



**Comhairle Chontae Liatroma
Leitrim County Council**

**Domestic Waste Water Treatment Systems
(DWWTS) - Grant for houses in High Status
Objective Catchment Areas (HSOCA)**

Grant Payment Claim Payment Form DWWTS HSOCA (b)

**Environment & Rural Water Department
Leitrim County Council
Park Lane House
Carrick on Shannon
Co. Leitrim, N41 RX53**

Tel No: (071) 9620005 ext 152
Email: ruralwater@leitrimcoco.ie

GRANT PAYMENT CLAIM FORM

Works for the remediation, repair, upgrade or replacement of a Domestic Waste Water Treatment System (DWWTS), in a High Status Objective Catchment Area (HSOCA), where a person has been approved by a local authority for a grant.

- Please read the information notes before completing the claim 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** have started before the local authority or its representative's initial visit. If work started before that date, the claim will not be considered.
- The grant scheme is administered by local authorities. Any enquiries should be addressed to the local authority's Rural Water Liaison Officer.
- All forms to be used can be obtained from the local authority, who will provide assistance with completing them (if required).
- In respect of an applicant receiving grants, subsidies or similar type payments from a Government Department or Public Authority that have a total value of more than €10,000 during the year, you will need an e-Tax Clearance Certificate.
- The local authority reserves the right to make any necessary enquiries to verify information or for clarification of supporting documents provided with a grant application. An application that includes false or misleading information or documents will not be approved for a grant.

1. Details of Applicant:	
Name of applicant (in Block Capitals):	
Address (location of DWWTS):	
Eircode:	
Telephone Number:	
Email Address:	
E-Tax Clearance Certificate printout:	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. General Description and costs of works carried out, as detailed by a competent person (itemised receipt(s) must be provided when the works are completed):	
3. Details Contractor(s): (E-Tax Clearance Certificate printout for each contractor must be provided if different from the contractor listed on the application form)	
Contractor 1:	Contractor 2 (if applicable):
Contractor Name:	Contractor Name:
Contractor Address:	Contractor Address:
Eircode:	Eircode:

4. Declaration:

I declare that the information provided by me on this grant payment claim form is correct and I understand that the provision of any false or misleading information or invalid supporting documentation may result in this claim being cancelled.

Signature of Claimant: _____

Date: _____