

Residential Application Form

Name Of Applicant:				
Address of Applicant:				
Address of property:				
Property ID (if available)				
Contact number:				
Contact email:				
Is your building within the Special Regeneration Area?		Yes	No	
Is your building a Protected Structure?		Yes	No	
If yes, has a section 57 Declaration been issued?		Yes	No	
Is your building within an Architectural Conservation Areas?		Yes	No	
Is your building on the National Inventory of Architectural Heritage (NIAH)?		Yes	No	
Does the proposed work require planning permission?		Yes	No	
If yes, has this been granted?		Yes	No	

If Granted, please state the Reference Number

Please note the onus is on applicants to establish if planning permission is required for any conversion / refurbishment works.





Do the proposed works cover between 38m ² and 210m ² ?		Yes	No	
Detailed Description of work intended to be carried out:				
An Estimate Cost of work:	€			
What is the current market value of the property:	€			
Are you applying for or receiving any State funded grants for this work?				
If Yes, please state the type of grant and amount				



For Office Use Only:

Ref No: _____



Property will first be used as sole or main resi of applicant post refurbishment/conversion

Urban Regeneration Incentive	
Property will first be used as sole or main residence	Comhairle Cathrach & Contae Phort Láirge Waterford City & County Council Yes No
of applicant post refurbishment/conversion	
I declare that the information provided in this form is cor	rect and accurate.
Applicant Signature:	Date: