



Comhairle Contae  
Dhún na nGall  
Donegal County Council

COMHAIRLE CHONTAE DHUN NA NGALL  
DONEGAL COUNTY COUNCIL  
COUNTY HOUSE  
LIFFORD  
CO DONEGAL

Tel: (074) 91 53900 email: [ruralwater@donegalcoco.ie](mailto:ruralwater@donegalcoco.ie)

### APPLICATION FORM

**Improvement works to a private water supply where, in the opinion of the housing authority, the existing water supply is non-compliant with the Drinking Water Regulations or the quantity supplied is insufficient to meet the domestic needs of the household and the house is not connected to, or cannot reasonably be connected to an Irish Water or Private Group Water Scheme.**

- Please read the information notes before completing the application form.
- All questions on the form must be answered and, where specified, supporting documents must be provided. Incomplete forms or, those which are not accompanied by the appropriate documents, will not be processed.
- Work must NOT start before the housing authority or its representative's visit. If work has commenced before that date, your application will not be considered.
- The grant scheme is administered by housing authorities. All matters relating to the day-to-day operation of the grant scheme, including applications and payments, are a matter for the relevant housing authority.
- Any enquiries about the grant should be addressed to the relevant housing authority's Rural Water Programme Liaison Officer.

#### 1. Details of the Applicant

Name of applicant:	
Address (location of PWS to be installed or improved):	
EIRCODE (required):	
Daytime telephone No:	

Email address:	
<b>2. Details of existing PWS (if applicable)</b>	
Age of the house, the subject of the water supply:	
If there is an existing supply of piped water in the house, in what respect is it not wholesome and clean:	
<b>3. Details of proposed works</b>	
Do the proposed works involve:	
▪ an upgrading of an existing supply	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
▪ the provision of a new supply	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
▪ treatment works	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
Will the new or upgraded supply of water be used for non-domestic purposes? If yes, please give details of such uses:	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
<b>4. General description and cost of works to be undertaken (copies of quotes must also be attached)</b>	

<b>5. Previous payments</b>	
Was any grant paid in respect of this house in the last 7 years?  If yes, please provide details: (a) by whom: (b) amount: (c) date paid:	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>  (a) (b) € (c)
<b>6. Details of Contractor(s)</b> (copy of Tax Clearance Certificate for each contractor <i>must</i> be provided)	
Contractor 1	Contractor 2 (if applicable)
Contractor name:	Contractor name:
Contractor address:	Contractor address:
EIRCODE:	EIRCODE:
<b>7. Declaration</b>	
I hereby declare that the information provided by me on this application form, and all other documentation submitted in support of this application, is correct and true.  I understand that the provision of any false or misleading information or invalid supporting documentation may result in this application being cancelled.  <b>Signature of applicant:</b> _____  <b>Date:</b> _____	