significance of the structure		
(b) The effectiveness of the works		
(c) Employment Benefit envisaged including:		
 Total number of days of employment required for duration of project for all employees on the project including construction, professional staff and others (1 day=8hrs) Types of jobs created for project 		
Start and finish dates of proposed works?	Start:	Finish:

7. Expenditure in relation to proposed works

Estimated Total Costs of Works:	€ (excluding VAT)	€ (including VAT)
Estimated Professional Fees:	€ <i>(excluding VAT)</i>	€ (including VAT)
Total funding sought:	€	
Amount of matching funds:	€	
Source of matching funds?		
8. Other Grants & Reliefs		

Does S482 determination apply to this structure?*	
Have you applied for S482 tax relief?	
Is VAT recoverable?	
Have you applied for other EU/Exchequer funding/Tax Reliefs e.g. Living City Initiative, Home Renovation Incentive?*	
Have other EU/Exchequer funding /Tax Reliefs been received/refused? **	

* Section 482 of the Taxes Consolidation Act, 1997 (formerly Section 19 of the Finance Act, 1982)

** This application will be cross-checked with grant data held by other state agencies (such as the Heritage Council and the DECLG) to verify eligibility for funding under this scheme)

9. Conservation Professionals employed on the project

Conservation Professional 1

Name:	Position:
Address:	
Telephone/Mobile Number:	Email:
Tax Reference Number:	Date:

Conservation Professional 2

Name:	Position:
Address:	
Telephone/Mobile Number:	Email:
Tax Reference Number:	Date:

Conservation Professional 3		
Name:		Position:

Address:	
Telephone/Mobile Number:	Email:
Tax Reference Number:	Date:

If necessary, copy this page to include additional conservation professionals

10. Contractors/Tradespersons employed on the project

Contractor(s)/Tradesperson(s) 1

Name:		Position:
Address:		
Telephone/Mobile Number:		Email:
Tax Reference Number:		Date:
Satisfactory level of subcontractor tax compliance demonstrated: <i>(if applicable)</i> *	Yes:	No:

Contractor(s)/Tradesperson(s) 2

Name:		Position:
Address:		
Telephone/Mobile Number:		Email:
Tax Reference Number:		Date:
Satisfactory level of subcontractor tax compliance demonstrated: <i>(if applicable)</i> *	Yes:	No:

Contractor(s)/Tradesperson(s) 3

Name:	Position:

Address:		
Telephone/Mobile Number:		Email:
Tax Reference Number:		Date:
Satisfactory level of subcontractor tax compliance demonstrated: <i>(if applicable)*</i>	Yes:	No:

*see <u>www.revenue.ie</u> for further details on tax clearance procedures for contractors/subcontractors

If necessary, copy this page to include additional contractors/tradespersons

11. Declaration by Owner/Applicant

I, the applicant, certify that:

- 1. I understand and fulfil all the terms and conditions of the Built Heritage Investment Scheme 2017
- 2. The information provided in the application form and supporting documents is correct and I will notify the relevant local authority if there is any change in that information
- 3. I am providing at least €_____ from my own private resources towards these works
- 4. My tax affairs are in order
- 5. I understand that payment of funds by a local authority under this scheme does not imply a warranty on the part of the authority or the Minister for Arts, Heritage, Regional, Rural and Gaeltacht Affairs in relation to the suitability or safety of the works concerned or the state of repair or condition of all or any part of the structure concerned or its fitness for use.
- 6. I understand that the local authority or the Department of Arts, Heritage, Regional, Rural and Gaeltacht Affairs may make any enquiries that it considers necessary to establish my eligibility for funding under this scheme, and that the local authority's and the Minister's decisions are final.

Applicant's Signature: _____

Date: _____

12. Checklist for Owners/Applicants (Insert Yes or No accordingly)

The following must be included in all applications to local authorities	Owner Yes/No	Local authority Yes/No
Form A fully completed		

Built Heritage Investment Scheme 2017



Site location map with location of works clearly marked in red					
Evidence of Tax Compliance submitted to local authority (if applicable)					
Written consent of owner for proposed works (if applicable)					
Method statement attached (if available at application stage)					
Provide photographs which illustrate the project before works commence, which may be used later for a 'before and after' comparison for reporting purposes					

Sample Form B This will be issued separately as an MS Excel attachment.

FORM B – Schedule of Projects- to be submitted by Local Authorities to DAHRRGA by 14 March 2017									
	Local Authority Name:								
Project No	Conservation Project (name & address)	Applicant Name	File Ref	Total Estimated Cost	Provisional Funding Granted	Estimate of Privately Leveraged Amount	Projected Start Date	Projected Finish Date	Scheme Type
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
<u> </u>									
<u> </u>									
<u> </u>									
	Totals:								

Sample Form B (continued)

	Progress of Works										
Po	Report No 1 (30 June) Report No 2 (9 September) Final Report (3 November)								mber)		
Progress of Works	Amount Claimed by Applicant	Amount Leveraged	No. of Days of Employment Created (1 day = 8 hours)	Progress Report	Amount Claimed by Applicant	Amount Leveraged	No. of Days of Employment Created (1 day = 8 hours)	Final Progress Report	Total Amount Claimed by Applicant	Final Amount Leveraged	No. of Days of Employment Created (1 day = 8 hours)

RECOUPMENT CLAIM FORM C

TO BE COMPLETED BY THE LOCAL AUTHORITY

Built Heritage Investment Scheme 2017

IMPORTANT

Please complete one **Form C** for the total amount of recoupment sought from DAHRRGA under the scheme. <u>A fully completed Form B outlining individual project details must accompany</u> <u>this form.</u> A claim may be made at any time before the deadline date of **3 November 2017**. Any funding unclaimed by this date will be **forfeit**.

Form C must be submitted electronically to <u>bhis@ahq.gov.ie</u>. It is recommended that **visual proof** of completed works should accompany this form, e.g. photographs (before and after) together with a short summary report for a representative sample of projects.

Proof of payment of funding to applicant must also accompany this form, e.g. Agresso payment or similar financial system, which clearly shows the final beneficiaries' name, amount paid and date of payment.

1. Claim Details

Local authority name:		BHIS Ref No.
Local authority tax reference number:		Date:
Total allocation from DAHG to local authority:	€	
Total amount paid out by local authority to all applicants:	€	
Total amount leveraged by private funds	€	= % of overall expenditure
Total Number of overall days of employment		
Recoupment sought:	€	
Savings: (if any)	€	

2. Declaration by Local Authority

I certify that the data supplied in respect of projects outline in **Form B** is accurate, that the projects have been inspected by the local authority and comply with the terms and conditions for payment under Circular BHIS17/1 and that the funding allocated to these projects has been already paid to the successful applicant by the local authority.

	Claim prepared by*	Claim verified by**
Name (Block Capitals):		
Position:		
Telephone:		
Email Address:		
Signature:		
Date:		

* Claim must be prepared by the Architectural Conservation Officer or equivalent ** Claim must be verified by County/City Manager or Director of Services

Please return completed **Form C** to <u>bhis@ahg.gov.ie</u> Please contact tel. 01 888 2465 or <u>bhis@ahg.gov.ie</u> if you have any queries.

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