

Sligo County Council Housing Telephone: 071 9111111 Housing Office, County Hall, Riverside, Sligo

e-mail housing@sligococo.ie

## Application for Permission to Transfer to Alternative Accommodation Rental Accommodation Scheme (RAS) Tenant

## Please read the following notes carefully before completing this application form.

As you are a RAS tenant you may apply for a transfer, in very limited circumstances, to alternative accommodation. **Transfers are facilitated in accordance with the Sligo County Council's Allocation Scheme.** 

## Transfers to alternative accommodation may be considered on the following grounds only;

- **Overcrowding** Section 63 of the Housing Act, 1966 (will be subject to technical inspection to verify this).
- **Medical** e.g. Special adaptations to dwelling / ground floor accommodation required to meet a housing need (<u>must\_be accompanied by Occupational Therapists Report, Consultant's letter and /or relevant documentation</u>).
- **Downsizing** Considered as part of the Councils' policies on management of housing stock and or demand for social housing in particular areas. Consideration will be given to the demand for the property, were it be vacated.

## In addition to the above grounds, tenants must also fulfil the following criteria;

- > Held a tenancy at current address for at least two years
- > Have a clear rent account for at least twelve (12) months prior to application
- > Kept current dwelling in a satisfactory condition (*will be subject to property condition inspection*)
- > Complied with all conditions of Tenancy Agreement
- > Have no record of anti-social behaviour (*will be subject to verification with Housing Investigations Officer*)

## PLEASE ANSWER ALL QUESTIONS IN FULL:

(1)Name (Tenant):

(2 Name (Joint Tenant):

Address:

E-mail Address

1

(1) \_\_\_\_\_ (2) \_\_\_\_\_

Contact Phone Numbers: (1)\_\_\_\_\_\_ (2) \_\_\_\_\_\_ (2) \_\_\_\_\_\_

COMHAIRLE CHONTAE SHLIGIGH SLIGO COUNTY COUNCIL Sligo County Council Housing Telephone: 071 911111 Housing Office, County Hall, Riverside, Sligo www.sligococo.ie Application for Permission to Transfer to Alternative Accommodation Rental Accommodation Scheme (RAS) Tenant			
Please state the ground(s) under which you are applying for a transfer by ticking the relevant box			
(A) Overcrowding (B) Medical (C) Downsizing			
If applying on medical grounds, please submit a letter from your Consultant / Occupational Therapist.			
An Occupational Therapist's report should detail what adaptations (if any) are necessary to be carried out on any property specific to your accommodation requirements. For children aged 5 and under, please confirm in writing that an Assessment of Need, consistent with Part 2 of the Disability Act, 2005, has been carried out by the HSE and submit relevant details thereof relating to the housing element of the Assessment of Need report.			
A Consultant's letter should detail any medical condition and as to how it impacts upon your housing need.			
Length of Tenancy at current address:YearsYearsMonths			
Number of bedrooms in your property: Number of Bedrooms Required			
Condition of Property:			

\* An inspection of your property maybe be carried out prior to approval of any transfer.

## Please list all current occupants of your dwelling hereunder:

Name	SEX (M/F)	Relationship to Tenant	Date of Birth	PPSN	Occupation	Weekly Income



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Do you have a clear rent account? Y/N \_\_\_\_\_ Weekly Rent Amount? € \_\_\_\_\_

All occupants over age 18 must sign and submit a 'Declaration Form– Access to Information' (unless previously submitted) to this office. A Declaration Form – Access to Information form is attached to this application form and additional forms can be accessed via the link below or by requesting one from this office 071 911 1221.

https://www.sligococo.ie/housing/Accommodation/CouncilHousing/CouncilHousingApplicationForms/

Have you or any member of your household been involved in anti-social behaviour? Yes 📃 No

If yes, Please give details\_\_\_\_\_

Please provide any other information you think is relevant to your application hereunder:

## Please state your preferred area(s) of choice for a transfer?

See list of locations overleaf and select from: Areas of Choice A - F for Sligo Electoral area (urban), or locations listed for Sligo Electoral area (Rural), or Ballymote-Tobercurry Electoral area.

Area(s) of Choice:	1
	2
	3

# ONLY COMPLETE AND VALID APPLICATIONS WILL BE ACCEPTED; have you enclosed documentation to support your transfer application? Y/N \_\_\_\_\_

E.g. Occupational Therapist Report, Consultant's Letters, other relevant documentation, etc.



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DECLARATION

I / We the undersigned declare that the foregoing information is correct and wish to apply to Sligo County Council for a transfer to alternative accommodation.

I/ We the undersigned declare that the above named household members are normally resident at this address listed above.

I/ We the undersigned authorise Sligo County Council to make whatever enquiries it considers necessary to verify details.

Signed (1) Tenant \_\_\_\_\_\_(2) Joint Tenant \_\_\_\_\_\_(2) Joint Tenant \_\_\_\_\_\_(2) Joint Tenant \_\_\_\_\_\_

Date\_\_\_\_

Date:

'Sligo County Council is compliant with Data Protection Legislation including the provisions of the Data Protection Act 2018 and GDPR. To access Sligo County Council's Privacy Statement, please click the following link

http://www.sligococo.ie/media/SligoCountyCouncil2015/Policies/Downloads/Data%20Privacy%20Statemen t%20Sligo%20Co%20%20Council.pdf

## **INFORMATION - AREA(S) OF CHOICE**

- Up to three areas are permitted to be specified at any given time from the list of areas in the Sligo Electoral Area (Urban), Sligo Electoral Area (Rural) & the Ballymote - Tobercurry Electoral Area. Areas are NOT ranked in priority; you must specify areas that you would be willing to accept an offer of accommodation.
- For Sligo Electoral area (Urban), select between Areas A F (It is not possible to select individual housing • estates), you will be considered for all estates listed within the area specified.
- For Sligo Electoral area (Rural) or Ballymote Tobercurry Electoral area, please select location as specified • on list. (It is not possible to select individual Housing Estates).



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## SLIGO ELECTORAL AREA (URBAN)

Areas	Houses in the General Areas of
A	Abbey Court, Abbey St. Lower, Carroll Drive, Chapel Hill, City Gate, Collery Drive, Cranmore Drive, Cranmore Villas, Cranmore Place, Devins Drive, Garavogue Villas, Geldof Drive, Hazel View Tce, Joe McDonnell Drive, John Fallon Drive, Langan Drive, McNeill Drive, Pilkington Tce, St Annes, St Asicus Tce, St Brigids, St Joachims Tce., Riverview Lodge, Yeats Drive.
В	Cairns Drive, Crozon Crescent, Crozon Downs, Crozon Park, Fatima Ave, Greenfort, Hawthorns, Heatherview, Innisfree Court, Mailcoach Road, St Josephs, Summerhill Village, Temple Street, Woodtown Lodge.
С	Benbulben Tce, Cartron Heights, Cartron Point, Park, Sea Road Apartments, Seafield Avenue, St Johns Tce, St Edwards Tce, Sea View Park.
D	Ashbury Lawns, Ballinode, Beechwood Court, Brookfield, Cartron Estate, Church View Crescent, City View, Dartry View, Elm Gardens, Glenard, Glencarrig, Holborn Street, Molloway Place, Mulberry Park, Rathbraughan Park, Shannon Eighter, Slieve Mor, Stephen McDonagh Place, The Woodlands, Yeats Heights,
E	Ardee Tce, Ard na Veigh, Ashgrove, Beechlawn, Church Hill, Hazelgrove, Jinks Ave, Maugheraboy Estate, Oak Park, Oakfield Crescent, Oakfield Park, Nazareth House, Treacy Ave, Willow Park.
F	Caltragh Crescent, Caltragh Heights, Knocknaganny, Rusheen Ard.

#### **Sligo Electoral Area (Rural)**

Ballinfull	Carney	Grange	
Ballintogher	Carraroe	Rosses Point	
Ballisodare	Cliffoney	Strandhill	
	Collooney		

#### Ballymote-Tobercurry Electoral Area

Aclare	Coolaney	Gurteen
Ballinacarrow	Culfadda	Keash
Ballinafad	Dromore West	Riverstown
Ballymote	Easkey	Monasteraden
Bunninadden	Enniscrone	Skreen
Cloonacool	Geevagh	Tubbercurry

For official use only
iHouse Ref:



Sligo County Council Housing Tel: 071 911-1111

## ACCESS TO INFORMATION

I/We hereby authorise Sligo County Council to have access to, share and process all data, including sensitive data, in relation to myself/ourselves and/or occupants or prospective occupants of my/our household, which may be recorded or held by another Housing Authority, Statutory and/or Voluntary Bodies, The Criminal Assets Bureau, An Garda Síochána, General Practitioners/Consultants, the Health Service Executive [HSE], Túsla, Department of Employment Affairs & Social Protection, current/previous Landlords, Approved Housing Body or other relevant Body for the purposes of preventing or detecting fraud and in carrying out its functions under the Housing and other relevant Acts.

The Housing Authority may also process this data for research purposes including the forward planning and the assessment of housing needs in conjunction with the Department of Housing, Planning & Local Government.

Signature of Applicant:	Signature of Joint Applicant: (where relevant)	
Print Name: _	Print Name:	
Date: _	/ Date:	
For Official Use only		
Signature of Housing St	taff Member	
Date:		