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|  | Comhairle Chontae Uibh FhailíOffaly County Council |  |

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| --- | --- |
| **Postal Address :** Áras an Chontae,  Charleville Road,  Tullamore,  Co. Offaly | **Ph : 057 - 93 46800**  **Fax : 057 - 93 46868**  **Web address :** [**www.offaly.ie/yourcouncil/housing**](http://www.offaly.ie/yourcouncil/housing)  **Email :** [**housing@offalycoco.ie**](mailto:housing@offalycoco.ie) |

**House Purchase Loan**

**Application Form**

|  |
| --- |
| **WARNING**  **YOUR HOME IS AT RISK IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR ANY OTHER LOAN SECURED ON IT**  **THE PAYMENT RATES ON THIS HOUSING LOAN MAY BE ADJUSTED BY THE LENDER FROM TIME TO TIME** |

|  |  |  |
| --- | --- | --- |
| **COMPLETED APPLICATION FORMS SHOULD BE FORWARDED TO:** | | |
|  | **SENIOR EXECUTIVE OFFICER,**  **HOUSING SECTION,**  **OFFALY COUNTY COUNCIL,**  **ARAS AN CHONTAE,**  **CHARLEVILLE ROAD,**  **TULLAMORE,**  **CO.OFFALY** |  |

**Local Authority Reference**:

**CHECKLIST FOR APPLICANT/S**

**Applicants are strongly advised to submit their applications in person at this office as posted applications frequently are not completed correctly and have to be returned.**

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|  |

Application Fee of €80.00

Fully Completed Application Form

HPL1 Form to be stamped by Revenue Commissioner (Appendix 1A)

Photographic Identification (Current Passport or Drivers Licence)

Proof of Present Address (Current Utility Bill or Bank Statement)

Original Salary Certificate (Appendix 1), up-to-date P60 and 4 Recent Payslips

Signed Customer Declarations

Original Current Account Statements (6 Months)

Original Savings Statements (12 Months)

Original Loan Statements (12 Months)

***Self Employed***

Accountants Report/Audited Accounts (2 Years Required)

Current Tax Balancing Statement

Current Preliminary Revenue Tax Payment Receipt

**Local Authority House Purchase Loan Application**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **second applicant** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| first name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | middle initial: | | | | | | | | | | | |  | | |  | |
| surname: | | | | | | | | | | | | | | | | | | maiden name if applicable: | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | |  |
| date of birth: | | | | | | | | |  | | | | | | | | | | | PPSN: | | | | | | | | | | | | | | | | | | | | |
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| Gender: Female | | | | | | | | | | | | | | | | | | | Male | | | | | | | | | | | | | | | | | | | | |  |
| mother’s maiden name: | | | | | | | | | | | | | | | | | | | nationality: | | | | | | | | | | | | | | | | | | | | |  |
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| marital status: | | | | | | married | | | | | |  | | | | | | single | | | | | | | | |  | | separated | | | | | | | | |  | |  |
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|  | | | | | | divorced | | | | | |  | | | | | | widower | | | | | | | | |  | | | other | | | | | | | |  | |  |
| e-mail: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| work tel: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| home tel: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| mobile: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| present address: | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | |  |  | | | | | |  |
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| how long at this address: | | | | | | | | | | | | | | | | | | | | years: | | | | | |  | | | | | months: | | | | | |  | | |  |
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| previous address: | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | |  |  | | | | | |  |
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| number of dependents: | | | | | | | | | | | | |  | | | | | | | | ages: | | | | | | |  | | | | | | | | | | | |  |
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| do you rent your current accommodation: | | | | | | | | | | | | | | | | | | | | | |  | | | € | | | | | | | | | |  | | | | |  |

