

APPLICATION FOR SOCIAL HOUSING SUPPORT

Sligo Borough Council

CHECKLIST FOR APPLICANTS

Comhairle Bhuirg Shligigh

APPLICANT (1): _____

Ref. No.: _____

APPLICANT (2) _____

- | | | ✓ / N/A | |
|---|--------------------------|---------|--------------------------|
| | (1) | | (2) |
| 1. Fully Completed Housing Application Form. | <input type="checkbox"/> | | |
| 2. Copy of Passport, driving licence or other documentation which contains a photo of all applicants over 18 years. | <input type="checkbox"/> | | <input type="checkbox"/> |
| 3. Birth Certificate for each person for whom accommodation is sought. | <input type="checkbox"/> | | <input type="checkbox"/> |
| 4. Personal Public Services No's (PPS No's) in respect of all persons, including children, for whom accommodation is sought. PPS No's can be obtained from the Client Identity Services, Dept. of Social & Family Affairs, Social Welfare Services, Shannon Lodge, Carrick-on-Shannon, Co. Leitrim Tel. 1890 927999 | <input type="checkbox"/> | | <input type="checkbox"/> |
| 5. Proof that you live at your current address for both spouse / partner (i.e. gas/electricity bill). | <input type="checkbox"/> | | |
| 6. Copy of all Bank Statements showing Name and Address (<i>within the last 6 months</i>). | <input type="checkbox"/> | | <input type="checkbox"/> |
| 7. If you are not resident in the local authority area, please provide evidence of your connection with the area. | <input type="checkbox"/> | | |
| 8. EVIDENCE OF INCOME: | | | |
| a) Completion of Certificate of Income (for each household member aged 18 years or more). | <input type="checkbox"/> | | <input type="checkbox"/> |
| b) If employed: Please submit a P60 and/or a minimum of 4 out of the last 6 payslips. | <input type="checkbox"/> | | <input type="checkbox"/> |
| c) If self-employed: Please submit a minimum of 2 years accounts with an Auditor's Report or an Auditor's report along with an up-to-date tax balancing statement and Preliminary tax receipt. | <input type="checkbox"/> | | <input type="checkbox"/> |
| d) Declaration of Payments Statement: If in receipt of Social Welfare Income, please submit a "declaration of Payments Statement" from the Dept. of Social Protection of all social benefits and social assistance payments, allowances and pensions that household members are receiving. | <input type="checkbox"/> | | <input type="checkbox"/> |
| 9. Completed Affidavit in respect of property/land for applicants & joint applicants – evidence to be submitted as to how the proceeds from the sale of the land/property were disposed of. | <input type="checkbox"/> | | <input type="checkbox"/> |
| 10. Interview Declaration (to be signed by all parties over 18 years). | <input type="checkbox"/> | | <input type="checkbox"/> |
| 11. Completed HPL1 Form in respect of property ownership stamped at the Tax Office for the applicant or any joint applicants. (<i>Both sides of the form to be completed if an application is in joint names</i>). | <input type="checkbox"/> | | |
| 12. Area of Choice Form – (<i>to be indicated on application form or on change of area of choice form</i>). | <input type="checkbox"/> | | |
| 13. Proof of anyone in full time Education. | <input type="checkbox"/> | | <input type="checkbox"/> |
| 14. Copy of Marriage Cert. (where applicable). | <input type="checkbox"/> | | |
| 15. Persons seeking housing assistance due to medical circumstances must provide a Consultant's letter outlining the condition and as to how it impacts upon their housing needs. | <input type="checkbox"/> | | <input type="checkbox"/> |
| 16. Occupational Therapist's Report in respect of any specific accommodation requirements. | <input type="checkbox"/> | | |
| 17. Copy of Tenancy Agreement and Rent Book or proof of rent payment i.e. bank lodgement slips or receipts from landlord (if in private rented accommodation). | <input type="checkbox"/> | | |
| 18. Proof of Rent Allowance (<i>if applicable</i>). | <input type="checkbox"/> | | |
| 19. Evidence of clear rent account in respect of current tenancy with Voluntary Housing Bodies or other Local Authorities. | <input type="checkbox"/> | | |

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✓ / N/A

(1) (2)

- | | | |
|---|--------------------------|--------------------------|
| 20. If you or any member of your household was previously a local authority tenant, please provide a letter from the local authority where you or the household member resided setting out details in relation to the previous tenancy. This letter should include term of tenancy, reason for leaving, evidence of a clear rent account etc. | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Evidence of a clear rent account in respect of previous tenancies/Letter from landlord. | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Copy of any court order to leave your present accommodation. | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. In cases where the applicant claims that it is no longer possible to live in the family home, it will be necessary for persons to submit proof that they are homeless i.e. residing at a homeless hostel. | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Copy of Separation/Divorce agreement for applicant. | <input type="checkbox"/> | <input type="checkbox"/> |
| a) The agreement must identify: <ul style="list-style-type: none"> ▪ The extent of maintenance being received or paid by the applicant. ▪ The circumstances under which the maintenance payments can cease. ▪ That no onerous conditions exist. | | |
| OR | | |
| b) If there is no agreement, a letter from the applicant's solicitor must be included with the application.
The letter should confirm: <ul style="list-style-type: none"> ▪ That there is no formal separation agreement. ▪ That there are no court proceedings pending under the family law legislation. ▪ The position in relation to maintenance and other payments. | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Completed Affidavit in respect of Separation/Maintenance Payments together with evidence of Payments for the previous 12 months etc. | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. (a) Copy of Access/Custodial Order in respect of any children that are to be included in the application but are not currently living with you. | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) If access has been agreed amicably without court involvement, then provide proof of formal access arrangements from the other parent regarding visitation rights. Such documentation should include the other parent's contact details i.e. address, tel. No. etc. | <input type="checkbox"/> | |
| 27. Proof of citizenship or leave to remain in Ireland : | | |
| a) Evidence of having a Stamp 4 Immigration Stamp Endorsement on a passport for a period of 5 years should be provided. | <input type="checkbox"/> | <input type="checkbox"/> |
| 28. Non Irish Nationals must provide written proof : | | |
| a) of previous accommodation in their country of origin or place of residence prior to coming to Ireland. This maybe obtained from the municipal authority of the relevant country. | <input type="checkbox"/> | <input type="checkbox"/> |
| AND | | |
| b) that they do not hold or have held property from the equivalent authority of the country from which they originated or any country which they resided in before coming to Ireland. This may be obtained from the municipal authority of the relevant country. | <input type="checkbox"/> | <input type="checkbox"/> |
| 29. Consent Form (if applicable). | <input type="checkbox"/> | <input type="checkbox"/> |

***Please ensure all documentation submitted is translated to English.**

Please note that a VALID application only will be accepted by Sligo Borough Council and in the event that any of the items listed above which are required in order to ensure that an application is complete are omitted will deem it INVALID therefore, Sligo Borough Council will be returning all documentation to the applicant.

For Official Use Only	
Received By: _____	Updated/Validated by: _____
Date: ____/____/____	Date: ____/____/____