

**MORTGAGE ALLOWANCE SCHEME**

- Please read all questions carefully and fill out the form in BLOCK CAPITALS
  - Complete the Statutory Declaration and then Sign the form
  - The completed application form should be returned to the Local Authority for the Area in which the private dwelling is being purchased.
  - You must also have form MAT 2 B certified by your Inspector of Taxes.
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1. **Full Name** of (A) Applicant (s) (A) \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Contact Number \_\_\_\_\_

(B) Spouse/Partner (B) \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Contact Number \_\_\_\_\_

2. **FAMILY**

|                                | Aged 16 or over      | Under 16             |
|--------------------------------|----------------------|----------------------|
|                                | <input type="text"/> | <input type="text"/> |
| Number of males in household   | <input type="text"/> | <input type="text"/> |
| Number of females in household | <input type="text"/> | <input type="text"/> |

3. **INCOME FOR PREVIOUS TAX YEAR**

Gross Income of (A) Applicant(s) (A) \_\_\_\_\_

(B) Spouse/Partner (B) \_\_\_\_\_

In the previous Tax Year 20\_\_\_\_/20\_\_\_\_

4. **Details of the dwelling which you are handing back to the Local Authority**

(A) Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ City/County

(B) Name & Address of Local Authority to which you pay rent or purchase annuity  
\_\_\_\_\_  
\_\_\_\_\_

**5. DETAILS OF THE DWELLING YOU ARE PURCHASING OR BUILDING**

Address of Dwelling \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(A) Is the dwelling: A House  A Flat

(B) Is the dwelling: **NEW**  Previously Occupied

(C) If New, are you:  
Purchasing the Dwelling  Having it built on your  
from a Builder? Own Site?

(D) Give date you entered into contract to purchase or build the dwelling

(E) If building has started on your own site, give date on which the foundations were poured

(F) Name & Address of Lending Agency providing the Mortgage: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(G) Amount of Mortgage \_\_\_\_\_

(H) Contract Price of House \_\_\_\_\_

(I) Monthly Repayment \_\_\_\_\_

(J) Date the Mortgage executed \_\_\_\_\_.

(K) If you have already occupied the dwelling, give date of occupation \_\_\_\_\_

(L) Will the dwelling be your normal place of residence? \_\_\_\_\_.

**THE FOLLOWING STATUTORY DECLARATION MUST BE MADE BY ALL APPLICANTS**

I/We declare that the information given by me/us for the purpose of obtaining the mortgage allowance is correct. I /We am/are aware of the conditions of payment for the allowance and I/We believe that these conditions are fulfilled.

I /We make this solemn declaration conscientiously believing the same true and by virtue of the Statutory Declaration s Act, 1938.

I/We authorise the Local Authority and the Minister for the Environment to make any enquiries from official sources as it hr he may consider necessary to establish entitlement to the allowance.

Applicant's Signature \_\_\_\_\_

Spouse /Partners Signature \_\_\_\_\_

\*Declared before me by \_\_\_\_\_ who is /are personally known to me (or who is /are identified to me by \_\_\_\_\_ who is known to me) at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\* to be completed by Commissioner for Oaths/Notary Public/ Peace Commissioner/ Member of the Clergy / Member of the Garda Síochana.

Signature of Witness \_\_\_\_\_

Occupation of Witness \_\_\_\_\_

Address \_\_\_\_\_

Date: \_\_\_\_\_

**Warning:** Any person who has given false or misleading information for the purpose of obtaining an allowance renders him/herself liable to severe penalties.

Applicants must provide the Local Authority with such information as the Authority may require in regard to location, layout etc. of the dwelling is being purchased or built.

**INSPECTOR OF TAXES CERTIFICATE**

**(in respect of Mortgage Allowance for Local Authority Tenants/Tenant Purchasers)**

**NOTES** \* Please read explanatory notes MAT 2B attached

- This form must accompany completed application forms for Mortgage Allowance.
- MAT 2B – Part 2 should also be completed if applicant is married or a joint application is being made.

**SECTION 1: To be completed in full by the applicant. The builder’s details are available only from the builder and must be inserted before the form is sent to the Tax Office. The completion of Section 2 is necessary only where a new dwelling is being purchased.**

Name \_\_\_\_\_ Income Tax Ref. No \_\_\_\_\_

Address of \_\_\_\_\_ Income Tax District \_\_\_\_\_  
Local Authority \_\_\_\_\_  
Dwelling \_\_\_\_\_

Address of \_\_\_\_\_ Employer’s Registered No. \_\_\_\_\_  
Dwelling being \_\_\_\_\_  
Purchased/built \_\_\_\_\_

Is the Dwelling **NEW**

**Previously Occupied**

**SECTION 2**

Name & Address of Main Builder

|                            |
|----------------------------|
| _____                      |
| _____                      |
| _____                      |
| Income Tax Ref. No. _____  |
| VAT Registration No. _____ |
| TAX District _____         |

C2 Certificate Number

OR

Tax Clearance Cert. Expiry Date

**SECTION 3**

I confirm to the best of my knowledge that the information given above is correct and my tax affairs are in order.

Signature \_\_\_\_\_

(of Applicant)

**Incomplete forms will not be certified by Inspector of Taxes.**

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**SECTION 4**

To be certified by the Applicant's Inspector of Taxes

I hereby certify, in accordance with my records and to the best of my knowledge, that the Applicant's Tax Reference Number quoted above is correct.

Signature \_\_\_\_\_

(Inspector of Taxes)

Date \_\_\_\_\_

OFFICIAL STAMP

**SECTION 1**

To be completed if applicant is married or if a joint application is being made. The builder's details are available only from the builder and must be inserted before the form is sent to the Tax Office. The completion of Section 2 is necessary only where a **new** dwelling is being purchased.

Name of Spouse/Joint Applicant \_\_\_\_\_ Income Tax Ref. No. \_\_\_\_\_

Address of Local Authority \_\_\_\_\_  
Dwelling \_\_\_\_\_ Income Tax District \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employers Registered No. of Spouse / Joint Applicant \_\_\_\_\_

Is the Dwelling      **NEW**            **Previously Occupied**     

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**SECTION 2**

Name & Address of Main Builder

**C2 CERTIFICATE NO.**

|  |
|--|
| _____<br>_____<br>_____<br><br>VAT REG. NO. _____<br>INCOME TAX REF. NO. _____<br>TAX DISTRICT _____ |
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|  |
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|  |
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**SECTION 3**

I confirm to the best of my knowledge that the information given above is correct and my tax affairs are in order.

\_\_\_\_\_  
SIGNATURE (APPLICANT)

**Incomplete forms will not be certified by the Inspector of Taxes.**

**SECTION 4**

To be certified by the Applicant's Inspector of Taxes

I hereby certify that in accordance with my records and to the best of my knowledge, that the applicant's Tax reference no. quoted above is correct.

\_\_\_\_\_  
SIGNATURE (INSPECTOR OF TAXES)

DATE \_\_\_\_\_

OFFICAL STAMP