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| **Personal Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| number of applicants | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | |  |
| **first applicant** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| first name: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | middle initial: | | | | | | | | | | | | |  | | |  | |
| surname: | | | | | | | | | | | | | | | | | | maiden name if applicable: | | | | | | | | | | | | | | | | | | | | | | |  |
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| date of birth: | | | | | | | | |  | | | | | | | | | | | PPSN: | | | | | | | | | | | | | | | | | | | | | |
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| Gender: Female | | | | | | | | | | | | | | | | | | | Male | | | | | | | | | | | | | | | | | | | | | |  |
| mother’s maiden name: | | | | | | | | | | | | | | | | | | | nationality: | | | | | | | | | | | | | | | | | | | | | |  |
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| marital status: | | | | | | married | | | | | |  | | | | | | single | | | | | | | | | |  | | separated | | | | | | | | |  | |  |
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|  | | | | | | divorced | | | | | |  | | | | | | widower | | | | | | | | | |  | | | other | | | | | | | |  | |  |
| e-mail: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| work tel: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| home tel: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| mobile: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| present address: | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  |  | | | | | |  |
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| how long at this address: | | | | | | | | | | | | | | | | | | | | years: | | | | | | |  | | | | | months: | | | | | |  | | |  |
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| previous address: | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  |  | | | | | |  |
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| number of dependents: | | | | | | | | | | | | |  | | | | | | | | ages: | | | | | | | |  | | | | | | | | | | | |  |
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| **Nature of Current Tenure** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | | |  | | | | | | | yes | | | monthly rent | | | | | | | | | | | no | | | | |  |
| do you rent your current accommodation: | | | | | | | | | | | | | | | | | | | | | |  | | | € | | | | | | | | | | |  | | | | |  |

Home Owner Living with Parents Home Owner Living with Parents

Tenant Local Authority Tenant Tenant Local Authority Tenant

Other Other

|  |
| --- |
| **Nature of Current Tenure (continued)** |

Are you on a local authority Housing List? Are you on a local authority Housing List?

No Yes No Yes

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you ever owned or built a house or flat? Have you ever owned or built a house or flat?

No Yes No Yes

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Loan Purpose** | | | | | | | | | |
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Private purchase:

Affordable home:

Local authority tenant purchase:

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| employed: | |  | | self-employed: | | | | | | | | | |  | | not employed: | | | | | | | |  |  | | |
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| employer name: | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| employer address: | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| state type of business: | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| occupation: | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| employment status e.g. permanent, etc: | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| date commenced present employment: | | | | | | | | | | | | | | | | |  | | / |  | | / |  | | |  |
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| gross basic salary p.a.: | | | | | | | | | € | | | | | | | | | |  | | | | | |  | |
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| overtime p.a. | | | | | | | |  | | | |  | | | € | | | | | | | | | |  | |
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| bonus p.a. | | | | | | | |  | | | |  | | | € | | | | | | | | | |  | |
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| commission p.a. | | | | | | | |  | | | |  | | | € | | | | | | | | | |  | |
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| other income p.a.: | | | | | | | | | | | | | | | € | | | | | | | | | |  | |
| source of other annual income: | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| If less than 6 months in current employment, please give previous employment contact details: | | | | | | | | | | | | | | | | | | | | | | | | |
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| trading name and address: | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| date of commencement of business: | | | | | | | | | | | |  | | | | | / |  | / | |  | | |  | |
| nature of business: | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| sole trader: | | |  | director / partner: | | | | | | | | |  | |  | | | | | | |  |  | | |
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| State % shareholding: | | | | | | | | | | | | | |  | | | | | | | | |  | | |

