#

**House Purchase Loan**

Application Form

**Housing and Community**

 **Services**

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| **Dublin City Council,****House Purchase Loan Section,**Block 2, Floor 2,**Civic Offices,**Wood Quay,**Dublin 8.**Opening hours: 9.30am – 4pmTel: 01 222 5449**Web:** [**www.dublincity.ie**](http://www.dublincity.ie)   |

**PLEASE DO NOT COMPLETE THIS APPLICATION FORM UNTIL YOU HAVE FIRST DISCUSSED THIS WITH A MEMBER OF OUR LOAN STAFF.**

 **TEL 01 222 5449**

NOV 2014

**Please read the following information carefully *before* completing this application form. All questions on this form must be answered. Please write your answers clearly in block letters.**

**To submit this application you must meet with a housing advisor from this office to arrange a suitable appointment please phone Tel: 01 222 5449.**

**No postal applications will be accepted**

# TO BE ELIGIBLE FOR A HOUSE PURCHASE LOAN APPLICANTS MUST:

1. Be First Time Buyers. Neither applicant can be a previous owner or current owner of a property.
2. Be aged between 18 and 70 years.
3. Be earning under €50,000 in the previous tax year as a single applicant or in the case of a joint application both incomes should not be greater than €75,000 in the previous tax year.
4. Be in continuous permanent employment (this can be self employed) for at least two years in the case of the primary earner and in continuous permanent employment for one year in the case of a second applicant (if second applicant is employed).
5. Of good credit standing with a satisfactory credit record (a credit check will be carried out with the Irish Credit Bureau and the courts before loan approval is granted),
6. Have an indefinite right to remain in Ireland either through nationality or refugee status

(Stamp 4).

1. Be able to provide proof of inadequate loan offers from two lending agencies.
2. Have a minimum deposit of 10% of the purchase price of the property.
3. Provide proof of marital status (if divorced, legal documents must be submitted).
4. If you are a Tenant of Dublin City Council, or hold a tenancy under the RAS scheme, you must have a clear rent account for 6 months prior to applying for the loan and your rent assessment must be up to date.

If you are in private rented accommodation, you must have a clear rent account for 6 months prior to applying and show a rent book or proof of rent payment for 6 months prior to applying - i.e. a bank or credit union statement.

**If you meet all of the above criteria you will be eligible to submit an application.**

**WHAT HAPPENS NEXT?**

* Contact Dublin City Council to arrange an appointment for interview with a Housing Advisor to submit your application form
* Following the interview process, your application will be forwarded to the Affordable Housing Partnership who will perform the necessary credit and judgment checks.
* Subject to the credit and judgement checks, a recommendation will be made to either approve the loan in principle or to decline loan approval.

**Please note: The property you wish to purchase must be located in the administrative area of Dublin City Council**

## CHECKLIST FOR APPLICANT/S

#### Please submit original documents with application

### Copies will not be accepted

**Incomplete applications will be returned**

* Letters from 2 lending agencies showing inadequate loan offers
* Application Fee of €75 which is non refundable
* Fully Completed Application Form
* HPL1 Form to be stamped by Revenue Commissioner (Appendix 1A)
* Photographic Identification (Current Passport or Drivers Licence)
* Proof of Present Address (Current Utility Bill or Bank Statement)
* Original Salary Certificate (Appendix 1),
* Up-to-date, computer generated P60

(*Please note if the P60 is not for 52 weeks a P21 is required)*

* 4 Recent Payslips
* Signed Customer Declarations
* Original of All Bank Account Statements (6 Months) includes Current/Cashsave/Deposit etc.
* Original Savings Statements (12 Months)
* Original Loan Statements (12 Months)
* Original Credit Card Statements (6 Months)
* Original Credit Union Statements (12 Months)
* Tenants of Dublin City Council or tenants under the RAS scheme must submit a letter from the Rent Assessment Section confirming the rent assessment is up to date and the account is clear for 6 months prior to applying. Tenants in private rented accommodation must have a clear rent account for 6 months prior to applying and be able to show a rent book or proof of payment.

***Self-Employed***

* Accountants Report/Audited Accounts (2 Years Required)
* Current Tax Balancing Statement
* Current Preliminary Revenue Tax Payment Receipt

***Applicants in receipt of Social Welfare***

* Appendix 2 completed by the Department of Social Welfare
* Statement of total benefit received in the proceeding tax year

**Local Authority Reference**

**Dublin City Council**

**Loan Application**

|  |  |
| --- | --- |
| **Second applicant** |  |
| first name: |  |
|  | middle initial: |  |  |
| surname: | maiden name if applicable: |  |
|  |  |  |  |
| date of birth: |  | PPSN: |
|  | / |  | / |  |  |
| Gender: Female |  Male |  |
| mother’s maiden name: | Applicants nationality: |  |
|  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| marital status: | married |  | single |  | separated |  |  |
|  |  |  |  |
|  | divorced |  | widower |  | other |  |  |
| e-mail: |  |
|  |  |
| work tel: |  |
|  |  |
| home tel: |  |
|  |  |
| mobile: |  |
|  |  |
|  |  |  |  |  |  |  |  |  |
| present address: |  |  |  |  |  |
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| how long at this address: | years: |  | months: |  |  |
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| previous address: |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |
| number of dependents: |  | ages: |  |  |
|  |  |  |  |  |  |  |  |  |
|  |
|  |  |  |  |  | yes | monthly rent | no |  |
| do you rent your current accommodation: |  |  € |  |  |

|  |
| --- |
| **A. Personal Details** |
| Number of applicants |  |  |  |  |
| **First applicant** |  |
| first name: |  |
|  | middle initial: |  |  |
| surname: | maiden name if applicable: |  |
|  |  |  |  |
| date of birth: |  | PPSN: |
|  | / |  | / |  |  |
| Gender: Female |  Male |  |
| mother’s maiden name: | Applicants nationality: |  |
|  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| marital status: | married |  | single |  | separated |  |  |
|  |  |  |  |
|  | divorced |  | widower |  | other |  |  |
| e-mail: |  |
|  |  |
| work tel: |  |
|  |  |
| home tel: |  |
|  |  |
| mobile: |  |
|  |  |
|  |  |  |  |  |  |  |  |  |
| present address: |  |  |  |  |  |
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| how long at this address: | years: |  | months: |  |  |
|  |  |  |  |  |  |  |  |  |
| previous address: |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |
| number of dependents: |  | ages: |  |  |
|  |  |  |  |  |  |  |  |  |
| **Details of your present accommodation:** |
|  |  |  |  |  | yes | monthly rent | no |  |
| do you rent your current accommodation: |  |  € |  |  |

Tenant Living with Parents Tenant Living with Parents

Other Local Authority Tenant Other Local Authority Tenant

Local Authority Tenants please Quote Rent Account Number

|  |
| --- |
| **Details of your present accommodation (continued)** |

Are you on a local authority Housing List? Are you on a local authority Housing List?

No Yes No Yes

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you ever owned or built a house or flat? Have you ever owned or built a house or flat?

No Yes No Yes

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| **Loan Purpose** |
|  |  |  |  |  |  |  |  |  |

Private purchase:

Tenant Purchase Sales Scheme:

Please state Address of Property to be purchased (if known):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **B. Employment Status**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| employed: |  | self-employed: |  | not employed: |  |  |
|  |  |  |  |  |  |  |
|  |
|  |  |
| employer name: |  |
|  |  |
| employer address: |  |
|  |  |  |
|  |  |
| state type of business: |  |
|  |  |
| occupation: |  |
|  |  |
| employment status e.g. permanent, etc: |  |
|  |  |
|  |  |
| date commenced present employment: |  | / |  | / |  |  |
|  |  |
| gross basic salary p.a.: |  € |  |  |
|  |  |  |  |
| overtime p.a. |  |  | € |  |
|  |  |  |  |
| bonus p.a. |  |  | € |  |
|  |  |  |  |
| commission p.a. |  |  | € |  |
|  |  |  |  |
| other income p.a.: |  € |  |
| source of other annual income: |  |
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| If less than 6 months in current employment, please give previous employment contact details: |
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| trading name and address: |  |
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| date of commencement of business: |  | / |  | / |  |  |
| nature of business: |  |
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|  |  |  |  |  |  |  |  |  |
| sole trader: |  | director / partner: |  |  |  |  |
|  |  |  |  |
| State % shareholding: |  |  |

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|  |  |  |  |  |  |  |  |  |
| employed: |  | self-employed: |  | not employed: |  |  |
|  |  |  |  |  |  |  |
| **Employment Details** |
|  |  |
| employer name: |  |
|  |  |
| employer address: |  |
|  |  |  |
|  |  |
| state type of business: |  |
|  |  |
| occupation: |  |
|  |  |
| employment status e.g. permanent, etc: |  |
|  |  |
|  |  |
| date commenced present employment: |  | / |  | / |  |  |
|  |  |
| gross basic salary p.a.: |  € |  |  |
|  |  |  |  |
| overtime p.a. |  |  | € |  |
|  |  |  |  |
| bonus p.a. |  |  | € |  |
|  |  |  |  |
| commission p.a. |  |  | € |  |
|  |  |  |  |
| other income p.a.: |  € |  |
| source of other annual income: |  |
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|  |  |  |  |
| If less than 6 months in current employment, please give previous employment contact details: |
|  |
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| **Self-Employment Details** |
|  |  |  |  |  |
| trading name and address: |  |
|  |  |  |
|  |  |
|  |  |  |
|  |  |
|  |  |  |  |
| date of commencement of business: |  | / |  | / |  |  |
| nature of business: |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| sole trader: |  | director / partner: |  |  |  |  |
|  |  |  |  |
| State % shareholding: |  |  |
| **Self-Employment Details *(continued)*** |
|  |  |  |
| total net profit: |  € |  |
| *all partners, before drawings)* |  |  |
| drawings: |  € |  |
| *(state your drawings only)* |  |  |
| previous employer’s name and address: |  |
|  |  |
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|  |  |  |  |
| previous employment from: |  | / |  | / |  |  |
|  |  |  |  |
| previous employment to: |  | / |  | / |  |  |
| nature of business: |  |
|  |  |
| occupation: |  |
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|  |  |
| --- | --- |
| total net profit: |  € |
| *(all partners, before drawings)* |  |
| drawings: |  € |
| *(state your drawings only)* |  |
| previous employer’s name and address: |
|  |
|  |  |
|  |
|  |  |  |
| previous employment from: |  | / |  | / |  |
|  |  |  |
| previous employment to: |  | / |  | / |  |
| nature of business: |
|  |
| occupation: |
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| **C. Financial History & Commitments**  |
|  |
| **Savings** |  |
|  |  | first applicant |  | second applicant |  | financial institution(s) |
| Deposits Account: |  | € |  | € |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| current account: |  | € |  | € |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| other: |  | € |  | € |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |
| **Financial Commitments (including credit card borrowings)** |  |
| borrower |  | purpose |  | € amount owing |  | € monthly repayment |  | lender |
|  |  |  |  |  |  |  |  |  |
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|  |  |  |  | € |  | € |  |  |

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| **Financial History & Commitments *continued*** |
|  |
| **First applicant** | **Second applicant** |
| Have you or your spouse ever been insolvent, bankrupt, involved in court proceedings for debt or compounded with creditors? Have any judgements been registered against you personally? Have any judgements been registered against a company of which you are a director? |  | Have you or your spouse ever been insolvent, bankrupt, involved in court proceedings for debt or compounded with creditors? Have any judgements been registered against you personally? Have any judgements been registered against a company of which you are a director? |
|  |  |  |
| Yes |  |  | No |  |  |  | Yes |  |  | No |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| if yes to any of the above, please give details: |  | if yes to any of the above, please give details: |
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|  |  |  |
| are you obliged to pay alimony/child support or separation maintenance? |  | are you obliged to pay alimony/child support or separation maintenance? |
|  |  |  |
| Yes |  |  | No |  |  |  | Yes |  |  | No |  |  |
|  |  |  |
| if yes, please state monthly amount: |  | if yes, please state monthly amount: |
| € |  |  | € |  |

Have you ever had a loan or made a previous application Have you ever had a loan or made a previous application

to any other lending agency? to any other lending agency?

Yes: No: Yes: No:

If yes, please give details: If yes, please give details:

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**Important Notices**

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| **Consent under the consumer credit act 1995** |
|  |
| Under the Consumer Credit Act 1995 a customer’s consent is required if the customer wishes Dublin City Councilto be able to telephone him/her at his/her place of employment/business in connection with a Credit Agreement. From time to time Dublin City Council **may** need to contact you during working hours in connection with the Account. Should you wish to give your consent you should sign this part.I/we hereby consent to **Dublin City Council** contacting me/us by telephone at my/our place of employment/business. |
|  |
| **Signature of first applicant:** | **Date** |
|  |  |  |
| **Signature of second applicant** |  | **Date** |
|  |  |  |
|  |  |  |
| **Credit reference searching & reporting** |
|  |
| Dublin City Councilmay from time to time make searches against you on the records held by credit reference agencies. When such a search is made the Credit reference agencies will keep a record for a period (usually for a year) that the search has been made Dublin City Council **may** also provide information to credit reference agencies concerning this application and the manner in which the Account is conducted. For this Dublin City Councilrequires your consent. Please note that if you do not consent Dublin City Council **may** not be able to consider your application.You have the right at any time to request from any credit reference agency a copy of any “personal data” within the meaning of the Data Protection Act 1988 (as amended or re-enacted from time to time) that such a credit reference agency holds about you (for which they may charge a small fee) and to have inaccuracies in that information corrected.I/We authorise Dublin City Councilto carry our credit reference searches against me/us. I/We acknowledge that such credit reference agencies will record that such a search has been made and disclose that fact to their members for a period of at least one year. I/We also authorise Dublin City Council **to** provide information concerning this application and the conduct of the Account to credit reference agencies. |
|  |
| **Signature of first applicant:** | **Date** |
|  |  |  |
| **Signature of second applicant** |  | **Date** |
|  |  |  |
|  |  |  |
| **Data protection notice** |
|  |
| ACCESS TO PERSONAL DATA. You have the right at any time to request a copy of any 'personal data' within the meaning of the Data Protection Act 1988 (as amended or re-enacted from time to time) that Dublin City Councilholds about you and to have inaccuracies in that information corrected. |
|  |
| **Consumer Credit Act 1995** |
|  |
| Please note carefully the following information relating to Housing Loans within the meaning of the Consumer Credit Act 1995.**“WARNING: YOUR HOME IS AT RISK IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR ANY OTHER LOAN SECURED ON IT.”****VARIABLE RATE LOANS - “THE PAYMENT RATES ON THIS HOUSING LOAN MAY BE ADJUSTED BY THE LENDER FROM TIME TO TIME.”****ARREARS**Interest will be applied to the outstanding balance of the loan. This balance includes any element of unpaid interest and charges, which will accrue interest on the rate applicable to the account.**VALUATION**Where the property is sourced by the applicant on the open market, each application must be supported by a valuation report carried out by an approved independent or local authority valuer. Valuation/survey fees are payable by the applicant(s) to the firm of valuers who undertake the valuation. |

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| --- |
| **Your right to cancel the contract** |
|  |
| You do not have a right to cancel the contract once you have drawn down a housing loan but you may repay a housing loan early as outlined in the next paragraph. |

|  |
| --- |
| **Rights to terminate the contract** |
|  |
| You may at any time repay all or part of the loan earlyIf you fail to make any payment due to us in respect of the loan or, if any of the other events of default which will be specified in the contract between us for the loan were to occur we may call for the immediate repayment of the loan together with all accrued but unpaid interest thereon and all other costs and expenses payable under the contract. We may also enforce our mortgage over your property and sell it and realize any security given to us and apply the proceeds of sale in repayment of the loan and all interest and costs and expenses. |
|  |
| **Governing law and language** |
|  |
| All our dealings with you, and all contracts between us, will be governed by the laws of Ireland.All contracts between us, all information, which we supply to you, and all other communications with you will be in English. |
|  |
| **Complaint procedures** |
|  |
| We aim to provide an efficient service to our customers and it is our policy to ensure that all your concerns are dealt with fairly and promptly.If you have any complaint please telephone or write to: Dublin City Council, House Purchase Loan Section, Block 2, Floor 2, Wood Quay, Dublin 8.Telephone Number: 2225449.**WARNINGS**YOUR HOME IS AT RISK IF YOU DO NOT KEEP UP PAYMENTS ON A MORTGAGE OR ANY OTHER LOAN SECURED ON IT.THE PAYMENT RATES ON A HOUSING LOAN MAY BE ADJUSTED BY THE LENDER FROM TIME TO TIME.THE COST OF MONTHLY REPAYMENTS MAY RISE. |
|  |
|  |
|  |

