**COMHAIRLE CONTAE FHINE GALL**

**FINGAL COUNTY COUNCIL**

**PERMISSION TO RESIDE APPLICATION FORM**

**Application to be completed & returned to:**

**FOR OFFICE USE ONLY:**

RECEIVED BY:

(BLOCK CAPITALS)

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

PTR NO. \_\_\_\_\_\_\_\_\_\_\_\_\_

**Fingal County Council**

**PTR Section**

**Estate Management**

**Housing Department**

**Grove Road**

**Blanchardstown**

**Dublin 15**

**IMPORTANT NOTES:**

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

1. Please read the form carefully and answer all questions fully, ensuring all necessary documentation as listed below is attached.
2. **Please note that permission to reside should be applied for prior to taking up residency in the property.** Also note permission to reside does **not** entitle the said person/persons to succeed to the tenancy.
3. The applicant(s) seeking permission to reside is/are **not** authorised to occupy the Council property until consent is received in writing from Fingal County Council. Failure to comply will result in the application being refused and the applicant(s) being required to vacate the property immediately. A Tenancy Alert or Tenancy Warning may be served on the tenant(s) for breach of the tenancy agreement.
4. The Council wish to advise that both the applicant(s)and the tenant(s) will be required to meet with Housing staff to discuss the implications of a successful application to reside in a Council dwelling and both parties should be aware that this in no way creates a tenancy or affords an applicant a right to succeed to a tenancy. At this meeting Council staff will be available to answer any queries you may have.
5. Permission to reside in Fingal County Council dwellings will be refused if the person(s) for whom the permission is sought is/are or was previously involved in Anti-Social Behaviour or if the presence of that person(s) would cause overcrowding.
6. The Council will obtain a report from An Garda Síochána or any other approved body in accordance with Section 15 of the Housing Miscellaneous Provisions Act 1997 and may obtain further reports if required. The applicant(s) herby consent to same.
7. The written approval of the existing Tenant(s) must be given. (Please note the Tenant(s) may be held responsible for any breaches of the Tenancy Agreement by any member of the household which may result in a termination of tenancy).
8. 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.
9. The Council will examine each application and the decision of the Council will be confirmed in writing to the current tenant(s).
10. Please note that any person(s) included on the rent assessment will **not** be removed from the assessment unless and until satisfactory documentary evidence of a new address for the person(s) is provided.
11. The Rent Account of the Tenant(s) must be assessed up to date and be clear of any arrears. Permission to reside in a Fingal County Council dwelling will be refused if the tenancy is in rent arrears with the only possible exception being cases where a rent payment arrangement is in place and being adhered to.
12. Permission to reside in a Council owned property or inclusion on a rent account does not in any way give the applicant(s) the right to succeed to the tenancy of the dwelling.
13. Required documentation below is for **applicant(s) only**. Failure to submit **ALL** required documentation with your application or an incomplete application form will result in the application being returned by the Council and your application form will not be considered until such a time as the application and all required documentation is received by the Council.
14. The permission if granted is not a Tenancy Agreement, nor does it alter and/or otherwise change the existing Tenancy Agreement or the obligations on the Council Tenant(s) under same in respect of the Council’s Property and does not confer any rights to the applicant in relation to the property.

**Note: The acceptance of this form by Fingal 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).**

|  |  |
| --- | --- |
| **DOCUMENTS TO BE SUBMITTED BY APPLICANT(S) ONLY** | **Received**  **(Please Tick)** |
| 1. Birth Certificate for all persons for whom permission is sought |  |
| 1. PPS number for all persons whom permission is sought. |  |
| 1. Photographic identification for all persons for whom permission is sought e.g., copy of passport page with photograph or copy of Irish Driving Licence. |  |
| 1. Full details of all income for all persons for whom permission is sought (P60, Income Tax returns or letter from Social Welfare or Employment Exchange), the income details should cover the previous 12-month period. |  |
| 1. Completed Tax form (attached herewith) for all persons over 18 years of age and stamped by Inspector of Taxes, Office of the Revenue Commissioners. |  |
| 1. Proof of previous address(es) e.g., gas or electricity bill, letter from previous Landlord for all persons for whom permission is sought. |  |
| 1. Proof of citizenship or leave to remain in Ireland i.e., Letter from the Department of Justice outlining the terms and conditions of your stay in Ireland. Where applicable evidence of having a stamp 4 Immigration Stamp Endorsement on a passport for a period of 5 years should be provided plus GNIB card for all persons for whom permission is sought. |  |
| 1. Marriage Certificate, Separation/Divorce Agreement or Court Order   (if applicable). |  |
| 1. If you are residing in a RAS dwelling proof of the Landlord’s consent is required. |  |