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| **Employment Status** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| employed: | |  | | self-employed: | | | | | | | | | |  | not employed: | | | | | | | |  |  | | |
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| **Employment Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| employer name: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| employer address: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| state type of business: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| occupation: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| employment status e.g. permanent, etc: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| date commenced present employment: | | | | | | | | | | | | | | | |  | | / |  | | / |  | | |  |
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| gross basic salary p.a.: | | | | | | | | | € | | | | | | | | |  | | | | | |  | |
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| overtime p.a. | | | | | | | |  |  | | | € | | | | | | | | | | | |  | |
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| bonus p.a. | | | | | | | |  |  | | | € | | | | | | | | | | | |  | |
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| commission p.a. | | | | | | | |  |  | | | € | | | | | | | | | | | |  | |
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| other income p.a.: | | | | | | | | | | | | € | | | | | | | | | | | |  | |
| source of other annual income: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| If less than 6 months in current employment, please give previous employment contact details: | | | | | | | | | | | | | | | | | | | | | | | |
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| **Self-Employment Details** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| trading name and address: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| date of commencement of business: | | | | | | | | | | | | |  | | | | | / |  | / | |  | | |  |
| nature of business: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| sole trader: | | |  | director / partner: | | | | | | | | | |  | |  | | | | | | |  |  | |
|  | | | | | |  | |  | | | | | | | | | | | | | | | |  | |
| State % shareholding: | | | | | | | | | | | | | | |  | | | | | | | | |  | |
| **Self-Employment Details *(continued)*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| total net profit: | | | | | | | | | | € | | | | | | | | | | | | | |  | |
| *(all partners, before drawings)* | | | | | | | | | | | | | | | | | | | | |  | | |  | |
| drawings: | | | | | | | | | | € | | | | | | | | | | | | | |  | |
| *(state your drawings only)* | | | | | | | | | | | | | | | | | | | | |  | | |  | |
| previous employer’s name and address: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| previous employment from: | | | | | | | | | | | | |  | | | | | / |  | / | |  | | |  |
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| previous employment to: | | | | | | | | | | | | |  | | | | | / |  | / | |  | | |  |
| nature of business: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| occupation: | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | total net profit: | | | | € | | | | | | | | *(all partners, before drawings)* | | | | | | | | |  | | | | drawings: | | | | € | | | | | | | | *(state your drawings only)* | | | | | | | | |  | | | | previous employer’s name and address: | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | |  | | | | | | | | | |  | | | | | | | | | | | | |  |  |  | | | | | | | | | | | previous employment from: | | | | |  | / |  | / | |  | | |  |  |  | | | | | | | | | | | previous employment to: | | | | |  | / |  | / | |  | | | nature of business: | | | | | | | | | | | | |  | | | | | | | | | | | | | occupation: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |

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| **Financial History & Commitments** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **savings** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | first applicant | | | | | |  | second applicant | | | |  | | financial institution(s) | | | | | | | | | | | | | |
| deposits: | |  | € | | | | |  | € | | | |  | |  | | | | | | | | | | | | |  |
|  | |  |  | | | | |  |  | | | |  | |  | | |  |  | | | | |  |  |  |  | |
| current account: | |  | € | | | | |  | € | | | |  | |  | | | | | | | | | | | | |  |
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| other: | |  | € | | | | |  | € | | | |  | |  | | | | | | | | | | | | |  |
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| **borrowings (include credit card debt)** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| borrower |  | purpose | | | | | |  | € amount owing | | | |  | € monthly repayment | | | | | |  | lender | | | | | | | |
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| **Financial History & Commitments *continued*** | | | | | | | | | | | | | | |
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| **first applicant** | | | | | | | | **second applicant** | | | | | | |
| have you or your spouse ever been insolvent, bankrupt, involved in court proceedings for debt or compounded with creditors? have any judgements been registered against you personally? have any judgements been registered against a company of which you are a director? | | | | | | |  | have you or your spouse ever been insolvent, bankrupt, involved in court proceedings for debt or compounded with creditors? have any judgements been registered against you personally? have any judgements been registered against a company of which you are a director? | | | | | | |
|  | | | | | | |  |  | | | | | | |
| Yes |  |  | No |  |  | |  | Yes |  |  | No |  |  | |
|  |  |  |  |  |  | |  |  |  |  |  |  |  | |
| if yes to any of the above, please give details: | | | | | | |  | if yes to any of the above, please give details: | | | | | | |
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| are you obliged to pay alimony/child support or separation maintenance? | | | | | | |  | are you obliged to pay alimony/child support or separation maintenance? | | | | | | |
|  | | | | | | |  |  | | | | | | |
| Yes |  |  | No |  |  | |  | Yes |  |  | No |  |  | |
|  | | | | | | |  |  | | | | | | |
| if yes, please state monthly amount: | | | | | | |  | if yes, please state monthly amount: | | | | | | |
| € | | | | | |  |  | € | | | | | |  |

Have you ever had a loan or made a previous application Have you ever had a loan or made a previous application

to any other lending agency? to any other lending agency?

