

Westmeath County Council Housing Transfer Application Form

*Please note in accordance with the Scheme of Letting Priorities an application for transfer will be considered on the basis of accommodation needs (structural) e.g. , **medical**, **overcrowding** or **downsizing**. An applicant will only be eligible for consideration if they have complied with the following:

- Have a clear rent account
- Have adhered to the terms of their Tenancy Agreement including maintaining the property to an acceptable standard
- Have not engaged in anti-social behaviour
- Have lived peaceably in their current dwelling in accordance with terms of their tenancy agreement
- Have resided in their current dwelling for at least two years

*All questions to be answered fully-incomplete applications will not be considered.

Part A: Applicants Details

Name(s): _____

Address: _____

Contact Phone Number: _____

Family members

Name	Date of Birth	Source of income	Weekly income

Part B: Existing Accommodation

Rent a/c no: _____ Weekly rent: € _____ Number of bedrooms: _____

Reason for seeking transfer: Overcrowding Downsizing Other

If Other please give details (if any):

Continued → → →

Part C: Area Preference

Please Indicate **Two** locations (1 & 2) where housing transfer is being sought:

NOTE: Only two locations will be considered for housing transfer purposes.

Athlone		Clonmellon		Moyvore	
Ballinahown		Delvin		Mullingar	
Ballymore		Finnea		Moate	
Ballynacarigy		Glasson		Multyfarnham	
Castletown-Geoghegan		Killucan/Rathwire		Raharney	
Collinstown		Kinnegad		Rathowan	
Castlepollard		Kilbeggan		Rochfortbridge	
Coole		Milltownpass		Tyrrellspass	

Part D: Declaration

I declare that the information and particulars given by me on this application form are true and correct, and I undertake to notify the Council of any change in my circumstances.

Signed: Applicant(s): _____

Date: _____

**Completed forms to be forwarded to: Housing Section Westmeath County Council
County Buildings Mullingar.**

NOTE: The furnishing of false or misleading information is an offence liable to prosecution.

Office Use ONLY

Customer ID _____ File Ref. _____

PPS No. _____ Date Tenancy Commenced: _____

Is rent account clear: Yes No If No what are arrears € _____

Have tenants been involved in, or currently under investigation for, anti social behaviour? Yes No

If Yes please give details

Other information (if any):

Recommendation to Housing Officer: Approved Rejected

Notes: _____

Signed: _____

Date: _____

Approved Rejected

notes: _____

Signed: _____ Housing Officer Date: _____