



# **BRAY TOWN COUNCIL**

## **HOUSING DEPARTMENT.**

### **BRAY TOWN COUNCIL**

#### **APPLICATION FOR EXTENSION TO RELIEVE OVERCROWDING**

If you have any queries, please telephone: (01) 2744900

Application form to be returned to: **Housing Section,  
Bray Town Council,  
Civic Offices,  
Main Street,  
Bray,  
Co. Wicklow.**

**APPLICATION FOR EXTENSION TO RELIEVE OVERCROWDING**



**TO BE COMPLETED BY BRAY TOWN COUNCIL TENANT:**

**Name of Tenant(s):** \_\_\_\_\_ **Customer ID No-----**

**Address of Tennancy:** \_\_\_\_\_

**Name(s) on Bray Town Council Tenancy Agreement:** \_\_\_\_\_

\_\_\_\_\_

**Telephone No:** \_\_\_\_\_ **(H)** \_\_\_\_\_ **(W)**

**IS Rent Account Clear?** \_\_\_\_\_ **YES / NO** \_\_\_\_\_

**P.P.S. Number:** \_\_\_\_\_

**Are you or have you been in breach of your tenancy agreement?** \_\_\_\_\_ **YES /NO**

\_\_\_\_\_

**Have you ever been convicted of a drug related or other criminal offence** \_\_\_ **YES /NO**

\_\_\_\_\_

**Occupation of Tenant(s):** \_\_\_\_\_

**Number in applicant's family:** \_\_\_\_\_ **Total income of applicant's family €** \_\_\_\_\_

**Any serious health problems in the family:** \_\_\_\_\_

***DETAILS OF PERSONS RESIDING IN DWELLING INCLUDING APPLICANT***

<b><i>Name</i></b>	<b><i>Date of Birth</i></b>	<b><i>Relationship to Applicant</i></b>	<b><i>Occupation</i></b>	<b><i>Employer</i></b>	<b><i>Weekly Income</i></b>

**NOTE:**

The number of persons residing in the dwelling should correspond with the number of persons declared on the family form in accordance with the differential rent scheme. This form will be checked against the latest 'family form' on file and any change will result in rent being reassessed. It may be necessary for the tenant and all occupants over 18 years of age to provide proof of income. Failure to do so will render this application invalid.

**NUMBER OF ROOMS IN HOUSE AT PRESENT**

*Please give details of current accommodation: (No. of bedrooms etc.)*

<b>No. of Bedrooms</b>	
<b>Kitchen</b>	
<b>Dining?</b>	
<b>Living Room?</b>	
<b>Other Room(s) ?</b>	

**HAVE YOU APPLIED FOR A TRANSFER TO MORE SUITABLE ACCOMADATION**

\_\_\_\_\_ **YES / NO** \_\_\_\_\_

**IF NO STATE REASON** \_\_\_\_\_

**GENERAL DESCRIPTION OF EXTENSION SOUGHT:**

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

**REASON WHY EXTENSION IS REQUESTED:**

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

*“I have completed the form to the best of my knowledge and have taken into account the terms and conditions applicable, and declare that the above to be true and factual on behalf of myself and those residing in my dwelling”.*

**Signature of Tenant(s):** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Terms and Conditions**

- 1. Applicants should have a clear rent account**
- 2. Applicants must have adhered to all aspects of their tenancy agreement**
- 3. The number of persons residing in the dwelling should correspond with the number of persons declared on the family form in accordance with the differential rent scheme. This form will be checked against the latest family form on file and any changes will result in rent being reassessed. It may be necessary for the tenant and all occupants over 18 years of age to provide proof of income. Failure to do so will render this application invalid.**
- 4. It will be necessary for an inspection to be carried out by an Environmental Health Officer to determine whether an extension is warranted on the basis of overcrowding**
- 5. It should be noted that it may be that the overcrowding situation can better be alleviated by a transfer to another house in the Bray area**