

2013 Housing Needs Assessment Form - South Dublin County Council

(Please complete this form in BLOCK CAPITALS)

Name of Applicant: _____ Ref: _____ Phone Number (Main App): _____

Phone Number (Joint App): _____

Address: _____

Email: _____

PLEASE FULLY COMPLETE ALL DETAILS FOR EACH PERSON INCLUDED ON YOUR HOUSING APPLICATION INCLUDING THE APPLICANT

Male / Female	Name	Date of Birth	PPS Number	Relationship to Applicant	Civil Status	Income Type	Income Amount	Nationality	Non-EU Status

●PPS Number: This must be submitted in respect of all persons on application **including children**

●Civil Status: SINGLE / MARRIED / SEPARATED / DIVORCED / WIDOWED / COHABITING / LEGALLY SEPARATED / LONE PARENT / CIVIL PARTNER / OTHER

●Income Type: EMPLOYED / BACK TO WORK or FAS SCHEME / UNEMPLOYED and in receipt of SOCIAL WELFARE / RETIRED / LONE PARENT / OTHER

●Income Amount: NET INCOME ie. INCOME LESS PRSI (EMPLOYEE ONLY), PAYE & USC

●Nationality: IRISH / EU CITIZEN / NON-EU CITIZEN

●Non-EU Status: PERMISSION TO REMAIN / REFUGEE / SUBSIDIARY PROTECTION STATUS - STAMP 4

Ref:25689

Are you still interested in receiving Social Housing

☐

Yes

☐

No

Documents Required

- Proof of current address - tenancy agreement / rent book and utility bill
- Birth certificates for all household members
- Marriage / Civil Partnership Certificate (if applicable)
- Current Photographic ID – Passport / Drivers Licence
- If employed - Latest P60 & latest 6 payslips
- If self employed - latest 2 years of accounts

- If Receiving Social Welfare - Proof of current payments ie. Bank statement/ letter / receipt
- If non EEA Nationals - Current GNIB card & reckonable residency letter for proof of previous stamps
- Legally Separated / Divorced - Copy of Court documents
- If Legal Custody Arrangements - Copy of Court documents
- If receiving maintenance for children - Documents which set out how much is received

Current Accommodation:☐

With Parents

☐

Private Rented Accommodation

☐

Emergency Accommodation

☐

Owner Occupier

☐

With Rent Supplement

☐

With Relatives / Friends

☐

Rental Accommodation Scheme

☐

Without Rent Supplement

☐

Other: _____

If Private Renting:

Landlord Name: _____

Landlord Phone No: _____

Rent Per Week / Month: € _____

Rent Supplement Per Week / Month: € _____

Number of Bedrooms: _____

Accommodation Type:

☐

House

☐

Mobile Home

☐

Transitional Accommodation

☐

Hospital

☐

Cottage

☐

Maisonette

☐

Tigin

☐

Institution

☐

Apartment

☐

Day House

☐

Bed & Breakfast

☐

Refuge

☐

Flat

☐

Group Housing

☐

Hostel

☐

Prison

☐

Caravan

☐

Halting Bay

☐

Sheltered Accommodation

☐

None/ Other

Disability / Medical Information

Does anyone in the household have a disability or medical condition

☐

Yes

☐

No

Person's Name: _____

Details of disability or medical condition:

If someone in the household has a disability, please indicate if the disability falls into any of the following categories (you may tick more than one)

☐

Intellectual disability

☐

Physical disability

☐

Mental health disability

☐

Sensory disability

Due to the disability or medical condition are there any particular requirements needed in a home:

☐

Yes

☐

No

If yes, please describe the particular requirements (E.g. wheelchair access needed):

Under the current rules, you can only have an application for Social Housing open in ONE Council. You may be able to pick areas in other Councils within the county (see below Area of Choice form), but your application can only be based in one Council.