Yes: No: Yes: No:

If yes, please give details: If yes, please give details:

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| **Details of Property to be Mortgaged** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | |
| address of property to be mortgaged: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| stage of construction: | |  | | | | | | | | | | | | | | | | | | | completion date: | | |  | / |  | | / |  | |
|  | | |  | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | |
| is the property registered with: | | | | homebond scheme: | | | | | Yes | | | |  | | | No | | |  | premier guarantee scheme | | | | | Yes | |  | | No |  |
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| **Mortgage Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **loan amount:** | **€** | | | | |  | | **loan term:** | | | | | | | | |  | | | | | |  | | | | | | | |
| **outlay** | | | | | | | | | | | | | | **Funding** | | | | | | | | | | | | | | | | |
| purchase price: | | | € | | | | | | |  | | | | savings: | | | | | | | | | € | | | | | | | |
|  | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
| stamp duty: *(if applicable)* | | | € | | | | | | |  | | | | other \* please specify: | | | | | | | | | € | | | | | | | |
|  | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
| legal expenses: | | | € | | | | | | |  | | | | mortgage required: | | | | | | | | | € | | | | | | | |
|  | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
| other \*: | | | € | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | |
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| total expenditure: | | | € | | | | | | |  | | | | total finance: | | | | | | | | | € | | | | | | | |
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| \* please give details of ‘other’ above | | | | |  | | | | |  | | | |  | | | | | | | | | | | | | | | | |
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| **Contact Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **solicitor** | | | | | | | | | | | | | | **valuation access** | | | | | | | | | | | | | | | | |
| name and address: | | | | | | | | | | | | | | | name and address of person with whom an inspection may be arranged: | | | | | | | | | | | | | | | |
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| telephone: | | | | | | | | | | | | | | | telephone: | | | | | | | | | | | | | | | |
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**Important Notices**

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| **consent under the consumer credit act 1995** | | |
|  | | |
| Under the Consumer Credit Act 1995 a customer’s consent is required if the customer wishes the **local authority** to be able to telephone him/her at his/her place of employment/business in connection with a Credit Agreement. From time to time the **local authority** may need to contact you during working hours in connection with the Account. Should you wish to give your consent you should sign this part.  I/we hereby consent to the **local authority** contacting me/us by telephone at my/our place of employment/business. | | |
|  | | |
| signature of first applicant: | | date |
|  |  |  |
| signature of second applicant |  | date |
|  |  |  |
|  |  |  |
| **credit reference searching & reporting** | | |
|  | | |
| **The local authority** may from time to time make searches against you on the records held by credit reference agencies. When such a search is made the Credit reference agencies will keep a record for a period (usually for a year) that the search has been made. **the local authority** may also provide information to credit reference agencies concerning this application and the manner in which the Account is conducted. For this **the local authority** requires your consent. Please note that if you do not consent **the local authority** may not be able to consider your application.  You have the right at any time to request from any credit reference agency a copy of any “personal data” within the meaning of the Data Protection Act 1988 (as amended or re-enacted from time to time) that such a credit reference agency holds about you (for which they may charge a small fee) and to have inaccuracies in that information corrected.  I/We authorise **the local authority** to carry our credit reference searches against me/us. I/We acknowledge that such credit reference agencies will record that such a search has been made and disclose that fact to their members for a period of at least one year. I/We also authorise **the local authority** to provide information concerning this application and the conduct of the Account to credit reference agencies. | | |
|  | | |
| signature of first applicant: | | date |
|  |  |  |
| signature of second applicant |  | date |
|  |  |  |
|  |  |  |
| **data protection notice** | | |
|  | | |
| ACCESS TO PERSONAL DATA. You have the right at any time to request a copy of any 'personal data' within the meaning of the Data Protection Act 1988 (as amended or re-enacted from time to time) that the **local authority** holds about you and to have inaccuracies in that information corrected. | | |
|  | | |
| **consumer credit act 1995** | | |
|  | | |
| Please note carefully the following information relating to Housing Loans within the meaning of the Consumer Credit Act 1995.  **“WARNING: YOUR HOME IS AT RISK IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR ANY OTHER LOAN SECURED ON IT.”**  **VARIABLE RATE LOANS - “THE PAYMENT RATES ON THIS HOUSING LOAN MAY BE ADJUSTED BY THE LENDER FROM TIME TO TIME.”**  **ARREARS**  Interest will be applied to the outstanding balance of the loan. This balance includes any element of unpaid interest and charges which will accrue interest on the rate applicable to the account.  **VALUATION**  Where the property is sourced by the applicant on the open market, each application must be supported by a valuation report carried out by an approved independent or local authority valuer. Valuation/survey fees are payable by the applicant(s) to the firm of valuers who undertake the valuation. | | |

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| **your right to cancel the contract** |
|  |
| You do not have a right to cancel the contract once you have drawn down a housing loan but you may repay a housing loan early as outlined in the next paragraph. |

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| **rights to terminate the contract** |
|  |
| You may at any time repay all or part of the loan early  If you fail to make any payment due to us in respect of the loan or, if any of the other events of default which will be specified in the contract between us for the loan were to occur we may call for the immediate repayment of the loan together with all accrued but unpaid interest thereon and all other costs and expenses payable under the contract. We may also enforce our mortgage over your property and sell it and realize any security given to us and apply the proceeds of sale in repayment of the loan and all interest and costs and expenses. |
|  |
| **governing law and language** |
|  |
| All our dealings with you, and all contracts between us, will be governed by the laws of Ireland.  All contracts between us, all information, which we supply to you, and all other communications with you will be in English. |
|  |
| **complaint procedures** |
|  |
| We aim to provide an efficient service to our customers and it is our policy to ensure that all your concerns are dealt with fairly and promptly.  If you have any complaint please telephone or write to:  **Local Authority House Purchase Loan Section**  **WARNINGS**  YOUR HOME IS AT RISK IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR ANY OTHER LOAN SECURED ON IT.  THE PAYMENT RATES ON A HOUSING LOAN MAY BE ADJUSTED BY THE LENDER FROM TIME TO TIME.  THE COST OF MONTHLY REPAYMENTS MAY RISE. |
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**Declaration**

|  |  |  |
| --- | --- | --- |
| **personal details** | | |
|  | | |
| applicant’s name(s): | | |
|  | | |
| address of property to be mortgaged: | | |
|  | | |
|  | | |
| **details of mortgage required** | | |
|  | | |
| purchase price/value of property: |  | amount of loan required: |
| € |  | € |
| repayment term required: |  |  |
|  |  |  |
|  | | |
| **valuation** | | |
|  | | |
| **The local authority** will require a valuation of and certain other information about the property you wish to buy. The valuation report, of which you will obtain a copy, is designed especially for the needs of **the local authority** to help us decide if the property represents adequate security for the loan you require. The valuation report will be based on a limited inspection and is not intended to be a structural survey nor a condition report. It is important that you should not rely in anyway on the valuation report. It is possible that there are defects in the property which are not reported but which a more detailed inspection would reveal. This means that the valuation report may not make you aware of defects which could affect your decision to buy. **The local authority** recommends that you obtain a more comprehensive report or structural survey. | | |
|  | | |
| **insurance** | | |
|  | | |
| **Mortgage Protection**  It is a condition on all loans that Mortgage Protection Cover is effected before the loan cheque issues. There is a standard mortgage protection insurance scheme which is compulsory with local authority house purchase loans. The cost of mortgage protection insurance which covers both death and permanent disability will be added to your monthly mortgage repayments.  **Property Insurance**  It is a condition on all loans that property insurance is effected before the loan cheque issues. | | |
|  | | |
| **signature & declaration** | | |
|  | | |
| I/We declare that the information given by Me /Us in this form and in appendix 1, 1A and 2 attached is correct to the best of My/Our knowledge and belief and that these documents were completed before this declaration was signed. I/We declare that I/We am/are of full age and I/We hereby make application for an advance with **the local authority** upon mortgage of the property described above. I/We declare that the foregoing statements and particulars and any other information we have given to **the local authority** to be strictly true, to the best of my/our knowledge and belief. I/We acknowledge that, in order to process this loan application, **the local authority** its servants and agents will hold and process information in connection with this application (together with such other information supplied to or obtained by **the local authority** separately) and will hold and process same for administrative, customer care and service purposes and the statistical purposes of the Department of the Environment Heritage and Local Government where required by that department. I/We have read the section above headed valuation, I/We understand that I/We should not rely on the valuation report in any way in deciding whether or not to purchase the property. I/We understand that if, contrary to the **the local authority** recommendation, I/We do not request or obtain an independent structural survey for my/our own purposes, I/We run the risk that the property may suffer from serious defects which are not mentioned in the Valuation Report and that the report may be defective, or may be inadequate for my/our purposes. I/We further understand that should **the local authority** grant a loan this does not signify an assurance or guarantee that the property is soundly constructed and free from defects. I/We note that if I/We are approved by **the local authority** for a loan that at any time before the completion of the mortgage transaction **the local authority** has the right to withdraw or vary the approval. | | |
|  | | |
| **Signatures** | | |
|  | | |
| first applicant: |  | date: |
|  |  |  |
| second applicant: |  | date: |
|  |  |  |

**APPENDICES**

**APPENDIX 1 – SALARY CERTIFICATE**

**APPENDIX 1A – HPL 1 FORM**

**APPENDIX 2 – SOCIAL WELFARE FORMAppendix 1 - SALARY CERTIFICATE – (to be completed by First Applicants Employer)**

**THIS SECTION IS TO BE COMPLETED BY AN AUTHOIRISED COMPANY OFFICAL**

**Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please authenticate with company stamp or seal**

**Tel Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE**

**SALARY DETAILS**

**Guaranteed Regular Irregular**

**Gross basic wage/salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Bonus:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Other income\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**\*Please give details of other income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employment Details**

**Name of Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Length of service with the company: Years \_\_\_\_\_\_\_ Months \_\_\_\_\_\_\_\_**

**Position held within the company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The exact location of employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is employment permanent? Yes  No **

**Is employee on probation period? Yes  No **

**So far are you able to tell will he/she continue to be in your service? Yes  No **

**If so, what is the maximum of such scale and by what annual increments reached?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Appendix 1 - SALARY CERTIFICATE – (to be completed by Second Applicants Employer)**

**THIS SECTION IS TO BE COMPLETED BY AN AUTHOIRISED COMPANY OFFICAL**

**Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please authenticate with company stamp or seal**

**Tel Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE**

**SALARY DETAILS**

**Guaranteed Regular Irregular**

**Gross basic wage/salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Bonus:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Other income\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**\*Please give details of other income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employment Details**

**Name of Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Length of service with the company: Years \_\_\_\_\_\_\_ Months \_\_\_\_\_\_\_\_**

**Position held within the company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The exact location of employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is employment permanent? Yes  No **

**Is employee on probation period? Yes  No **

**So far are you able to tell will he/she continue to be in your service? Yes  No **

**If so, what is the maximum of such scale and by what annual increments reached?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Appendix 1 - SALARY CERTIFICATE – (to be completed by First Applicants Employer)**

**THIS SECTION IS TO BE COMPLETED BY AN AUTHOIRISED COMPANY OFFICAL**

**Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please authenticate with company stamp or seal**

**Tel Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE**

**SALARY DETAILS**

**Guaranteed Regular Irregular**

**Gross basic wage/salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Bonus:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Other income\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**\*Please give details of other income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employment Details**

**Name of Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Length of service with the company: Years \_\_\_\_\_\_\_ Months \_\_\_\_\_\_\_\_**

**Position held within the company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The exact location of employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is employment permanent? Yes  No **

**Is employee on probation period? Yes  No **

**So far are you able to tell will he/she continue to be in your service? Yes  No **

**If so, what is the maximum of such scale and by what annual increments reached?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Appendix 1A - HPL1 Form – First Applicant** | | | | | | | | | | | | | | | | | |
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| THIS FORM MUST BE COMPLETED BY THE **REVENUE COMMISSIONERS, PEARSE STREET, ATHLONE, CO WESTMEATH** AND RETURNED WITH EVERY APPLICATION. | | | | | | | | | | | | | | | | | |
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|  | YOUR FULL NAME  (BLOCK LETTERS) | | | |  | |  | | | | | | | | | |  |
|  |  | | | |  | |  | | | | | | | | | |  |
|  | PREVIOUS NAME  (IF ANY) | | | |  | |  | | | | | | | | | |  |
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|  | PRESENT ADDRESS | | | |  | |  | | | | | | | | | |  |
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|  | PREVIOUS ADDRESS  (IF ANY) | | | |  | |  | | | | | | | | | |  |
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|  | PPS NUMBER (PRSI NUMBER) | | | |  | |  | | | | | | | | | |  |
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| **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 relief in respect of interest paid on money borrowed to purchase or build a dwelling. | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **SIGNED** | |  | | | | | | **DATE** | |  | / |  | / | |  |  | |
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|  | | | | **OFFICIAL STAMP** | | | | | | | |  | | | | | |
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| **Appendix 1A - HPL1 Form – Second Applicant** | | | | | | | | | | | | | | | | | |
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| THIS FORM MUST BE COMPLETED BY THE **REVENUE COMMISSIONERS, PEARSE STREET, ATHLONE, CO WESTMEATH** AND RETURNED WITH EVERY APPLICATION. | | | | | | | | | | | | | | | | | |
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|  | YOUR FULL NAME  (BLOCK LETTERS) | | | |  | |  | | | | | | | | | |  |
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|  | PREVIOUS NAME  (IF ANY) | | | |  | |  | | | | | | | | | |  |
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|  | PRESENT ADDRESS | | | |  | |  | | | | | | | | | |  |
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|  | PREVIOUS ADDRESS  (IF ANY) | | | |  | |  | | | | | | | | | |  |
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|  | PPS NUMBER (PRSI NUMBER) | | | |  | |  | | | | | | | | | |  |
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| **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 relief in respect of interest paid on money borrowed to purchase or build a dwelling. | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **SIGNED** | |  | | | | | | **DATE** | |  | / |  | / | |  |  | |
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| **Appendix 2** |

**THIS FORM IS REQUIRED ONLY IF ONE APPLICANT IS ON SOCIAL WELFARE.**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**RSI Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In relation to the above named loan applicant I confirm that the following information is correct**:

**TOTAL AMOUNT OF UNEMPLOYMENT BENEFIT/ASSISTANCE RECEIVED FROM**:

1st January \_\_\_\_\_\_\_\_\_\_\_ to 31st December \_\_\_\_\_\_\_\_\_\_\_\_\_ = € \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CURRENT AMOUNT OF UNEMPLOYMENT BENEFIT/ASSISTANCE BEING RECEIVED

€ \_\_\_\_\_\_\_\_ WEEKLY

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TO BE COMPLETED BY AN OFFICIAL OF THE DEPARTMENT OF SOCIAL WELFARE/EMPLOYMENT EXCHANGE** | | | | | | | | | |
|  | | | | | | | | | |
| I hereby certify, in accordance with my records and to the best of my knowledge, that the above named person is in receipt of social welfare payments. | | | | | | | | | |
|  | | | | | | | | | |
| **SIGNED** |  | | **DATE** |  | / |  | / |  |  |
|  | | | | | | | | | |
|  | | **OFFICIAL STAMP** | | | |  | | | |
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**Application Reference Number :**

**VALUATION REPORT**

**Important Notice**

This valuation report (“Valuation Report”) is intended to be a report of the Valuer’s professional opinion of the property over which it is proposed that security be taken (the “Property”) and includes a description of the Property and details of the market value of the Property, taking cognisance of all readily apparent defects and wants of reparation. It is a professional estimate of the market value of the Property (“Valuation”) and does not purport to be a structural report. This Valuation Report recognises that (i) the inspection of the Property carried out by the Valuer was of a superficial nature and did not enable any conclusion to be reached regarding the presence of or absence of dry rot, wet rot, woodworm or beetle infestation, (ii) woodwork and other parts of the Property which are covered, unexposed or inaccessible were not inspected and (iii) services, including plumbing, drainage, heating, electrical, and gas (if appropriate) have not been tested, although confirmation (or otherwise) that such services are connected is provided. Accordingly, this Valuation Report does not warrant that the Property is soundly constructed and free from defects. The information given in this Valuation Report in relation to the identity of the Property, particulars of services and compliance with Planning and Bye-Law regulations is given subject to verification on legal investigation of title. All measurements and or descriptions are approximate. This Valuation Report is given solely for use by the relevant local authority that will advance, or consider advancing, finance to an individual or individuals on the security of the Property (the “Local Authority”) for the purposes of assessing the adequacy of the value of the security to be taken by the Local Authority. Any intending purchaser of the Property should have the Property inspected by his/her own architect/engineer. In the event that the applicant(s) purchases the Property, this Valuation Report shall not be taken as any warranty, representation or otherwise by the Valuer, the Local Authority that the purchase price is reasonable. In the case of apartments, duplexes and other properties that involve a shared ownership of common areas, it is the responsibility of the applicant(s) to ensure that a properly constituted management company exists and that all its outstanding obligations have been complied with. This Valuation Report is solely for use by the Local Authority and should not be disclosed by the applicant or the Valuer to any third party. In the event of any such disclosure no responsibility is accepted by the Local Authority or the Valuer to any third party for the whole or any part of its contents.

1. Applicant’s Name(s)
2. Property Address
3. Location: Urban Rural

If rural, please describe local amenities and access to property, including distance from nearest town and/or main road.

1. Give details of any other information which may affect future saleability
2. In the case of a new home, what Structural Indemnity Cover is being provided?

Home Bond Premier Guarantee None

1. Is there any visual evidence of subsidence, settlement, land slip or ground heave? Yes No

*If ‘Yes’, Provide Details*

1. Do you recommend a specialist report? Yes No

*If ‘Yes’, Provide Details*

1. Are there any Rights-of-Way, easements or Way Leaves required/provided by the subject property? Yes No

*If ‘Yes’, Provide Details*

1. Property Type

Apartment Duplex Terraced House Semi-Detached Detached

|  |  |  |
| --- | --- | --- |
| 1. If the property forms part of a development, please advise: |  | 1. If the property is an apartment/duplex, please advise:   How many storeys in the building?  On what floor(s) is the Property located?  Are common areas/landscaping being maintained by the management company?  Is there a car parking space included in the purchase price? |

How many units are in the development in total?

How many units are occupied?

How many units are unfinished?

Yes No

Yes No

Are there further phases to be developed?

Yes No

Are development works still in progress?

Yes No

1. Essential Services – Water Gas Electricity Sewerage Central Heating

If serviced by a septic tank and/or private water supply, are they within the boundaries of the site? Yes No

*If ‘No’, Provide Details*

Is the septic tank and percolation area the requisite distance from the dwelling? Yes No

1. Accommodation – State number of each

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Living Room |  | Bedroom | |  | Kitchen |  | Utility Room |  | Bathroom |  |
|  | |  | | |  | |  | |  | |
| Shower Room |  | | Private WC |  | Attic Conversion | | Conservatory |  | Garage |  |

1. Dimensions and Construction

|  |  |
| --- | --- |
| Lot Size (sq m): | Gross Internal Living Area (sq m): |
| Walls: | Roof: |
| Floors: | Windows: |

1. Are there any outstanding essential works necessary, including Roads, Footpaths, Services, Site Works, Boundaries and Decoration? Yes No

*If Yes’, Provide Details*

1. General Observations
2. Re-build cost for fire insurance (incl. prof. fees) Give separate figure for out buildings

€

€

1. Present Value Cost of Outstanding Works Value on Completion

€

€

€

|  |  |  |  |
| --- | --- | --- | --- |
| Valuer’s Name: |  | Qualification |  |
| Name & Address of Firm |  | Phone  Email  Fax |  |
| Valuation Date: |  | Report Date: |  |
| Signature: |  |  |  |

**EXPLANATORY NOTES**

**For the Completion of the Valuation Report Form**

All Valuation Reports should be completed in full with no section left blank and no question left unanswered. All Valuation Reports should be signed and dated with the Valuer’s stamp imprinted thereon. No amended valuation amounts, either by overwriting or by use of correction fluid, will be accepted. All Valuation Reports should be accompanied by a coloured photograph giving clear and unobstructed views of the property over which it is proposed that security be taken (the “Property”) with the address of the Property and the date duly imprinted thereon.

**Q.3. Location**

A.3. State if the location is urban or rural. If rural give the distance from nearest town/village, civic amenities, transport links etc.

**Q.4. Give details of any other information which may affect future saleability**

A.4. Are there any unusual aspects regarding the Property and its environment e.g. rights-of-way, bad approach to the Property, adverse development plans, noise, smells, pylons, TC masts, flooding, vandalism or any similar factors that would negatively impact on future saleability.

**Q.6. Is there any visual evidence of subsidence, settlement, land slip or ground heave?**

A.6. If there is evidence of damage arising from the above or through shoddy workmanship details are to be given. Valuer should also take into consideration obvious defects in neighbouring properties.

**Q.7. Do you recommend a specialist report?**

A.7. If the Valuer is unable to determine the cause of a defect which could have relevance to the future condition/saleability of the Property then he should suggest a specialist report to comment upon the particular defect(s).

Such reports should only be requested where deemed necessary and should not become routine.

**Q.8. Are there any Rights of Way, easements or Way Leaves required/provided by the subject property?**

A.8. If there is evidence of any of the above on or over the Property please give details and advise on the likely impact on saleability.

**Q.10. If the Property forms part of a development, please advise:**

A.10. All sections of this question must be answered to enable the Local Authority to form an overall view of the status of the development.