

11 Appendices

11.1 FORM DWWTS NIP (a) Grant Payment Claim Form

GRANT PAYMENT CLAIM FORM

Works for the remediation, repair, upgrade or replacement of a Domestic Wastewater Treatment System (DWWTS), related to an inspection under the National Inspection Plan.

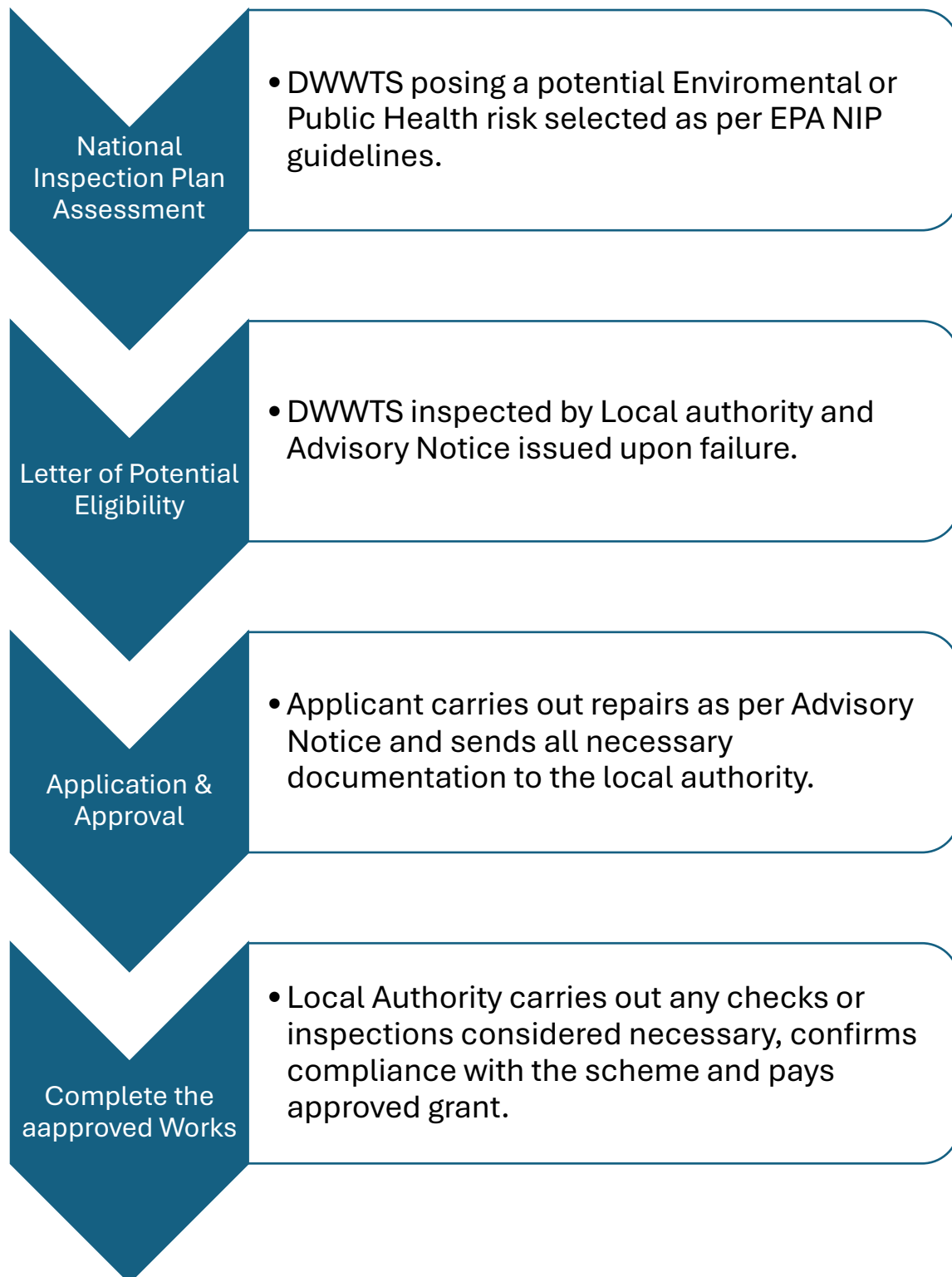
- Please read the following information notes before completing the application form.
- All questions on the form must be answered and, where specified, supporting documents must be provided. Incomplete forms, or those not accompanied by the appropriate documents, will not be processed.
- Work must NOT start before the local authority or its representative's visit. If work has started before that date, your application will not be considered.
- Once the application has been approved and works completed, the local authority may carry out such inspections or other checks as it considers necessary before approving claim for payment.
- The grant scheme is administered by local authorities. Any enquiries should be addressed to the Rural Water Liaison Officer or the Environment Section in the local authority.
- All forms to be used can be obtained from the local authority, who will provide assistance with completing them if required.
- In respect of an applicant receiving grants, subsidies or similar type payments from a Government Department or Public Authority that have a total value of more than €10,000 during the year, you will need an e-Tax Clearance certificate.
- The local authority reserves the right to make any necessary enquiries to verify information or for clarification of supporting documents provided with a grant application. An application that includes false or misleading information or documents will not be approved for a grant.

1. Details of the Applicant

Name of applicant (in block capitals):	
Address (location of DWWTS):	
EIRCODE (required):	
Telephone no:	
E-mail address:	
E-Tax clearance printout:	Yes ☐ No ☐

In the last 12 mths, have you received a grant from any public body? If yes, please provide details: <ul style="list-style-type: none"> • amount: • date paid: 	Yes ☐ No ☐ €
2. Details of the DWWTS	
Date inspection carried out:	
Advisory Notice reference number:	
Date of local authority Notice of Compliance:	
3. Previous Payments	
Was any grant paid in respect of this property in the last 7 years? If yes, please provide details: <ul style="list-style-type: none"> • amount: • date paid: 	Yes ☐ No ☐ €
4. General description and cost of works carried out (Itemised receipt(s) must be provided when the works are completed):	
5. Details of Contractor(s) (e-Tax Clearance printout for each contractor <u>must</u> be provided)	
Contractor 1	Contractor 2 (if applicable)
Contractor name:	Contractor name:
Contractor address:	Contractor address:
EIRCODE:	EIRCODE:
6. Declaration	
I declare that the information provided by me on this grant payment claim form is correct and I understand that the provision of any false or misleading information or invalid supporting documents may result in this claim being cancelled	
Signature of claimant: _____	
Date: _____	

11.2 Domestic Wastewater Treatment Systems Grant NIP Application Process Flow Chart



gov.ie/Housing

The Department of
Housing, Local Government and Heritage



An Roinn Tithíochta,
Rialtais Áitiúil agus Oidhreachta
Department of Housing,
Local Government and Heritage