

## DOCUMENTATION CHECKLIST

Document	Accepted Types of Documents	✓
<b>Photographic Identification</b> (Must be in date and be clearly visible)	<p><b><i>Must provide <u>one</u> of the following documents per applicant:</i></b></p> <ul style="list-style-type: none"> <li>➤ Passport/Passport Card</li> <li>➤ Public Service Card (both sides)</li> <li>➤ EU/EEA driving licence – this must contain a photograph</li> <li>➤ Current EU National Identity Card</li> </ul>	
<b>Proof of Address</b> (Must be dated within the last 3 months)	<p><b><i>Must provide <u>one</u> of the following documents per applicant:</i></b></p> <ul style="list-style-type: none"> <li>➤ Utility Bill (where a first bill is provided for a utility bill, a second form of address verification is required)</li> <li>➤ Correspondence from a Regulated Financial Institution operating in Republic of Ireland e.g. Bank, Credit Union, Building Society, Insurance Company</li> <li>➤ Correspondence from a Government Department/Body</li> </ul>	
<b>Proof of PPSN</b>	<p><b><i>Must provide <u>one</u> of the following documents per applicant:</i></b></p> <ul style="list-style-type: none"> <li>➤ Official documentation from Revenue showing your name and PPSN (Statement of Liability, Employment Details Summary etc.);</li> <li>➤ Letter from Dept. of Employment Affairs and Social Protection addressed to you showing your name and PPSN;</li> <li>➤ Payslip;</li> <li>➤ Current Medical Card;</li> <li>➤ Public Service Card (both sides);</li> <li>➤ Current Drug Payment Scheme Card.</li> </ul>	
<b>Proof of Right to Reside in Ireland for Non-EU/EEA/UK Nationals</b>	<p><b><i>Must provide evidence for the below per applicant, where relevant:</i></b></p> <p>For non-EU applicants, a valid copy of an Irish Resident Permit, indicating stamp/permission type (Stamp 1, 4, 5, 1G, etc.)</p>	

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<b>PAYE Employees</b>	<p><b><i>Must provide ALL of the following documents per applicant (where relevant):</i></b></p> <ul style="list-style-type: none"> <li>➤ Salary Certificate dated within 6 months from your employer (form available at end of checklist);</li> <li>➤ Employment Details Summary 2024.</li> </ul>	
<b>Self Employed</b>	<p><b><i>Must provide <u>ALL</u> of the following per applicant where relevant:</i></b></p> <ul style="list-style-type: none"> <li>➤ Audited/Certified accounts for the previous 2 years;</li> <li>➤ Self-Assessment Income Tax Return for 2024 (Form 11);</li> <li>➤ Projected Income for the coming 12 months;</li> <li>➤ Tax payment receipt</li> </ul>	
<b>Not Employed but in receipt of other income</b>	<p><b><i>Must provide <u>ALL</u> of the following per applicant where relevant</i></b></p> <ul style="list-style-type: none"> <li>➤ Documentary evidence of all social insurance and social assistance payments, allowances, and pensions being received by members of the household for previous 12 months</li> </ul>	
<b>Additional Sources of Income</b>	<p><b><i>Must provide evidence of income received over the previous 12 months for any of the below sources of income:</i></b></p> <ul style="list-style-type: none"> <li>➤ Maintenance Payments received;</li> <li>➤ Income from rental properties, dividends, capital investments, and other similar sources of income;</li> <li>➤ Occupational and social welfare pensions, from whatever source, including from sources abroad</li> <li>➤ All income from social insurance and social assistance payments, allowances and benefits, including Working Family Payment.</li> </ul>	
<b>Financial Statements</b> <b><i>Evidence required to show proof of ability to fund the purchase</i></b>	6 months statements from <u>ALL</u> current/savings accounts for the applicant(s) which they are named on, including from sources abroad.	

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<b>Mortgage Approval In Principle (MAIP)</b>	Letter from Mortgage Provider/Broker/Local Authority Home Loan confirming maximum mortgage capacity approved for in principle.	
<b>Fresh Start Principle (where applicable)</b>	<p><b><i>Documentation required below dependent on individual's circumstance:</i></b></p> <ul style="list-style-type: none"> <li>➤ Court decree/ solicitors letter confirming the applicant is divorced/separated or otherwise, and have left the property, AND divested themselves of their interest in the property. Details of maintenance arrangement where applicable;</li> <li>➤ Where the applicant has been divested of the property through insolvency or bankruptcy proceedings, proof of the applicant's status on the bankruptcy register is required;</li> <li>➤ Proof that any property you previously owned/built has been sold, or given as part of a personal insolvency, bankruptcy agreement or other legal insolvency process. A separate assessment of creditworthiness will be conducted.</li> </ul>	
<b>Applicant who's dwelling is not suited to the current needs of their household, due to its size (where applicable)</b>	<ul style="list-style-type: none"> <li>➤ Up to date valuation</li> </ul>	
<b>Evidence of First Time Buyer - Help to Buy (where applicable)</b>	<p>Proof of eligibility and estimated amount from Revenue <u>OR</u></p> <p>An affidavit stamped by a solicitor confirming main applicant (and joint applicant – if applicable) do not own, and have never owned a property</p>	
<b>30% Residency Rule</b>	<p><b><i>Please submit any of the below for <u>EACH</u> of the 3 years to verify a continuous period of residency (e.g. Documentation dated 2022, 2023 and 2024).</i></b></p> <p><b><i>For joint applicants, only one applicant is required to submit evidence of this.</i></b></p> <ul style="list-style-type: none"> <li>➤ Utility bills NOT including mobile phone bills;</li> <li>➤ Bank statements/credit union statements;</li> <li>➤ Documents issued by Government Departments showing your address;</li> <li>➤ Revenue documentation.</li> </ul>	

# Documentation checklist

## Accepted Bank Statement Format:

Bank statements must clearly show the applicants information on each page. Screenshots from mobile apps which are not in this format will not be accepted. Please see below for example of acceptable format:



## Current Account

Statement of Account with Allied Irish Banks, p.l.c.

Branch  
10 Main Street, Town, County

1 National Sort Code  
93-12-34

Account Name  
Mr. JOHN SMITH

MR JOHN A SMITH  
43 MAIN AVENUE  
TOWN  
COUNTY

Telephone  
01-6123456

2 Account Number  
12345-087

Page Number  
528

Date of Statement  
21 June 2012

IBAN: IE25 AIBK 9312 3412 3450 87 (BIC: AIBKIE2D) 5 Authorized Limit At Date Of Statement €500					
4					
3					
6					
Date	Details	Debit €	Credit €	8	Balance €
05 June 2012	BALANCE FORWARD				698.58
	Interest Rate				
	Lending @ 11.85%				
	INTEREST CHARGED	0.08			
	(INCL. SURCHARGE-				
	INTEREST 0.00)				698.50
06 June 2012	POS RETAILER NAME	40.00			
	ATM SUTTON	100.00			
	06JUNE12 TIME 14.52				
	OP/ESB SUPPLY	160.00			
	OP/BORD GAIS	200.00			198.50
10 June 2012	TEXT TOP-UP	20.00			
	0861234567				
	501525	50.00			
	EMPLOYER NAME		2,600.00		
	DSFA CB EFT		332.00		2960.50
15 June 2012	*INET TO SAVINGS	2000.00			960.50
18 June 2012	PETER O'BRIEN	1150.00			189.50dr
21 June 2012	CREDIT TRANSFER		100.00		89.50

# Documentation checklist

## Accepted Revenue Documents Format:

Revenue documents must clearly show the applicant's name and PPSN on the same page. Screenshots from mobile browsers which are not in this format will not be accepted. Please see below for example of acceptable format:

In all correspondence please quote:  
PPS No:



Business Division - Cork  
Revenue House  
Blackpool  
Cork

Joseph Blogs  
Unit 26J,  
Cork Airport Business Park,  
Cork.

Enquiries: 01 7383612  
03 Jan 2020

## Employment Detail Summary 2019

If any of this information is incorrect, please contact your employer/pension provider directly to have it corrected

### Job/pension details

Employer/pension provider name	ABC Ltd
Employer/pension provider no.	1234567A
Employment ID	EMPID00000
Start Date	23/05/2016

### Pay, Income Tax, USC, LPT and PRSI details

Gross pay	€100,250.00
Pay for Income Tax	€100,250.00
Income Tax paid	€30,000.00
Taxable benefits	€0.00
Pay for USC	€100,250.00
USC paid	€5,500
LPT deducted	€250.00
Employee PRSI paid	€4,000.00
Employer PRSI paid	€50,000.00

### PRSI classes

PRSI class	A1
Number of Insurable weeks	52



## SALARY CERTIFICATE – Applicant A

### EMPLOYMENT DETAILS – to be completed by Employer

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 ☐

### SALARY DETAILS

	Guaranteed	Regular	Irregular
Gross basic wage/salary: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Overtime: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bonus: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Commission: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>

### THIS SECTION IS TO BE COMPLETED BY AN AUTHORISED COMPANY OFFICIAL

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

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

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

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

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

Please authenticate with company stamp or seal

### OTHER INCOME DETAILS – to be completed by Applicant

\*Please see the Income Assessment Policy Document for further information on Other Assessable Income

Other Income\*, if applicable: \_\_\_\_\_ p.a

Please provide details: \_\_\_\_\_

I declare that the information provided on this form is true and accurate.

Signed: \_\_\_\_\_

THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE

## SALARY CERTIFICATE – Applicant B

### EMPLOYMENT DETAILS – to be completed by Employer

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 ☐

### SALARY DETAILS

	Guaranteed	Regular	Irregular
Gross basic wage/salary: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Overtime: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bonus: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>
Commission: _____ p.a	<input type="text"/>	<input type="text"/>	<input type="text"/>

### THIS SECTION IS TO BE COMPLETED BY AN AUTHORISED COMPANY OFFICIAL

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

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

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

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

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

Please authenticate with company stamp or seal

### OTHER INCOME DETAILS – to be completed by Applicant

\*Please see the Income Assessment Policy Document for further information on Other Assessable Income

Other Income, if applicable: \_\_\_\_\_ p.a

Please provide details: \_\_\_\_\_

\_\_\_\_\_

I declare that the information provided on this form is true and accurate.

Signed: \_\_\_\_\_

THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE