

**TO: Housing Welfare Section, Dublin City Council,
Civic Offices, Block 1, Upper Ground Floor, Fishamble
Street, Dublin 8**

Tel: 222-2233; Fax 222-2699; Email housing.welfare@dublincity.ie

HOUSING WELFARE SECTION REFERRAL FORM

Referral for attention of: ***Patricia Cussen (Team A) ; Doone Taylor/ Eithne O'Donnell (Team B) ; Catherine Redmond (Team C); Anne Helferty (Travelling Team) (see footnotes below)***¹

Name of Client:.....
.....

Address of Client.....
.....

Former address (if known).....

Phone contact number for client (if any)
.....

Is client/ tenant aware of referral ? Yes/No/ I don't know

Main problem/ issue, as described by the client (if client aware of referral):

Additional comments, if any, by person making the referral:

¹ Team A covers the Ballymun and Finglas areas

Team B covers the Ballyfermot, Crumlin, Inchicore/ Kilmmainham, South Inner City, and South East areas

Team C covers the North Central, North East Inner City and North West Inner City areas

Travelling Team covers members of the Travelling community

Please complete both pages

Name of person making referral:

Title :

Office:

Phone:

Date of referral: (dd/mm/yyyy) / /

Email:

What this referral can hopefully achieve:

Other contact person or agencies: