



Fingal County Council

Comhairle Contae Fhine Gall



**APPLICATION FOR CONSENT TO LET AN
AFFORDABLE PROPERTY PROVIDED UNDER THE
FINGAL COUNTY COUNCIL AFFORDABLE HOUSING
SCHEME.**

INFORMATION BOOKLET

&

APPLICATION FORM

SEP 2010

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SCHEME.**

INFORMATION BOOKLET

The Council allows Affordable Home Owners to temporarily “rent out” their homes subject to:

1. The clawback applies for a period of 20 years from the date of purchase, subject to the reduction provided between years 10 and 20 for normal residency by the purchaser. If the premises are not occupied by the purchaser, then the reduction does not apply.

2. The applicant complying with the statutory obligations required by a private landlord in relation to any subsequent letting, including registration with the Private Residential Tenancy Board.”

How do I apply?

If you wish to apply to let your affordable property please complete the application form and return to:

Fingal County Council
Housing Department
Loan Accounts Section
Grove Road
Blanchardstown
Dublin 15.

Terms and Conditions:

1. The clawback applies for a period of 20 years from the date of purchase, subject to the reduction provided between years 10 and 20 for normal residency by the purchaser. If the premises are not occupied by the purchaser, then the reduction does not apply.
2. You must comply with **all*** statutory obligations required by a private landlord, including (a) registration with the Private Residential Tenancies Board (PRTB) (b) informing the Revenue Commissioners that the property is not your normal place of residence and comply with their regulations in regard to paying the appropriate taxes on the rental income.
*(Please note that there may be more obligations/conditions that need to be complied with. Please see www.revenue.ie and www.prtb.ie and your lending institution (see point 7 below) for further information)
3. Fingal County Council will no longer apply Tax Relief at Source (TRS) to your mortgage resulting in your monthly instalment increasing.
4. You must provide a forwarding address or the name, address and phone number of a contact person.
5. You must inform the Council when you return to live in the property.
6. You must continue to make your monthly loan repayments including mortgage protection insurance and not allow your loan to fall into arrears.
7. If you have your mortgage with a lending institution other than Fingal County Council you must inform that lending institution in regard to the letting and comply with their terms and conditions.
8. The property must be properly maintained and free from anti social behaviour.
9. Building insurance cover must be maintained in place.

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APPLICATION FORM

PERSONAL DETAILS:			
BORROWER		JOINT BORROWER	
Loan Account No.:			
First Name	Surname	First Name	Surname
Date of Birth:	PPS No:	Date of Birth:	PPS No:
	_ _ _ _ _ _ _ _ _		_ _ _ _ _ _ _ _ _
No. of Dependants: <input type="checkbox"/>			
Daytime Phone:	Mobile/Home Phone:	Daytime Phone:	Mobile/Home Phone:
Email:		Email:	
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> About to Marry <input type="checkbox"/> Other	Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> About to Marry <input type="checkbox"/> Other
Your lending Institution:			
Address of property to be let:			
Commencement date of letting:			
Period of time:			
Forwarding Address or details of contact person:			

Reason for letting of Property: -

- I/We authorise the Council to seek and receive any information which the Council may require from the Department of Social, Community and Family Affairs, Revenue Commissioners, Private Residential Tenancies Board, Lending Institution or from any source in relation to this application.
- I/We are aware that the inclusion of any false or misleading information, or exclusion of vital information, could invalidate my/our application.
- I/we agree to comply with all terms and conditions in relation to letting my/our affordable property.
- I/We will inform the Private Residential Tenancies Board, the Revenue Commissioners and my/our lending institution (if applicable) in regard to the letting of my/our affordable property and comply with their terms and conditions.
- I/we agree to continue to pay my mortgage including mortgage protection insurance each month and not allow the mortgage to fall into arrears.
- I/we accept that the clawback applies for a period of 20 years from the date of purchase, subject to the reduction provided between years 10 and 20 for normal residency by the purchaser. If the premises are not occupied by the purchaser, then the reduction does not apply.

Signature of Borrower:-

Signature of Joint Borrower:-

Date: _____