## LAOIS COUNTY COUNCIL COMHAIRLE CHONTAE LAOISE



## **WAIVER APPLICATION FORM**

## **FIRE CHARGES**

**CUSTOMER ID:** 

NAME:

ADDRESS:							
TELEPHONE NO: TOTAL AMOUNT DUE:							
Details of Net Weekly Household Income:							
Adults in Household							
Name		Weekly Income	Source of Income/ Social Welfare Claim no.				
Children in Household  (i.e. Under 22 years of age & in Full Time Education)							
Name A	ge	Occupation	Weekly Income	Source of Income/ Social Welfare Claim no.			
Please attach certified details of household income, i.e., payslips and/or social welfare details.							
I declare that the answers given above are correct and include all household income.							
I understand that by signing this form Laois County Council will obtain and process personal data in accordance with the fulfilment of its functions and its legal obligations. Laois County Council will only use and disclose personal data in ways that are necessary for the purpose(s) for which it is collected. The Council is committed to protecting the privacy of personal data and will at all times comply with Data Protection Legislation ie The Data Protection Acts of 1988 – 2018 and the General Data Protection Regulations.							
Signature of Applicant: Date:							
Checklist:							
□ No insurance Declaration / Confirmation from Insurance co. that charge is not covered							
☐ Fully completed Application Form							
☐ Copy of Payslips and/or Social Welfare Receipts							
PLEASE RETURN TO: Fire Services, Finance Department, Laois County Council, Áras an Chontae, JFL Avenue, Portlaoise, Co. Laois, R32 EHP9							

Email: firecharges@laoiscoco.ie

**Tel No:** 057 868 9320

**Contact Details:** 

## **FOR OFFICE USE ONLY**

Criteria	Entitlement	Weekly Income	
Single Person Income	€253.30	€	
Household Income for 2 or more Adults		€490.30	€
Additional Income is allowable f 12 living at home in full time edu means).	€40.00	€	
Additional Income is allowable f (Aged 12 and <u>over</u> , living at hom independent means).	€48.00	€	
Non assessable deductions: (Per week)	Aged 80 years and over:	€10.00	€
	Living Alone Allowance:	€22.00	€
	Fuel Allowance:	€33.00	€
	Telephone Support Allowance:	€2.50	€
Total Net Weekly Income Allow		€	

Eligible for Wai	ver:	YES 🗆 NO 🗆	
Percentage Wa	iver Approved:	<u>%</u>	
Amount of Wai	ver Approved:	€	
Revised Total C	Outstanding:	€	
SIGNED:	Niamh Bright Staff Officer		DATE:
APPROVED:	Julie Bergin Financial/Management	 Accountant	DATE: