

Warmer Homes Scheme

Application Form

Version 1.4

Warmer Homes Scheme

Sustainable Energy Authority of Ireland P.O. Box 119,
Cahirciveen,
Co. Kerry

https://www.seai.ie/grants/home-energy-grants/warmerhomes@seai.ie

Tel: 01 8082005







Qualifying Criteria Checklist

To qualify	for the Warmer Homes Scheme, you must:	Tick to confirm
1. 2. 3.	Own and live in your own home Confirm your home has been built and occupied prior to 2006 Be in receipt of one of the following:	
	 Fuel Allowance as part of the National Fuel Scheme Job Seekers Allowance for over six months and have a child under seven Working Family Payment One-Parent Family Payment Domiciliary Care Allowance Carers Allowance and live with the person you are caring for Disability Allowance for over six months and have a child under seven 	
	ting Documents Checklist or the Warmer Homes Scheme, you will need to submit:	Tick to confirm
A.	Completed application form (this includes providing us with your MPRN and Eircodo Signed by you Signed and stamped by a DEASP official Completed Page 3 checklist	e)
В.	Proof of ownership of your home - Please provide a copy of one of the following do O Your home insurance policy (not a quote) O Your mortgage statement O The title deeds for your property	cuments:
C.	 Your Local Property Tax letter, accompanied by a utility bill dated within the last 6 r Your name and address must be clearly indicated on the document. Please ensure the document you provide is dated within the last year. If it is not, please also provide a utility bill dated within the last 6 months. 	months
D.	 If relevant, include the following: Job Seekers Allowance – A photocopy of your child's birth certificate. Disability Allowance – A photocopy of your child's birth certificate. Carers Allowance – A Carers Allowance Confirmation form completed and stam official. 	ped by a DEASP

Submitting your application

Please submit your application form, checklist and supporting documents by post to:

Post: Warmer Homes Scheme

Sustainable Energy Authority of Ireland PO BOX 119 Cahirciveen Co. Kerry

If you need any assistance Freephone: [01] 8082005



Applicant Details

To qualify for the Warmer Homes	Scheme, you mu	st have your	Meter Po	int Referenc	e Numb	er [MPR	N] to h	and:
MPRN:								
	Your	MPRN is an	11 digit nu	ımber on the	top righ	t of you	electri	icity bill
Name of Applicant:			Eircode ³	*:				
				finder.eircoa				
Address:		•						
Contact Number:		Email	Address:					
Nominated Contact (optional)								
I would like to appoint a 'nominate my application at all times on my b		application.	I give tha	t named pers	son full p	ermissio	n to di	scuss
Name of Nominated Contact:								
Telephone No:		Email	Address:					
Relationship to applicant:								
To be completed by Dep								
is in receipt of (please tick as appro	-		, ,-					
Fuel Allowance as part of the Natio	nal Fuel Scheme							$\overline{}$
Job Seekers Allowance for over six	months					mp from		
Working Family Payment						Employ I Protec		
One-Parent Family Payment				Allalis	HEF	RE	CIOII	
Disability Allowance for over six mo	onths							
Domiciliary Care Allowance								
Carers Allowance*								
*A Carers Allowance Confirmation j	form completed o	and stamped	by a DEAS	SP official is a	ilso requ	ired		
DEASP employee signature:			Date:					
Applicant Declaration (p	olease tick b	oox, sign	and da	ite)				
I confirm I have read and accept t	he Warmer Hom	es Scheme a	nd Applica	ation Guidelin	nes.			
I consent to SEAI using my person	al data for resea	rch purposes	5.					
I consent to SEAI contacting me for	or the purpose of	obtaining fe	edback in	relation to n	ny partic	ipation		
in this scheme.								
Applicant Signature:				Date:				



To help us assess the needs of your home please answer the questions below.

1. What is the main fuel you use to heat your rooms?									
Oil	☐ Gas			Electricity		Solid-fuel e.g. coal			
2. What is the	main fu	el you us	e for ho	t water?					
Oil Gas			□ Electricity □		Solid-fuel e.g. coal				
3. Does your hot water cylinder have:									
Lagging jacket? ☐ Factory fitted insulation? ☐ No insulation or no tank? ☐									
4. Is your house in a large town or city? Yes □									No 🗆
5. Approximately, when was your house built:									
Before 1920s?				1920s –	1930s? □		1940s − 1960s? □		
1960s − 1980s? □				1960s –	1980s? □		1990s − today? □		
6. Which of the following property types best describes your house:									
Detached Hou	se?			End-of-Terrace House? □			Mid-Terrace House?		
Ground-floor apartment? □			Mid-floor apartment? \Box			Top-floor apartment?			
Semi Detached	d?			Other (i	f none above app	oly)?			
7. Does your house have a chimney?							Yes □		No 🗆
8. Does your house have a porch or draft lobby?							Yes 🗆		No 🗆
9. Does your h		Yes □		No □					
10. Do you use an electric immersion for hot water in summer?							Yes 🗆		No 🗆
11. Do you have an electricity or gas allowance (From Department of Employment Affairs & Social Protection)?							Yes □		No 🗆
12. How many people live in your house?							Number:		
13. How many people living in your house are in employment?							Number:		

FOR OFFICE USE ONLY	Initials	Date
Form Checked		
Form Re-checked		