



COMHAIRLE CHONTAE SHLIGIGH
SLIGO COUNTY COUNCIL

Sligo County Council Housing Tel: 071 9111111

Application Form for Permission to Reside in a Council Owned /Leased Property & Inclusion on the Household Rent Account

Please read carefully and answer all questions. The application form must be signed.

Where a person is seeking permission to reside in a Council owned /leased property and inclusion on a rent account the following will apply:

1. **The Applicant** (person wishing to reside in a Council property) must complete **Part 1** of the application form. The **Tenant** must complete **Part 2** of the application form.
2. The written approval of the existing tenant(s) must be given. (Please note that the Tenant(s) may be held responsible for the actions of any member of the household which may result in a termination of tenancy).
3. The property must be suitable to meet the housing needs of the household. In cases where the inclusion of a person (s) may lead to conditions of overcrowding within the property, the Council may decide to refuse the application.
4. The Council will examine each application in accordance with the Council's current Allocation Scheme and the decision of the Council will be confirmed in writing to the tenant(s).
5. The Rent Account of the tenant(s) must be assessed up to date and be clear of any arrears. **If you have rent arrears, please arrange to pay them.**
6. **If your application is successful, a review of your household rent will be carried due to the change in your household circumstances.** Please note that any person included on your rent assessment will not be removed from the assessment unless and until satisfactory documentary evidence is provided.
7. The granting of permission to a tenant(s) to have the proposed occupant reside with the tenant does not confer an automatic right on the proposed occupant to succeed to the tenancy of the dwelling and confers no entitlement whatsoever on the proposed occupant to any interest in the dwelling. Upon the tenant(s) ceasing to hold the tenancy wither through surrender, termination or otherwise, the approved occupant will be required to vacate the dwelling.
8. Sligo County Council may refuse to permit a person, or defer permitting a person, to take up or resume residence or enter, or to be in a dwelling where the person is or has been engaged in anti-social behaviour or that such permission would not be in the interest of good estate management, or the tenant of the dwelling or the person concerned fails to provide information and which the Council considers necessary in connection with deciding whether to give, refuse or defer such permission.

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 follow the following link:

https://www.sligococo.ie/gdpr/DataPrivacyStatement_Housing.pdf



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Housing Office, County Hall, Riverside, Sligo

Checklist of documentation to be included with your application form

Please ensure that Parts 1 & 2 of the application form are fully completed and signed.

Please ensure that you submit the following documentation if it is relevant in your case:

1. Birth Certificate for Applicant (s) ☐ Yes
2. Confirmation of Permanent Residency Status ☐ Yes ☐ N/a
(It is necessary to submit copy of letter from the Department of Justice, it is not adequate to present Stamp 4 card only)
3. Copy of Marriage Certificate (where relevant) ☐ Yes ☐ N/a
4. Copy of Separation or Divorce Agreement (where relevant) ☐ Yes ☐ N/a
5. Evidence of Income for both Applicant & Tenant & all persons residing in the dwelling ☐ Yes
(Please submit 2 recent consecutive payslips or Receipts / letter from Department of Employment Affairs & Social Protection)
6. Proof of present address of applicant ☐ Yes
(i.e. utility bill/bank statement/tenancy agreement etc addressed to the applicant at their current address)
7. Photo I.D. e.g. copy of passport/driving licence of applicant ☐ Yes
8. Interview Declaration – Access to Information Form must be signed in all cases in respect all applicants over the age of 18 years. ☐ Yes
9. Medical report or other documentation, where relevant, regarding your medical, welfare or compassionate need. ☐ Yes ☐ N/a

You may be asked for further documentation or clarification when processing your application.



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on Household Rent Account**

PART 1 – FOR COMPLETION BY APPLICANT

(The applicant is the person seeking permission from the Council to reside in a Council property)

	Applicant Details
Name Passport Size Photograph(s) must be attached	
Current Address	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px;"></div>
Contact Phone No.	
PPSN	
Date of Birth Please enclose your Birth Certificate	
Address of Council House in which you wish to reside?	<div style="border-bottom: 1px solid black; height: 20px;"></div>
Name of Tenant(s) at this Property?	
What is your relationship to above named tenant(s)?	
Why do you wish to live in this house?	<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 20px;"></div>
Do you intend to occupy this property as your normal place of residence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
When do you intend to take up occupation in the Council House?	
If you are already residing in the Council House, please provide the date when you moved in	

What is your Marital Status? If you are married, please provide a copy of your marriage Certificate; if you are separated or divorced, please provide a copy of your separation or divorce agreement	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Co-habiting <input type="checkbox"/> Separated / Divorced <input type="checkbox"/> Other – please specify: _____			
What is your Citizenship Status? Non-EU Citizens must provide a copy of the letter granting residency	<input type="checkbox"/> Irish Citizen <input type="checkbox"/> EU Citizen <input type="checkbox"/> Non-EU Citizen			
Please indicate your employment status (Please tick the box) Please note that you must provide up to date evidence of your income: 3 Recent consecutive Payslips / Social Welfare Receipt/Bank statement etc	<input type="checkbox"/> Employed (full or part time) <input type="checkbox"/> Employed in back to work/FAS scheme <input type="checkbox"/> Self-Employed <input type="checkbox"/> Lone Parent / Unemployed (and receiving Social Welfare) <input type="checkbox"/> Pensioner/Retired <input type="checkbox"/> Student <input type="checkbox"/> Other, Please specify _____			
Have you applied for housing with a local authority? Sligo County Council: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide Application Ref No: _____ Other Local Authority: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please specify where: _____				
Please state the name, date of birth & PPS Number of any other applicant (s) you wish to include in this application, their relationship to you & their weekly income if any.				
Name	Date of Birth	PPSN	Relation to Applicant	Income per week €
Address	Owned	Rented	Dates at Address	Reason for Leaving
_____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	From	
			To	

	<input type="checkbox"/>	<input type="checkbox"/>	From	
			To	
	<input type="checkbox"/>	<input type="checkbox"/>	From	
			To	

Did you ever live in Local Authority Accommodation in Ireland or the UK? Yes: No:

If yes, please state address: _____

Period of tenancy: _____

Reason for leaving: _____

Do you presently own any property (whether purchased or inherited) in Ireland or elsewhere i.e. house, land etc.?

☐ Yes ☐ No If yes, please give details: _____

Have you ever owned any property (whether purchased or inherited) in Ireland or elsewhere i.e. house, land etc.?

☐ Yes ☐ No If yes, and you no longer own this property, please give details:

Can you provide for your own accommodation needs from your own resources? ☐ Yes ☐ No

If yes, Please provide details: _____

Other Information

Do you, or any of the other persons listed on this application form, have any criminal convictions or any charges pending?

☐ Yes

☐ No

If yes, please give name of each person and details of charges:

Is there any other information you wish to give which is relevant to your application for Permission to Reside / Inclusion on the Household Rent Account?

I hereby declare that the information supplied on this application form is correct and I grant permission to Sligo County Council to carry out any checks necessary in the processing of this application. (Attached interview declaration form must be signed and attached to this application)

I understand that permission to reside at this Council house or inclusion on the rent account does not in any way give me an automatic right to succeed to the tenancy and confers no entitlement or interest of the dwelling. I understand and acknowledge that when the tenant ceases to hold the tenancy either through surrender, termination or otherwise, I will be required to vacate the dwelling.

Signature of Applicant: _____ **Date:** _____



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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: _____

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Signature of Housing Staff Member _____

Date: _____

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PART 2 – FOR COMPLETION BY TENANT(S) OF COUNCIL PROPERTY

Tenant's Name: _____ Contact Number _____

Email: _____

Joint Tenant's Name: _____ Contact Number _____

I/We hereby request permission for: _____
(insert name of applicant)

to reside with us at: _____
(insert address of property).

Please state number of bedrooms in property: _____

Tenant's Current Weekly Income: _____
(Documentary evidence of income must be provided)

Joint Tenant's Current Weekly Income: _____
(Documentary evidence of income must be provided)

Please state the name, date of birth & PPS Number of all other household members currently registered as residing at this property. Documentary evidence of all sources of their income must also be provided.

Name	Date of Birth	PPSN	Relation to Applicant	Income per week €

What is your reason for this application? _____

Do you have any medical, welfare or compassionate needs that the Council should consider as part of this application? If yes, please specify and submit supporting documentation.

Do you need full time care to enable you to continue to reside in your dwelling? If yes, please provide details and submit medical evidence to support this.

I/We acknowledge that if the applicant named above is granted permission to reside in this property that their income from Employment and/or Social Welfare (if any) will be taken into account in the calculation of my/our weekly rent payable in relation to this property.

I/We further acknowledge that if the applicant named above is granted permission to reside in this property that it will be subject to the applicant complying with the tenancy conditions as signed for by me/us the tenant (s).

I/We, being the tenant(s) of the property referred to above, hereby agree to the inclusion of _____ on my/our rent account subject to the approval of Sligo County Council and in accordance with the current Allocation Scheme and Differential Rent Scheme.

Signed: _____ **(Tenant)**

Date: _____

Signed: _____ **(Joint Tenant)**

Date: _____