

# Application form for Household Benefits Package

Social Welfare Services

**HB 1**

Data Classification R



**You need a Personal Public Service Number (PPS No.) before you apply.**

- Please use **BLACK** ball point pen.
- Please use **BLOCK LETTERS** and place an X in the relevant boxes.
- Please answer **all questions**.
- For more information, please visit [www.welfare.ie](http://www.welfare.ie).

## Part 1

## Your own details

1. **Your PPS No:**

2. **Title:** (insert an 'X' or specify) Mr.  Mrs.  Ms.  Other

3. **Surname:**

4. **First name(s):**

5. **Your birth surname:**

6. **Your date of birth:**

D D M M Y Y Y Y

7. **Your mother's birth surname:**

## Contact Details

8. **Your address:**

County

Postcode

9. **Your telephone number:**

MOBILE

LANDLINE

10. **Your email address:**

## Declaration

I declare that the information given by me on this form is truthful and complete. I understand that if any of the information I provide is untrue or misleading or if I fail to disclose any relevant information, that I will be required to repay any payment I receive from the Department and that I may be prosecuted. I undertake to immediately advise the Department of any change in my circumstances which may affect my continued entitlement.

Date:

D D M M Y Y Y Y

Signature (not block letters)

**Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.**



**Part 1 continued**

**Your own details**

**11. Have you changed address recently?**

Yes  No

If Yes, please give details of your previous address


**12. Are you living permanently in the State?**

Yes  No

**13. Are you aged 70 years or over?**

Yes  No

**14. Are you living alone?**

Yes  No

If No, please give details of those living with you:

Name	PPS Number	How are they related to you?	Source of income or social welfare payment or student	Gross pay if employed

**15. Are you getting a private/ occupational pension?**

Yes  No

**Are you getting a social security payment from another country?**

Yes  No

**If 'Yes' to either of the above, please state:**

Type of payment:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Source of payment:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**16. If you are aged between 66 and 70 years and not in receipt of a qualifying payment (for more information see [www.welfare.ie](http://www.welfare.ie)), do you want to be means tested?**

Yes  No

**17. If you or anyone in your household has ever applied for Household Benefits, please state:**

Applicant's surname:

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Applicant's first name:

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PPS Number:

--	--	--	--	--	--	--	--	--	--

**18. What is your nationality?**

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**19. Are you legally entitled to reside in the Republic of Ireland?**

Yes  No

**If you are a holder of a GNIB (Garda National Immigration Bureau) card, please provide a copy of the GNIB card and your letter from the Department of Justice and Equality.**





You can get your payment at a post office of your choice or direct to your current, deposit or savings account in a financial institution. An account must be in your name or jointly held by you. Please complete one option below.

Financial Institution

You will find the following details printed on statements from your financial institution.

Name of financial institution:

Bank Identifier Code (BIC):

International Bank Account Number (IBAN):

Name(s) of account holder(s):

Name 1:

Name 2 (if any):

Post Office

Please enter below the name and address of the post office where you wish to collect your payment.

Post office name and address:

Send this completed application form with copies of relevant bills to:

**Household Benefits Section**  
 Department of Employment Affairs and Social Protection  
 Social Welfare Services  
 College Road  
 Sligo

Telephone: (071) 915 7100  
 LoCall: 1890 500 000

If you are calling from outside the Republic of Ireland please call + 353 71 915 7100

**Note**  
 The rates charged for using 1890 (LoCall) numbers may vary among different service providers.

Data Protection Statement

The Department of Employment Affairs and Social Protection administers Ireland's social protection system. Customers are required to provide personal data to determine eligibility for relevant payments/benefits. Personal data may be exchanged with other Government Departments/Agencies where provided for by law. Our data protection policy is available at [www.welfare.ie/dataprotection](http://www.welfare.ie/dataprotection) or in hard copy.

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

