



## COMHAIRLE CONTAE SHLIGIGH SLIGO COUNTY COUNCIL

Sligo County Council Housing Tel: 071 911 1111

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

Please read carefully and answer all relevant 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 **Tenant** must complete Part 2 of the application form. **The Applicant (person wishing to reside in a Council property) must complete Part 1 of the application form.**
2. The written approval of the **existing tenant(s)** must be given. (Please note 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 and the decision of the Council will be confirmed in writing to the current tenant(s).
5. The Rent Account of the tenant(s) must be assessed up to date and be clear of any arrears. 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.
6. Permission to reside in a council owned property or inclusion on a rent account does not in any way give the applicant the right to succeed to the tenancy of the dwelling.

**Note: The acceptance of this form by Sligo County Council for consideration does not in any way imply that consent has been granted to the applicant to reside in this dwelling. Approval or refusal to reside will be given in writing to the Tenant(s).**



**COMHAIRLE CHONTAE SHLIGIGH**  
**SLIGO COUNTY COUNCIL**

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

## Checklist of information to be included with your application

**Please ensure that you fully complete and sign the application form.**

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

1. Birth Certificate for person listed on application.  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 of applicant  Yes  
Please submit 3 recent consecutive payslips or receipts/letter from Social Welfare or bank statement with your name & address etc
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. i.e. copy of passport/driving licence of applicant  Yes  N/a
8. Form must be signed by Inspector of Taxes for applicant.  Yes
9. Interview Declaration – Access to Information Form must be signed in all cases in respect of all applicants over the age of 18 years.



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**Application for Permission to Reside in a Council Owned /Leased  
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**PART 1 – FOR COMPLETION BY APPLICANT**

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

<b>Applicant Details</b>	
Name Passport Size Photograph(s) must be attached	
Current Address	<hr/> <hr/> <hr/>
Contact Phone No.	
PPSN	
Date of Birth Please enclose your Birth Certificate	
Address of Council House in which you wish to reside?	<hr/>
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?	<hr/> <hr/>
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	

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

**Please give all of the addresses at which you have lived in the last five years**

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

Were you ever housed by Sligo County Council?

Yes:  No:

If yes, please state address: \_\_\_\_\_

Period of tenancy: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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, please give 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:

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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?

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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 or inclusion on the rent account does not in any way give me the right to succeed to the tenancy of the dwelling.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TO BE COMPLETED BY APPLICANT**

**Applicant:**

SURNAME: \_\_\_\_\_

FIRST NAME(S): \_\_\_\_\_

P.P.S. NO.: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

**TO BE COMPLETED BY INSPECTOR OF TAXES**

**I HEREBY CERTIFY that in accordance with my records and to the best of my knowledge, the above named person(s) has/have not previously claimed income tax relief in respect of interest paid on money borrowed to purchase or build a dwelling.**

**Official Stamp:**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



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**INTERVIEW DECLARATION – ACCESS TO INFORMATION**

I \_\_\_\_\_, hereby authorise Sligo County Council to have access to all information relating to myself, my partner/spouse and my family, which maybe recorded or held by another Housing Authority, Statutory and Voluntary bodies, The Criminal Assets Bureau, An Garda Síochána, General Practitioners/Consultants, the Health Service [HSE], Department of Social Protection, Previous Landlords or an approved housing body [in relation to occupants or prospective occupants of], or applicants for, Local Authority housing, and any other person the Authority considers may be engaged in anti-social behaviour.

I am in agreement for these bodies to disclose information relating to myself, my partner and my family to Sligo County Council in its assessment of my Housing Application / Transfer Application/ Application for Permission to Reside in a Local Authority Dwelling/ Succession of Tenancy Application.

The Housing Authority will use the data which you have supplied to assess and administer your Housing Application. Data may be shared with or [obtained] from other public bodies for the purposes of either [administering your housing application] or preventing or detecting fraud. The Housing Authority may also process this data for research purposes including the forward planning in the assessment of housing needs in conjunction with the Department of the Environment, Community & Local Government.

Applicant signature:

\_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Housing - Signature

\_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_



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

Tenant's Name: \_\_\_\_\_

Joint Tenant's Name: \_\_\_\_\_

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 must be provided)

Joint Tenant's Current Weekly Income: \_\_\_\_\_  
(Documentary evidence must be provided)

**Please state the name, date of birth & PPS Number of all other household members currently 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 €

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 standard 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 Differential Rent Scheme.

**Signed:** \_\_\_\_\_ **(Tenant)**    **Date:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **(Joint Tenant)** **Date:** \_\_\_\_\_