APPLICATION FORM

FOR

RENTAL

ACCOMMODATION

SCHEME

Please read this form carefully

For help, please contact 0404 20120 (ext 2229 or 2240)

Please note RAS is now a Social Housing Support and if you accept a RAS offer/allocation your housing needs will be considered to be met and you will no longer remain on the main social housing waiting list.
Can I apply?

- To apply for this scheme you must have claimed rent supplement for the last 18 months.
- If you are from outside the European Union, you must have permission to stay in Ireland and have a Stamp 4 card.
- The Rental Accommodation Scheme has a Good Tenant Policy. This means that we would look very carefully at the background and history of anybody applying for the Rental Accommodation Scheme. The details of this policy are given on the last sheet of this form.

How do I apply?

- Please fill out all of this form. If it is not complete, or if questions are not answered honestly, we may decide not to go any further with your application. If you are not sure how to answer any question, or if you are not sure if a question applies to you, please ring 0404 20120 (ext 2354) for help.
- Please make sure PPS numbers (which is a 7 digit number followed by a letter) are given for ALL the people who live with you. These numbers can usually be found on Medical Cards or you can get them from your local Community Welfare Office.
- Please bring this completed form with you to the interview, or forms may be posted to:

  Rental Accommodation Scheme
  Wicklow County Council
  Housing Section
  County Buildings
  Wicklow
  Co Wicklow.

What happens then?

- At the interview you should bring:
  1. A copy of your current lease agreement and rent book
  2. Written evidence of income (for example social welfare receipts, payslips from part-time work or maintenance payments),
  3. Proof of rent allowance
  4. A stamp 4 card for anybody in your family who is from outside the European Union and is over the age of 16.

Please note

RAS is now a Social Housing Support and if you accept a RAS offer/allocation your housing needs will be considered to be met and you will no longer remain on the main social housing waiting list.
All contracts are governed by the Residential Tenancies Act 2004, a copy of which can be found on www.prtb.ie
**Rental Accommodation Scheme**

**WICKLOW COUNTY COUNCIL**

**Interview Questionnaire**

RAS Ref: ________

<table>
<thead>
<tr>
<th>Principal Applicant</th>
<th>Joint Applicant</th>
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<tbody>
<tr>
<td><strong>Name</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Address</strong></td>
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<td><strong>Telephone Number</strong></td>
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<td><strong>Email address</strong></td>
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<tr>
<td><strong>PPSN No.</strong></td>
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<td><strong>Date of Birth</strong></td>
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<tr>
<td><strong>Your Status</strong></td>
<td>Single □ Married □ Widowed □ Separated □ Partner □</td>
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**Nationality:**

For Non-EU Citizens, on what basis they are staying in Ireland.
If your household includes people who are not European Citizens and are over 16 do all of these people have a Stamp 4 card?

- □ Refugee
- □ Leave to Remain

Yes - No

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<th>□ Refugee</th>
<th>□ Leave to Remain</th>
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<tr>
<td>Yes - No</td>
<td>Yes - No</td>
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</table>

**Indicate employment status (Please tick the box):**

- □ Employed (full or part time)
- □ Employed in back to work/FAS scheme
- □ Self-Employed
- □ Unemployed (and receiving Social welfare)
- □ Pensioner/Retired
- □ Lone Parent support
- □ Disability/Invalidity Benefit
- □ Student
- □ □ Other

**Income Amount**

€______________________________  €______________________________
List the name, date of birth & PPS Number, of all household members normally resident with you, and their relationship to the principal applicant & their weekly income.

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
<th>PPSN</th>
<th>Relation to Applicant</th>
<th>Income per week €</th>
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</table>

Name and location of Father/ Mother of Children if appropriate?

_________________________________________________________________________________

☐ Maintenance €____________________  ☐ Contact _______________________

Is the Accommodation Shared? If so by whom?

Current Accommodation: ________________________________________________________________

Do you or other member of your household have Medical or Special Needs

_________________________________________________________________________________

Is the current accommodation suitable to meet these needs?

☐ Yes  ☐ No

If no, please give details:

_________________________________________________________________________________

Name & Address of landlord and contact details

_________________________________________________________________________________

Details of existing property.

_________________________________________________________________________________

Details of Rent:

Are you in receipt of rent supplement for the last 18 months?

☐ Yes  ☐ No (Please provide evidence)

What is the name of your Community Welfare Officer

_________________________________________________________________________________
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>What is the current rent per week/month?</td>
<td>€ ______</td>
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<td>Do you pay your rent weekly or monthly?</td>
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<td>How do you pay the rent to the landlord?</td>
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<tr>
<td>Amount of Rent Supplement per week?</td>
<td>€ ______</td>
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<td>How often are you paid the Rent Supplement?</td>
<td></td>
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<td>What Day of the Week is it paid to you?</td>
<td></td>
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<td>How much do you pay towards the rent each week?</td>
<td>€ ______</td>
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<td>Are you in arrears of rent:</td>
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<tr>
<td>a) Landlord</td>
<td>No</td>
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<tr>
<td>b) Health Services Executive</td>
<td></td>
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<td>c) any lending institution</td>
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<td>If yes, give details:</td>
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<td>Do you have a rent book?</td>
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<td>Did you pay a deposit? If so, how much?</td>
<td>Yes</td>
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<td>Where did deposit come from?</td>
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<td>Did you sign a lease? If so, how long for?</td>
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<td>Whose name are the utility bills in?</td>
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<td>Are any other household costs included in the rental charge i.e. Refuse &amp; Cable?</td>
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<td>Are there pets? If so, please give details</td>
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<td>Is the landlord related to you? If yes, please give details</td>
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<td>Where are you originally from? (Addresses of Past &amp; Present Family Home)</td>
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</table>
Was your family home a local authority tenancy (owned by the local County Council, or Town Council, if yes please give details)

_________________________________________________________________________

_________________________________________________________________________

Have you ever had your own local authority tenancy, If yes give details:

Name of local authority _________________________

Date you left ___ / ___ / ______  Reason you left _________________________

_________________________________________________________________________

Please give details for your current home and previous addresses that you have lived at

<table>
<thead>
<tr>
<th>Address of property:</th>
<th>Dates: From          To</th>
<th>Landlord Details: Name and phone no</th>
<th>Reason for leaving</th>
</tr>
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</table>

Do you wish to stay in your present accommodation?

☐ Yes  ☐ No

If no, why?

_________________________________________________________________________

Have you applied for housing with a local authority? When?

☐ Name of Local Authority _________________________ ☐ Other (please specify)____________________

_________________________________________________________________________

_________________________________________________________________________

Have you or do you presently own property, site or land? If so, where

_________________________________________________________________________

_________________________________________________________________________

Which area of the COUNTY would they prefer to live in?
(Please indicate 1, 2 or 3 in order of preference, where 1 is most preferred area etc)

1. __________________________________________
2. __________________________________________
3. __________________________________________
**Other Information**

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

- ☐ Yes
- ☐ No

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

_____________________________________________________________________________________
_____________________________________________________________________________________

**Was the Differential Rent Scheme explained?**

- ☐ Yes
- ☐ No

**Was the implication of antisocial behaviour explained?**

- ☐ Yes
- ☐ No

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**Collection and Use of Data:**

Wicklow County Council will use the data which you have supplied to assess and administer your interview for accommodation under the Rental Accommodation Scheme. Data may be shared with other public bodies for the purpose of the prevention or detection of fraud. Wicklow County Council may also process this data for research purposes including in forward planning in the assessment of housing needs in conjunction with the Department of the Environment, Heritage & Local Government.

Wicklow County Council may, for the purpose of the Rental Accommodation Scheme, request and obtain information from another Housing Authority, the Criminal Assets Bureau, An Garda Siochana, the Department of Social & Family Affairs, the Health Services Executive or a Voluntary Housing Body approved for Section 6 of the Housing (Miscellaneous Provisions) Act, 1992, in relation to occupants or prospective occupants of, housing under the terms of the Rental Accommodation Scheme.

**Declaration:**

I/We declare that the information and particulars given by me/us during this interview are true and correct, and I/we understand that the provision of any false or misleading statements may lead to this interview being cancelled. Wicklow County Council reserves the right to exclude an applicant from consideration for housing under the Rental Accommodation Scheme if he/she supplies false information or withholds relevant information on this form or at subsequent interviews.

I/we undertake to notify Wicklow County Council immediately should there be any change from the information provided, or in my/our circumstances.

I/We authorise Wicklow County Council to make necessary enquiries either written or otherwise regarding my/our interview to verify information given.

**Signed:**

(Applicant 1) _______________________________ Date:________________________________

(Applicant 2 _______________________________ Date:________________________________

(Local Authority Official ____________________________ Date: ________________________________