**DETAILS OF THE APPLICANT(S)**

*Attention is directed to the provisions of Section 4, 61 and 64 of the Housing Act, 1966. Please note that under the provisions of the foregoing sections, any person who is required under these sections to state any matter or thing and either fails to state matter or thing within the period specified under this section, or when stating such matter or thing, make a statement in writing which, to his/her knowledge, is false or misleading in a material respect shall be guilty of an offence under this section and shall be liable on summary conviction thereof to a fine. An applicant may be excluded from consideration if he/she supplies false information or withholds relevant information.*

1. Full Name of Applicant(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Current Address(es): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Current Phone Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Current Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Marital Status Single

Married

Co-Habiting

Separated

Divorced

Other – Please Specify

**If you are married, please provide your marriage certificate and if you are separated or divorced, please provide agreements or Court orders.**

1. Please indicate your Status:
   * + 1. Employed (full or part time)
       2. Social Welfare
       3. Self- employed
       4. Pensioner/Retired
       5. Student
       6. Other
2. What is your Citizen Status?
   * + 1. Irish Citizen
       2. EU Citizen
       3. Non- EU Citizen
3. Approximate date(s) and details of any previous applications(s) for housing to:

(a) Fingal County Council \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(b) Any other Local Authority \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address from which last application was made (if different from present address)

1. Further details of Applicant(s)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Relationship to Tenant | Date of Birth | PPS No. | Total Income | Source of Income |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. Have you, or any other person listed on this application form, ever been investigated, or convicted in respect of matters relating to anti-social behaviour, drug, or public order offences?

Yes No

1. Do you, or any other person listed on this application form, currently have charges pending in respect of matters relating to anti-social behaviour, drug, or public order offences?

Yes No

1. Were you, or any other person listed on this application form ever a tenant/tenant purchaser/prospective joint tenant/purchaser of this Council or any other Local Authority? If so, give details including addresses and dates:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you, or any other person listed on this application form the owner of any property in Ireland or elsewhere (whether purchased or inherited)?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you or any other person listed on this application form, at present negotiating the purchase of any property (e.g., through Building Society or Bank etc.)? - If so, please give details:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please state all places of residence and exact periods of time spent in chronological order at each address for the last five years:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | **Applicant Name** | **Property Address** | **Dates you resided at this Property** | **Reason for leaving this property** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |
|  |

1. Reasons why you are requesting permission to reside in this property.

*Please note that information contained in this form may be disclosed to Health Boards and Voluntary Housing bodies within the terms of Section 15 of the Housing (Miscellaneous Provisions) Act, 1997.*

**PROPERTY DETAILS**

1. Name of Tenant(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Address of Council Dwelling: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No. of Bedrooms in dwelling: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rent Account No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of dwelling (please tick): Council Long Term Lease RAS

1. Details of Household Composition:

**Current Household Composition**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Tenant(s) | Date of Birth | PPS No. | Source of Income | Amount |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Other members of Household already residing in the property | Relationship  To Tenant | Date of Birth | PPS No. | Source of  Income | Amount |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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*I CERTIFY THAT I HAVE READ THE APPLICATION FORM AND THAT ALL QUESTIONS HAVE BEEN ANSWERED FULLY AND THAT THE PARTICULARS GIVEN ARE TRUE AND THAT THE DOCUMENTS SOUGHT ARE SUPPLIED HEREWITH.*

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF APPLICANT(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/WE CONFIRM THAT I/WE AM/ARE IN AGREEMENT TO THE ABOVE PERSON(S) APPLYING FOR PERMISSION TO RESIDE AT

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF TENANT(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**N.B**. I/We hereby undertake to inform the Council of any changes which may occur in my/our income since the date of my application. Failure to inform the Council of any changes may exclude me from being considered for permission to reside.

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF APPLICANT(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION – ACCESS TO INFORMATION**

I/We \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby authorise Fingal 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, Office of the Revenue Commissioners, 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/We agree for these bodies to disclose information relating to myself, my partner and my family to Fingal County Council in its assessment of my Permission to Reside in a Local Authority Dwelling.

The Housing Authority will use the data which you have supplied to assess and administer your Permission to Reside 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, Climate & Communications.

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE OF APPLICANT(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Collection and Use of Personal Data:**

All data supplied by you when completing this form (including any personal data you submit) will be used for the purposes of assessing and administering your application for Permission to Reside. The law allows this local authority in certain circumstances to share your data with other public bodies. For example, we may share your data with the Central Statistics Office under the Statistics Act 1993. The data supplied by you when completing this application may be shared with the Local Government Management Agency (LGMA) and The Housing Agency to fulfill a statutory requirement to provide an annual Summary of Social Housing Assessments, including the production at a national level of statistical reports that inform policy and future planning in terms of the national housing need.

In carrying out its functions under the Housing Acts of 1966 – 2014 (as amended and extended), the local authority may request and obtain information from other organisations. These include another local authority, the Criminal Assets Bureau, An Garda Síochána, the Department of Social Protection, the Health Service Executive (HSE), the Revenue Commissioners or an Approved Housing Body in relation to current or prospective occupants of local authority housing. Your data may also be shared with other public bodies in accordance with our obligation to prevent and detect fraud.

Your rights as a data subject under the General Data Protection Regulation (GDPR) apply in full and are clearly set out in Fingal County Council’s Privacy Statement. Copy of this is available on [www.fingal.ie](http://www.fingal.ie). If you have any questions about your rights under GDPR, you can contact Fingal County Council, Data Protection Officer, or you may also contact the Data Protection Commission (DPC).

For information, please contact the Data Protection Officer, Tel: 01 8905000 or Email: [Data.Officer@fingal.ie](mailto:Data.Officer@fingal.ie)

IMPORTANT

THIS FORM MUST BE COMPLETED BY YOU AND CERTIFIED BY THE INSPECTOR OF

TAXES & RETURNED WITH YOUR COMPLETED PERMISSION TO RESIDE APPLICATION FORM FORM FORM FORMAAAAPPLICATION

1. **TO BE COMPLETED BY APPLICANT**: PLEASE USE BLOCK CAPITAL LETTERS
   1. YOUR FULL NAME:
   2. PREVIOUS NAME (IF ANY)
   3. PRESENT ADDRESS:
   4. PREVIOUS ADDRESS (IF ANY)
   5. INCOME TAX REFERENCE NUMBER (PPS NUMBER)

**TO BE COMPLETED BY INSPECTOR OF TAXES**

I hereby certify, in accordance with my records and to the best of my knowledge, that the above-named person has not previously claimed income tax relief in respect of interest paid on money borrowed to purchase/build a dwelling.

DATE: 20 SIGNED: OFFICIAL STAMP

1. **TO BE COMPLETED BY PARTNER/SPOUSE** 
   1. YOUR FULL NAME:
   2. PREVIOUS NAME (IF ANY)
   3. PRESENT ADDRESS:
   4. PREVIOUS ADDRESS (IF ANY) \_\_\_\_\_\_\_\_\_
   5. INCOME TAX REFERENCE NUMBER (PPS NUMBER)

**TO BE COMPLETED BY INSPECTOR OF TAXES**

I hereby certify, in accordance with my records and to the best of my knowledge that the above-named persons has not previously claimed income tax relief in respect of interest paid on money borrowed to purchase/build a dwelling

DATE: 20 SIGNED: