



## **ADDITIONAL DEPENDANT**

Please complete in full, details of Additional Dependant. When submitting information for an additional dependant please provide the following supporting documentation:

1. Copy Of Dependant Birth Certificate.
2. Proof Of Dependant PPSN.
3. Proof Of Child Benefit i.e. post office receipt, up to date copy of bank statement (not mini statement) and letter from Social Welfare, which shows the amount, name and address of applicant. This child benefit amount should include the amount payable to you for the additional dependant you are adding to your housing application.
4. **HAP TENANT(S) MUST PROVIDE** Up-To-Date Evidence Of Income
  - **Employed:** Employment Detail Summary, Statement of Liability and 4 out of the last 6 payslips.
  - **Self-Employed:** A minimum of 2 years accounts with an Auditors report and a Notice of Assessment
  - **Social Welfare Income:** A recent statement from the Department of Social Protection detailing all welfare payments received and commencement date of receipt of such payments.

### **WEEKLY INCOME DETAILS**

Please complete the following in respect of yourself and Applicant 2: spouse/partner (if applicable).

**PLEASE STATE GROSS WEEKLY INCOME FROM: [Each source of income should be supported by relevant documentation i.e. social welfare cert, Employment Detail Summary, Statement of Liability, payslips]**

	APPLICANT	APPLICANT 2: SPOUSE/PARTNER
Name		
Tel. No.		
Employment	€	€
Self-Employment	€	€
<b>Social Welfare</b> - Payment Type(s)		
- Social Welfare [Total]	€	€
Maintenance received [if applicable]	€	€
Other income sources	€	€
Please specify		
<b>Weekly Deductions</b>		
PAYE	€	€
PRSI	€	€
Universal Social Charge	€	€
ASC		

**ADDITIONAL DEPENDANT - REF NO:****DETAILS OF OTHER HOUSEHOLD MEMBERS SEEKING ACCOMMODATION****OTHER HOUSEHOLD MEMBER 1**

P.P.S. Number	<table><tr><td>Figures</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>Letters</td><td></td><td></td></tr></table>	Figures								Letters			Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Figures								Letters							
First name(s)	<input type="text"/>	Marital status	<input type="text"/>												
Surname	<input type="text"/>	Mother's birth surname	<input type="text"/>												
Birth surname (if different)	<input type="text"/>	Relationship with applicant	<input type="text"/>												
Date of Birth [dd/mm/yy]	<input type="text"/>	Citizenship	<input type="checkbox"/> Irish	<input type="checkbox"/> UK											
[Attach birth certificate]	<input type="text"/>		<input type="checkbox"/> Other EEA*	<input type="checkbox"/> Non-EEA											
Country of Birth	<input type="text"/>	Basis of Stay	<input type="checkbox"/> Refugee	<input type="checkbox"/> Leave to remain in Ireland	<input type="checkbox"/> Subsidiary Protection Status										

**EMPLOYMENT STATUS**

<input type="checkbox"/> Employed [full-time or part-time]	<input type="checkbox"/> Unemployed [receiving social community/welfare benefit]	<input type="checkbox"/> Homemaker [no income]
<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Pensioner/Retired	<input type="checkbox"/> Student/Child
<input type="checkbox"/> Employed in Back to Work/FÁS Scheme	<input type="checkbox"/> Lone Parent support only	
<input type="checkbox"/> Other, please specify	<input type="text"/>	
Weekly Income	€ <input type="text"/>	

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Surname	<input type="text"/>	Mother's birth surname	<input type="text"/>												
Birth surname (if different)	<input type="text"/>	Relationship with applicant	<input type="text"/>												
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<input type="checkbox"/> Self-Employed	<input type="checkbox"/> Pensioner/Retired	<input type="checkbox"/> Student/Child
<input type="checkbox"/> Employed in Back to Work/FÁS Scheme	<input type="checkbox"/> Lone Parent support only	
<input type="checkbox"/> Other, please specify	<input type="text"/>	
Weekly Income	€ <input type="text"/>	

**Please copy this sheet for further household members.**

EEA: this refers to the European Economic Area (EEA) whose member states include: Austria, Belgium, Bulgaria, Czech Republic, Croatia, Cyprus, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden.