APPLICATION FOR INCLUSION ON RENT

Passport

size

photo

here

please

South Dublin County Council

Rent Section

**Housing Department**

## **County Hall**

### **Tallaght**

## **Dublin 24 Tel: 4149000**

Where a person wishes to be included on a rent account the following will apply:

* The **Tenant** must complete the application form in full **(incomplete forms will be returned)**
* The written approval of the **existing tenant(s)** must be given.

(Please note the **Tenant** may be held responsible for the actions of any member of the household which may result in a termination of tenancy).

* The property must be suitable to meet the housing needs of the household.
* The Council will examine each application and the decision of the Council will be confirmed in writing to the **current tenant(s).**
* **Inclusion on rent account does not automatically entitle succession of tenancy. Succession of tenancy will be in line with South Dublin County Council Allocation Scheme**
* If the applicant is included on your rent and in the future they apply to be included on the rent of another council dwelling, they will not be removed from your rent until the **date they are given approval to move into the other address.**

Note: The acceptance of this form by South Dublin 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.

PLEASE READ THE FOLLOWING CAREFULLY

It is the policy of the Dublin Housing Authorities that applicants who apply to them for housing accommodation temporary or permanent and or who are being considered for an allocation of a tenancy will have their application considered on estate management grounds before an allocation is finally made in accordance with Section 14 (1) and 15 (2) of the Housing (Miscellaneous Provisions) Act, 1997, as set out below.

1. **Section 14** of the Housing (Miscellaneous Provisions) Act 1997, provides that a Housing Authority may refuse to make or defer the making of a letting of a dwelling to a person where:-
2. the Authority considers that the person is or has been engaged in anti-social behaviour\* or that a letting to that person would not be in the interest of good estate management \*\* or,
3. the person fails to provide information relating to persons residing or to reside with that person, which is requested by the Housing Authority and which the Authority considers necessary in connection with an application for letting.
4. **Section 15(2)** of the Housing (Miscellaneous Provisions) Act 1997, also provides that a Housing Authority may request from another Housing Authority, the Criminal Assets Bureau, the Garda Siochana, the Department of Social Welfare, the Health Board or a Voluntary Housing Body, information in relation to any person seeking a house from the Authority or whom the Authority considers may be or may have been engaged in anti-social behaviour and notwithstanding anything contained in and enactment, such other Housing Authority or other Organisation listed above may provide the information to the Housing Authority requesting it.
5. It is also the practice of the Dublin Housing Authority in the interests of good estate management, to engage where appropriate in advance consultations with representative tenants groups regarding prospective allocations in their areas. For the purpose of this consultation the Dublin Housing Authorities will release the name and address of individual housing applicants to representative groups.

\* Anti-social behaviour includes either or both of the following, namely,

1. the manufacture, production, preparation, importation, exportation, sale, supply, possession for the purposes of sale or supply, or distribution of a controlled drug (within the meaning of the Misuse of Drugs Act, 1997 and 1984).
2. Any behaviour which causes or is likely to cause any significant or persistent danger, injury, damage, loss or fear to any person living or working or otherwise lawfully in or in the vicinity of a house provided by a Housing Authority under the Housing Acts, 1966 to 1997, or a housing estate in which the house is situated and, without prejudice to the foregoing, includes violence, threats, intimidation, coercion, harassment or serious obstruction of any person.

\*\* Estate management includes:-

1. the securing or promotion of the interests of any tenants, lessees, owners or occupiers, whether individually or generally, in the enjoyment of any house, building or land provided by a housing authority under the Housing Acts, 1966 to 1997.
2. the avoidance, prevention or abatement of anti-social behaviour in any housing estate in which is situate a house provided by a housing authority under the Housing Acts, 1966 to 1997.

# *To be completed by the tenant(s)*

RENT ACCOUNT NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NUMBER OF BEDROOMS\_\_\_\_\_\_\_\_\_\_\_\_\_HOUSE TYPE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Particulars of all CURRENT members of the household. Please submit income details for all household.

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | DOB | RELATIONSHIP TO TENANT | CURRENT INCOME |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Declaration

I/We being the tenant(s) pf the property referred to above, hereby agree to the inclusion of (**Applicant’s name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**on my/our rent account subject to the approval of South Dublin County Council and in accordance with the Differential Rent Scheme.

I hereby declare that the information supplied on this application form is correct and I grant permission to South Dublin County Council to carry out any checks necessary in the processing of this application.

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

Signature of Tenant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of joint Tenant \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

*TO BE COMPLETED BY APPLICANT*

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Current Address: |  | | |
| Sex M/F |  | | |
| Date of Birth |  | | |
| Nationality |  | | |
| Refugee status (if applicable) |  | | |
| PPS Number |  | | |
| Relationship to tenant |  | | |
| Any other dependents included in application | NAME ……………………………….. DOB…………………..  NAME ………………………………... DOB…………………..  NAME …………………………………DOB………………….. | | |
| Do you expect your stay at this address to be permanent or temporary? Please give approximate length of time if temporary | | Permanent | Temporary |
| Has the Applicant ever been a tenant of South Dublin County Council *or any other Local Authority?* If “yes” please give details: | | If yes, address: | From………….  To……………. |
| Has the Applicant ever owned property? Please give details:  Address: | | From | To |

\*\*\*\*\*All applicants must complete the attached HPL1 form (stamped by Revenue)\*\*\*\*\*\*

Applicant’s Current Income: €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature of Applicant 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature of Applicant 2:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Contact number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

If employed: 2 Current payslips to be submitted and P21 for last year (from Revenue)

If receiving Social Welfare: Confirmation of income to be submitted.

Complete the attached Household Budget Form (signature is required in 2 places )

**HPL1 Form / First Applicant**

THIS FORM MUST BE COMPLETED BY **THE REVENUE COMMISSIONERS** AND RETURNED WITH EVERY APPLICATION

YOUR FULL NAME

(

BLOCK LETTERS)

PREVIOUS NAME

(

IF ANY)

PRESENT ADDRESS

PREVIOUS ADDRESS

(

IF ANY)

PPS NUMBER (PRSI 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 or build a dwelling.

SIGNED

DATE

**OFFICIAL STAMP**

**HPL1 Form / Second Applicant**

THIS FORM MUST BE COMPLETED BY **THE REVENUE COMMISSIONERS** AND RETURNED WITH EVERY APPLICATION

YOUR FULL NAME

(

BLOCK LETTERS)

PREVIOUS NAME

(

IF ANY)

PRESENT ADDRESS

PREVIOUS ADDRESS

(

IF ANY)

PPS NUMBER (PRSI 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 or build a dwelling.        SIGNED DATE    **OFFICIAL STAMP** |

