

DUBLIN CITY COUNCIL
RIGHT OF RESIDENCE FORM

RE:
(Address of property)

I/We:
(Name(s))

In consideration of natural love and affection which I/We bear for:

Name(s):

Hereby grant to him/her/them a right of residence at address:

.....

Which house I/We confirm I/We own.

SIGNED:

SIGNED:

DATE:

Kindly return completed form to:

DUBLIN CITY COUNCIL
HOUSING & RESIDENTIAL SERVICES,
LOANS, SALES AND CONSENTS.
BLOCK 2, FLOOR 2,
CIVIC OFFICES,
WOOD QUAY, DUBLIN 8.

If you have any queries:

PLEASE TELEPHONE
(01) 222 2649 or (01) 222 2553