

# Rathkeale Sheltered Housing Association

## Application for Housing Accommodation

1. Name (1<sup>st</sup> applicant) .....

Name (2<sup>nd</sup> applicant) .....

2. Date of Birth (1<sup>st</sup> applicant) .....

Date of Birth (2<sup>nd</sup> applicant).....

3. Present address .....

.....

.....

4. Contact Phone Number .....

5. Single ..... Married .... Widowed .... Divorced ....

Separated .... Lone Parent .... O.A.P. .... Co-Habiting ....

Children (how many)..... Ages .....

6. Are you or a member of the household suffering from any serious illness or physical disability. Yes ..... No ...

If yes, a medical certificate in support should be provided.

7. Please state your reasons for seeking housing.

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8. Present Accommodation Details

Is your present accommodation

Owned..... Rented..... Shared..... Other.....

Please supply details .....

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9. Date on which you took up residence .....

10. If renting Name of Landlord.....

Address and Contact Number .....

11. What type of accommodation are you living in now?

House.... Flat.... Mobile Home... Other.....

No. of rooms..... Type of heating.....

12. Are you on a Local Authority Housing list? Yes.... No....

If yes, please give details.....

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13. Have you ever been a tenant of a Local Authority in Ireland or abroad?

Yes..... No.....

If yes, please give details.....

14. Did the applicant or applicants own a house/property/land in the past?

Yes..... No.....

If yes, please give details.....

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15. Does the applicant/applicants currently own a house/land/property? Yes...No.....

If yes, please give full details.....

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16. Is/Are the applicant(s) in receipt of:

Unemployment benefit ..... Invalidity/Disability benefit.....

Any Social Protection payment ..... Supplementary allowances.....

If yes, please give full details.....

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**Please Note:**

**Applicants will be excluded from consideration for housing if he/she supplies false information or withholds relevant information on this form or at subsequent interviews. All sections of the form must be completed in full.**

**Declaration:**

I/We declare to the best of my/our knowledge that the information and particulars given by me/us on this application form and additional sheets are true and accurate in every respect. I also authorise Rathkeale Sheltered Housing Association to make all necessary enquiries regarding my/our application to verify information given.

1<sup>st</sup> Applicant's signature \_\_\_\_\_

2<sup>nd</sup> Applicant's signature \_\_\_\_\_

\*Non-national applicants will be asked to supply additional information.  
(note: Please contact the Voluntary Housing Association for additional information requirements)

**Please return the completed form to:**

Breid Guinane  
Rathkeale Sheltered Housing Association  
Ballymacave  
Rathkeale  
Co. Limerick