



Grant for the Improvement Works to a Private Water Supply to a House



COMHAIRLE
CONTAE AN CHLÁIR

CLARE
COUNTY COUNCIL

February 2021

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.
- This form must be completed by a person applying for a grant and returned to the Local Authority.
- 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.
- The form must be accompanied by –
 - (a) Eircode
 - (b) Directions from a local landmark in the area and description/type of house
 - (c) Chemical and Bacteriological water test results (where applicable) – Analysis and certification must be carried out by a competent, recognised, independent and INAB (Irish National Accreditation Board) or equivalent accredited laboratory.**
 - (d) Where the exact nature and extent of proposed works are known at the time of application
 - (e) Three No. (3) Quotations
- Work must NOT start before inspection and works approval by the local authority. If work has commenced before that date, your application will not be considered.
- This application will only remain valid for **12 months** from the date of application.

1. Details of the Applicant	
Name of applicant:	
Address (location of PWS to be installed or improved):	
EIRCODE (required):	
Daytime telephone No:	
Email address:	

2. Details of existing PWS (if applicable)	
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:	
3. Details of proposed works	
Do the proposed works involve:	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
▪ 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"/>
4. General description and cost of works to be undertaken (copies of quotes must also be attached)	

5. Previous payments	
Was any grant paid in respect of this house in the last 7 years?	Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>
If yes, please provide details:	
(a) by whom:	(a)
(b) amount:	(b) €
(c) date paid:	(c)
6. Details of Contractor(s) (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:
7. Declaration	
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.	
Signature of applicant: _____	
Date: _____	

Please Return Form to: **Rural Water Programme
Clare County Council,
Waterpark House,
Drumbiggle Rd.,
Ennis,
Co.Clare
V95 N1NR**