



Comhairle Contae an Chláir
Clare County Council

CLARE COUNTY COUNCIL

APPLICATION FOR A WAIVER/REDUCTION OF FIRE SERVICE CHARGES

(Please refer to notes overleaf before completion of Waiver Application Form)

Applicants Name:					
Applicants Address:					
Phone Number:					
Invoice No.		Invoice Ref. No.	CE / /	Amount Due:	€

Do you have House/Car Insurance?	Y / N
Does this Insurance cover the Fire Service Charge in full or partially? <i>(If NO, please submit a letter from your Insurance Company stating that the charge is not covered.)</i>	Y / N
If your insurance only part covers this charge, state amount covered	€
N.B. An application for reduction of a fire service charge will only be entertained for the amount of the charge or for part of charge that is not recoverable from an insurance company or from any other source.	

Details of All Persons (including the applicant) Living in the House and their Income				
Person's Name <i>(If the person is a pupil or student in full-time education, please give name of school/college)</i>	Age	Relationship to Applicant	Income from All Sources <i>(Please refer to notes overleaf which details how Assessable Income is to be calculated)</i>	Assessable Weekly Income (€)

(If there is insufficient room above, please attach additional details on a separate page)

Declaration

I, _____ of _____ do solemnly declare that all of the foregoing statements and particulars in this application for a waiver are true and accurate to the best of my knowledge, information and belief. I hereby authorise Clare County Council to make such enquiries as it wishes to make, to confirm the accuracy of those statements and particulars.

Signature of Applicant: _____ **Date:** _____

N.B. A false declaration may result in the loss of your waiver entitlement.

NOTES ON COMPLETION OF APPLICATION FOR WAIVER OF FIRE SERVICE CHARGES.

1. **Eligibility for waiving/partial waiving of fire service charges is based on total household income, except in the case of private motor vehicle incidents where the income threshold that applies will be based on that of the registered owner.**

Assessable Income

- (i) **Assessable income is the income from the following sources, assessed in full, but reduced by pay related social insurance contributions, income levies and any income tax payable, on such income –**

- a. Income from employment including self employment,
- b. All social insurance and social assistance payments and allowances,
- c. Maintenance payments, whether under a formal or an informal arrangement or whether procured by way of Court Order or otherwise
- d. Payments by Government Departments or State Agencies except payment listed at (iii) beneath,
- e. Rental and other income from land or property,
- f. Income from pensions of kind not already included at (b) above,
- g. In the case of self employment, persons will be obliged to submit audited accounts for the previous year and the last income tax assessment from the Inspector of Taxes.

- (ii) **Income of any employed person is, in general, the normal weekly rate of remuneration as defined in Section 2 of the Holidays (Employees) Act, 1973. All other regular payments in the nature of pay are included, including overtime.**

- (iii) **Income from the following sources is disregarded for the purpose of calculation of assessable income:-**

- a. Children's allowance, orphans allowances or orphans pensions, payable under the Social Welfare (Consolidation) Act, 1981;
- b. Guardian's payment
- c. Scholarships;
- d. Student Grants
- e. Rent and mortgage interest supplements
- f. Lump sum compensation payments.
- g. Carer's Allowance
- h. Community Employment Scheme and Back to Work Schemes.
- i. Family Income Supplement (FIS).
- j. Fuel Allowance
- k. Living Alone Allowance
- l. Blind Pension/Welfare Allowance

2. **Examples of Proof of Income:-**

- a. Applicants Employed:- Copy of P60 from previous year
- b. Applicants in receipt of Social Welfare Payment:- Copy of Paying Order, Pension Book or letter from Department of Social Welfare.
- c. Self-Employed/Farmers:- Copy of audited accounts for previous year.

3. **Forms, which are not completed in ALL respects, will be returned to the applicant.**

4. **Completed application forms, including proof of income and letter from insurance company where applicable, to be returned to:-**

**FIRE & BUILDING CONTROL, CENTRAL FIRE STATION, NEW ROAD, ENNIS, CO. CLARE.
(DÓITEÁN AGUS RIALÚ TÓGÁLA, LÁR-STÁISIÚN DÓITEÁIN, BOTHAR NUA, INIS, CO. AN
CHLÁIR.)**