If you have also applied to Dublin City Council / Dun Laoghaire Rathdown County Council / Fingal County Council you must choose one Council to manage your application. If you wish for South Dublin County Council to manage your file please tick the box ☐

If you have an application with any other Council outside of Dublin County and wish for that Council to manage your file please tick the box ☐

NB. If so, your file will automatically be cancelled with South Dublin County Council

Areas of Choice

Please update your Areas of Choice by ticking the areas you are interested in below, subject to the following rules -

- You can only pick a maximum of 3 Areas of Choice
- You must pick at least 1 area in South Dublin County Council
- You can indicate a maximum of 2 more from the list below
- If you select an Area of Choice in a new council area, your time on the list in that council will start when your request is processed and confirmed
- It should be noted that you are committed to these Areas of Choice for a period of 12 months.
- If you have changed your Area of Choice within last 12 months these changes will not be taken into account. A new Area of Choice can be submitted after the 12 months

Area of Choice form

South Dublin County Council

- ☐ North of Naas Road
- ☐ South of Naas Road

Dublin City Council

- ☐ **Area B**
Artane, Priorswood, Coolock,
Donnycarney, Killester, Raheny,
Darndale, Kilmore, Beaumont,
Donaghmede, Edenmore, Marion,
Clontarf, Kilbarrack
- ☐ **Area D**
Ballymun, Poppintree
- ☐ **Area E**
Ashtown, Blackhorse Avenue,
Santry, Whitehall, Cabra,
Finglas, Glasnevin
- ☐ **Area H**
Ballybough, Phibsborough,
Dorset Street, Dominick Street,
East Wall, North Strand,
Summerhill, Sherrif Street

Fingal County Council

- ☐ Balbriggan
- ☐ Blanchardstown
- ☐ Malahide / Howth
- ☐ Swords

Dublin City Council

- ☐ **Area J**
Ballyfermot, Bluebell,
Chapelizod, Inchicore
- ☐ **Area K**
Crumlin, Walkinstown,
Kimmage, Drimnagh
- ☐ **Area L**
Clabgrassil, Coombe /
Maryland, Kilmainham,
Charlemount, York Street,
Rialto, James Street, Ushers
Quay, Dolphins Barn
- ☐ **Area M**
City Quay, Ringsend,
Irishtown, Donnybrook,
Mount Street, Pearse
Street

Dun Laoghaire / Rathdown County Council

- ☐ Ballinteer / Ballyogan
- ☐ Ballybrack / Shankill
- ☐ Blackrock / Stillorgan
- ☐ Dun Laoghaire / Dalkey

Dublin City Council

- ☐ **Area N**
Ranelagh, Harold's Cross,
Rathmines, Terenure
- ☐ **Area P**
Church Street, Ormond Quay,
North King Street, O' Deavaney
Gardens, Chancery Street

3. Other property / land**Ref:25689**

Do you or any member of the household own property or land in Ireland or any other country?

☐ Yes☐ No

If yes, does this include a residential property which is vacant

☐ Yes☐ No

Address of the property or land owned

DECLARATION

Once you have finished filling out this form in full, please read this declaration carefully and sign and date it when you are satisfied that you understand it.

Collection and Use of Data

The housing authority will use the data which you have supplied to administer your housing application. Data may be shared with other public bodies for the purpose of the prevention or detection of fraud. The housing authority may, in conjunction with the Department of the Environment, Heritage & Local Government, process this data for research purposes including forward planning in relation to the assessment of housing needs.

The housing authority may, for the purpose of its functions under the Housing Acts of 1966 - 2009, request and obtain information from another housing authority, the Criminal Assets Bureau, An Garda Síochána, The Department for Social Protection, the Health Service Executive [HSE] 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.

Declaration

I/We declare that the information and particulars given by me/us on this application are true and correct.

I/we undertake to notify the housing authority of any change in my/our household circumstances (e.g. address, household composition, employment, medical conditions etc.)

I/We also authorise the housing authority to make whatever enquiries it considers necessary to verify details on my/our application.

Signature of Main Applicant

Print full name (BLOCK CAPITALS)

Signature of Joint Applicant

Print full name (BLOCK CAPITALS)