**Declaration**

|  |
| --- |
| **Personal details** |
|  |
| Applicant’s name(s): |
|  |
| Address of property to be mortgaged: |
|  |
|  |
| **Details of mortgage required** |
|  |
| Purchase price/value of property: |  | Amount of loan required: |
| € |  | € |
| Repayment term required: |  |  |
|  |  |  |
|  |
| **Valuation** |
|  |
| Dublin City Council will require a valuation of and certain other information about the property you wish to buy. The valuation report, of which you will obtain a copy, is designed especially for the needs of Dublin City Council**;** to help us decide if the property represents adequate security for the loan you require. The valuation report will be based on a limited inspection and is not intended to be a structural survey nor a condition report. It is important that you should not rely in anyway on the valuation report. It is possible that there are defects in the property which are not reported but which a more detailed inspection would reveal. This means that the valuation report may not make you aware of defects, which could affect your decision to buy. Dublin City Councilrecommends that you obtain a more comprehensive report or structural survey. |
|  |
| Insurance |
|  |
| **Mortgage Protection**It is a condition on all loans that Mortgage Protection Cover is effected before the loan cheque issues. There is a standard mortgage protection insurance scheme, which is compulsory with Dublin City Council house purchase loans. The cost of mortgage protection insurance, which covers both death and permanent disability, will be added to your monthly mortgage repayments.**Property Insurance**It is a condition on all loans that property insurance is effected before the loan cheque issues. |
|  |
| **Signature & Declaration** |
|  |
| I/We declare that the information given by Me /Us in this form and in appendix 1, 1A and 2 attached is correct to the best of My/Our knowledge and belief and that these documents were completed before this declaration was signed. I/We declare that I/We am/are of full age and I/We hereby make application for an advance with Dublin City Councilupon mortgage of the property described above. I/We declare that the foregoing statements and particulars and any other information we have given to Dublin City Councilto be strictly true, to the best of my/our knowledge and belief. I/We acknowledge that, in order to process this loan application, Dublin City Councilits servants and agents will hold and process information in connection with this application (together with such other information supplied to or obtained by Dublin City Councilseparately) and will hold and process same for administrative, customer care and service purposes and the statistical purposes of the Department of the Environment Heritage and Local Government where required by that department. I/We have read the section above headed valuation, I/We understand that I/We should not rely on the valuation report in any way in deciding whether or not to purchase the property. I/We understand that if, contrary to the Dublin City Councilrecommendation, I/We do not request or obtain an independent structural survey for my/our own purposes, I/We run the risk that the property may suffer from serious defects which are not mentioned in the Valuation Report and that the report may be defective, or may be inadequate for my/our purposes. I/We further understand that should Dublin City Councilgrant a loan this does not signify an assurance or guarantee that the property is soundly constructed and free from defects. I/We note that if I/We are approved by Dublin City Councilfor a loan that at any time before the completion of the mortgage transaction Dublin City Councilhas the right to withdraw or vary the approval.  |
|  |
| **Signatures** |
|  |
| **First applicant:** |  | **Date:** |
|  |  |  |
| **Second applicant:** |  | **Date:** |
|  |  |  |

**Dublin City Council**

##### House Purchase Loan Section

Block 2, Floor 2,

Civic Offices

Wood Quay

 Dublin 8.

 **Tel:** 01 222 5449

 **Web site**: [www.dublincity.ie](http://www.dublincity.ie)

Office Hours: Enquires: 9.30am- 4.00pm open through lunchtime

**APPENDICES**

 **APPENDIX 1 – SALARY CERTIFICATE**

 **APPENDIX 1A – HPL 1 FORM**

 **APPENDIX 2 – SOCIAL WELFARE FORM**

**Appendix 1 - SALARY CERTIFICATE – (to be completed by First Applicants Employer)**

**SALARY DETAILS**

 **Guaranteed Regular Irregular**

**Gross basic wage/salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.   **

**Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.   **

**Bonus: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.   **

**Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.   **

**Other income\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.   **

**\*Please give details of other income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employment Details**

**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 **

**So far are you able to tell will he/she continue to be in your service? Yes  No **

**If so, what is the maximum of such scale and by what annual increments reached?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Appendix 1 - SALARY CERTIFICATE – (to be completed by Second Applicants Employer)**

**THIS SECTION IS TO BE COMPLETED BY AN AUTHOIRISED COMPANY OFFICAL**

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

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

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

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Please authenticate with company stamp or seal**

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

**THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE**

**Employment Details**

**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 **

**So far are you able to tell will he/she continue to be in your service? Yes  No **

**If so, what is the maximum of such scale and by what annual increments reached?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Appendix 1 - SALARY CERTIFICATE – (to be completed by First Applicants Employer)**

**SALARY DETAILS**

 **Guaranteed Regular Irregular**

**Gross basic wage/salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Bonus:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_p.a   **

**Other income\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ p.a   **

**\*Please give details of other income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employment Details**

**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 **

**So far are you able to tell will he/she continue to be in your service? Yes  No **

**If so, what is the maximum of such scale and by what annual increments reached?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SALARY DETAILS**

 **Guaranteed Regular Irregular**

**Gross basic wage/salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.**  ** **

**Overtime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.**  ** **

**Bonus: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.**  ** **

**Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.**  ** **

**Other income\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P.A.   **

**\*Please give details of other income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**THIS SECTION IS TO BE COMPLETED BY AN AUTHOIRISED COMPANY OFFICAL**

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

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

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

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please authenticate with company stamp or seal**

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

**THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE**

**THIS SECTION IS TO BE COMPLETED BY AN AUTHOIRISED COMPANY OFFICAL**

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

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

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

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Please authenticate with company stamp or seal**

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

**THE INFORMATION GIVEN WILL BE TREATED IN THE STRICTEST CONFIDENCE**

|  |
| --- |
| **Appendix 1A - HPL1 Form – First Applicant** |
|  |
|  |
| THIS FORM MUST BE COMPLETED BY THE **REVENUE COMMISSIONERS** AND RETURNED WITH EVERY APPLICATION. |
|  |
|  |
|  |
|  | YOUR FULL NAME(BLOCK LETTERS) |  |  |  |
|  |  |  |  |  |
|  | PREVIOUS NAME(IF ANY) |  |  |  |
|  |  |  |  |  |
|  | PRESENT ADDRESS |  |  |  |
|  |  |  |  |  |
|  | PREVIOUS ADDRESS(IF ANY) |  |  |  |
|  |  |  |  |  |
|  | PPS NUMBER (PRSI NUMBER) |  |  |  |
|  |  |  |  |  |
|  |
|  |
|  |
| **TO BE COMPLETED BY INSPECTOR OF TAXES** |
|  |
| I hereby certify, in accordance with my records and to the best of my knowledge, that the above named person has not previously claimed income relief in respect of interest paid on money borrowed to purchase or build a dwelling. |
|  |
| **SIGNED** |  | **DATE** |  | / |  | / |  |  |
|  |
|  | **OFFICIAL STAMP** |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |

|  |
| --- |
| **Appendix 1A - HPL1 Form – Second Applicant** |
|  |
|  |
| THIS FORM MUST BE COMPLETED BY THE **REVENUE COMMISSIONERS** AND RETURNED WITH EVERY APPLICATION. |
|  |
|  |
|  |
|  | YOUR FULL NAME(BLOCK LETTERS) |  |  |  |
|  |  |  |  |  |
|  | PREVIOUS NAME(IF ANY) |  |  |  |
|  |  |  |  |  |
|  | PRESENT ADDRESS |  |  |  |
|  |  |  |  |  |
|  | PREVIOUS ADDRESS(IF ANY) |  |  |  |
|  |  |  |  |  |
|  | PPS NUMBER (PRSI NUMBER) |  |  |  |
|  |  |  |  |  |
|  |
|  |
|  |
| **TO BE COMPLETED BY INSPECTOR OF TAXES** |
|  |
| I hereby certify, in accordance with my records and to the best of my knowledge, that the above named person has not previously claimed income relief in respect of interest paid on money borrowed to purchase or build a dwelling. |
|  |
| **SIGNED** |  | **DATE** |  | / |  | / |  |  |
|  |
|  | **OFFICIAL STAMP** |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |

|  |
| --- |
| **Appendix 2** |

**THIS FORM IS REQUIRED ONLY IF ONE APPLICANT IS ON SOCIAL WELFARE.**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RSI Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In relation to the above named loan applicant I confirm that the following information is correct**:

**TOTAL AMOUNT OF UNEMPLOYMENT BENEFIT / ASSISTANCE RECEIVED FROM**:

1st January \_\_\_\_\_\_\_\_\_\_\_ to 31st December \_\_\_\_\_\_\_\_\_\_\_\_\_ = € \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CURRENT AMOUNT OF UNEMPLOYMENT BENEFIT /ASSISTANCE BEING RECEIVED

€ \_\_\_\_\_\_\_\_ WEEKLY

|  |
| --- |
| **TO BE COMPLETED BY AN OFFICIAL OF THE DEPARTMENT OF SOCIAL WELFARE/EMPLOYMENT EXCHANGE** |
|  |
| I hereby certify, in accordance with my records and to the best of my knowledge that the above named person is in receipt of social welfare payments. |
|  |
| **SIGNED** |  | **DATE** |  | / |  | / |  |  |
|  |
|  | **OFFICIAL STAMP** |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |