

CIS Reference No:	
Date Stamp:	
For official use only:	

Community Involvement Scheme for Road Works Expression of Interest

	211p1 0001	Empression of interest	
Please read the Guidance Notes before com	nleting this form	email to decroad	

1.Name of Road (if known):

Please attach map

3. Townland or address:

5.Estimated length of works (m) Please attach map showing extent of work.

7.Does the road serve any other purpose (e.g. turbary rights, farming access, community facilities etc)?

email to: dccroadscentral@donegalcoco.ie

2.Road number of Road (if known):

4. Municipal District

6.Number of occupied dwellings served by road

8.Description of the works to be carried out:

Please tick each box that you believe applies to the works to be carried out

General (G):

providing hard stands at field entrances
removal of grass verges or banks
site preparation works including the removal of grass from the centre of the road

Drainage (D):

opening, clearing and generally maintaining drains alongside roadway and adjoining land including the laying of drainage pipes, where appropriate providing gully traps at suitable locations and piping to drains, where appropriate opening inlets opening backshores /clearing water tables unblocking of shores/surface water drains

Pavement Works (P):

repair of potholes surface dressing works road strengthening works

Footpaths (F):

repair of footpaths construction of new footpaths

9. Please add any other works that you think should be considered under the scheme. Please note that these may or may not be eligible under the scheme and it may not be possible to fund these works.

Community Involvement Scheme for Road Works. Expression of interest

10. Community Group or organisation name: If the applicant is an individual please enter name here If the applicants are not a community group or organisation or individual please provide the names of the group of people who wish to carry out the work below: Name of person 1: Name of person 6: Name of person 2: Name of person 7: Name of person 3: Name of person 8: Name of person 4: Name of person 9: Name of person 5: Name of person 10: 11. Name of Representative: Contact Number: Address for Correspondence: please include Eircode e-mail address: Where a group of people are applying and a single person has been nominated as their representative the group must appoint and delegate full power to the representative named above to act for them in all correspondence and other business arising out of this application and accordingly the group agree to be bound by such correspondence and by all acts of the said representative. 12. By ticking this box the representative certifies that they have sought permission of the community group and/or persons named above and that they have been appointed and delegated full power as the representative to act for the group in all correspondence and other business arising out of this application and that they each agree to be bound by such correspondence and by all acts of the representative. 13. Please detail below the type of contribution the community group, organisation, person or group of people wishesto make. Monetary contribution (minimum 10% of the cost of the works); Works in lieu of a monetary contribution (minimum value of 20% of the cost of the works); 14. If you wish to carry out works in lieu of a monetary contribution please describe the works you would like to carry out below. Supply of machinery or equipment including operators for works Supply of skilled labour Other (please describe) If you wish to provide any further description of the works that the community will do please do so here.

Date:

Signature of Representative: