



# Application form for Farm Assist

## How to complete this application form.

- Please tear off this page and use as a guide to filling in this form.
- Please use **BLACK** ball point pen.
- Please use **BLOCK LETTERS** and place an X in the relevant boxes.
- Please answer **all questions** that apply to you.
- You need a Personal Public Service Number (PPS No.) before you apply.
- Please supply farm receipts and invoices in date order to confirm farm income or sales and farm purchases and expenses covering the last 12 months.

Fill in all **Parts** as they apply to you. When form is completed, read **Part 9** and sign declaration in **Part 1**.

If you need help to complete this form, please contact your local Social Welfare Office or Citizens Information Centre.

For more information, log on to **[www.welfare.ie](http://www.welfare.ie)**

### **Important:**

You should apply as soon as you become eligible otherwise you could lose some payment.

## How to fill in first page of this form

To help us in processing your application:

- Print letters and numbers clearly.
- Use one box for each character (letter or number).

Please see example below.

1. Your PPS No.:

1	2	3	4	5	6	7	T		
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2. Title: (insert an 'X' or specify)

Mr.  Mrs.  Ms.  Other

3. Surname:

M	U	R	P	H	Y														
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4. First name(s):

M	A	U	R	E	E	N													
---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--

5. Your first name as it appears on your birth certificate:

M	A	R	Y																
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6. Birth surname:

M	C	D	E	R	M	O	T	T											
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7. Your mother's birth surname:

K	E	L	L	Y															
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8. Your date of birth:

2	8	0	2	1	9	7	0
D	D	M	M	Y	Y	Y	Y

## Contact Details

9. Your address:

1		N	E	W		S	T	R	E	E	T								
O	L	D		T	O	W	N												
C	O		D	O	N	E	G	A	L										

10. Your telephone number:

0	8	6	1	2	3	4	5	6	7				
M	O	B	I	L	E								
0	1	7	0	4	3	0	0	0					
L	A	N	D	L	I	N	E						

11. Your email address:

M	M	U	R	P	H	Y	@	W	E	L	F	A	R	E	.	I	E		

# SAMPLE









**33. Are you self-employed at present, e.g. Agriculture Contracting etc?**

Yes  No

If 'Yes', please state:

Your occupation:

Type of business or trade you have:

Your profit over the last year: €  ,  .

Tax number or reference number:

**34. Are you taking part in a Community Employment Scheme or a Rural Social Scheme?**

Yes  No

If 'Yes', please state:

Employer's name:

Employer's address:

Amount: €  ,  .  a week

Employer's tax number:

**35. If you are getting any Social Protection payment or a Health Service Executive (HSE) payment or pension or allowance from any other country, please state:**

Type of payment:

Name of country:

Your claim or reference number:

Amount: €  ,  .  a week

**36. Are you on leave of absence, paid or unpaid, from your employment?**

Yes  No

If 'Yes', please state:

a career break  term-time leave

parental leave  maternity leave

If you are on any **other** leave of absence, please give details in the space provided:

How long you have been on leave: From:

To:

D D M M Y Y Y Y



















**Have you enclosed the following?**

- **P60 for the last full tax year**  
(if you were employed for that year)
- **Statements from financial institutions for the last 3 months**  
(if you, your spouse, civil partner or cohabitant have money or investments in a financial institution)
- **Letter from school or college**  
(if you are claiming for child(ren) aged between 18 and 22 who are in full-time education)
- **Maintenance order**  
(if applicable)
- **Declaration from District Veterinary Office**  
(confirming stock details at last test and all payments from the Department of Agriculture, Fisheries and Food received in the last 12 months)
- **Farm receipts and invoices**  
(confirming farm income and sales and farm purchases and expenses covering the last 12 months)

**If you were born, married or entered into a civil partnership outside the Republic of Ireland:**

- **Your birth certificate**
- **Your marriage certificate or civil partnership registration certificate**
- **Divorce Decree (Decree Absolute) certificate or Decree of Dissolution of civil partnership**
- **Your spouse's or civil partner's birth certificate**
- **Your child(ren)'s birth certificate(s)** (if born outside the Republic of Ireland and if applying for an increase for them). Note: No birth certificate is needed if you are already getting Child Benefit.

**Original certificates only.**

**Please remember to sign the declaration in Part 1.**

**Send this completed application form to your local Social Welfare Office.**

**Data Protection and Freedom of Information**

**We, the Department of Social Protection, will treat all information and personal data you give as confidential. We will only disclose it to other people or bodies according to the law.**

Explanations and terms used in this form are intended as a guide only and are not a legal interpretation.

