



HAP RENT REVIEW FORM

Name: _____

Address: _____

Phone No: _____

Account No: _____

Email: _____

Please list all Household Members

	First Names	Surname	Date of Birth	P.P.S. No.	Relationship to Main Tenant	Weekly Income	Source of Income / In full time education / other (please specify)
1.					Tenant	€	
2.						€	
3.						€	
4.						€	
5.						€	
6.						€	
7.						€	


Note: Please supply details of all occupants. If you are EMPLOYED, please include three recent consecutive payslips. If you are SELF EMPLOYED, please include a recent Notice of Tax Assessment from Revenue.

Income of any kind except Children's Allowance must be shown. Under the heading of WEEKLY INCOME, show any monies such as: Jobseeker's Benefit or Assistance, Pensions, Disability Allowance, Carer's Benefit/Allowance, Working Family Payment (WFP), Maintenance payments, Employment, CE Scheme etc.

I /We authorise the Housing Authority to make whatever enquiries it considers necessary to verify the information given on this form. I / We certify the details given above are true and correct.

Signed: _____

Date: _____

Continue over page. 



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Changes in the Household since the last Rent Review form was submitted.

Occupant moved in Occupant moved out

Name: _____ PPSN: _____ Date of Birth: _____

Date Moved In / Out: _____ Relationship to tenant: _____

Previous Address if moved in / New address if moved out: _____

(Moved out – provide proof i.e., tenancy agreement or utility bill)

Where a person has moved in written permission is required. The Permission to Reside will be processed by our Applications Section who will contact you directly.

Please note the following:

- **The provision of false or misleading information is an offence liable to prosecution.**
- **All Housing Services will only be carried out where the tenants' rent account is up to date.**
- **Failure to pay your rent is a breach of your Tenancy Agreement.**
- **If your household income or the number of persons residing with you changes you are required to notify the HAP Section without delay.**

Completed forms and supporting documentation can be returned to either office location or alternatively scanned to the email address below:

Customer Services Desk
Waterford City & County Council
Baileys New Street
Waterford
X91 XH42.

Customer Services Desk
Civic Offices
Waterford City & County Council
Davitts Quay,
Dungarvan
Co. Waterford X35 Y326

Tel: 0818 102 020 | Email: hap@waterfordcouncil.ie

The Housing Department requires customers to provide personal information in this form.

The personal data you provide will be processed in accordance with the General Data Protection Regulations 2016 and the Data Protection Act 1998 to 2018

Data may be shared internally with the Finance section and other public bodies such as the HSE, Tusla, Social Welfare, Revenue and Gardaí in order to carry out legislative and administrative functions in connection with the rent assessment, credit control, and succession of tenancy and for the prevention or detection of Fraud.