PART B

Wexford County Council Carricklawn, Wexford, Y35 WY93 Planning Section Tel. 053 9196101

SUPPLEMENTARY INFORMATION TO BE COMPLETED FOR ALL SINGLE **RURAL HOUSING APPLICATIONS**

By filling in this section of the application you will greatly assist the Planning Authority in n

considering your application, reduce the need for further information and will save time in having a decision reached.			
1. Name of Applicant(s) (not agent)			
2. Is the proposed dwelling for:			
Occupation as a place of primary residence [For Sale Second / Holiday Home [
3. Indicate if in the event of a grant of planning permission you would be willing to accept an occupancy condition restricting first occupancy of the proposed house as a place of permanent residence for a period of 10 years.			
Yes [] No []			
Applicants or Agents are advised to consult with Table 4.6 Criteria for One-off Rural Housing of the Wexford County Development Plan that sets out the Council's policy in relation to rural housing.			
4. Will the proposed development be located in:			
(a) Area under Strong Urban Influence [] (b) Stronger Rural Area [] (c) Structurally Weak Area [] (d) Coastal Zone [] (e) Landscape & Heritage Area []			



The applicant is requested to demonstrate their need for the proposed dwelling having regard to their current living accommodation.

(a) 1. Have you ever owned a rural dw	ell	ing?
(a) 2. Do you qualify as a first-time bu (never owned a dwelling)	ye	r?
5. Can you demonstrate one of the formula rural housing needs to live at this par location (as defined in Table 4.6 of the Development Plan)	tic	ular
a) Social functional need (If 'yes' please complete question 6)	ĺ	1
b) Economic functional need (If 'yes' please complete question 7)	[1
6. Membership of Local Rural Area/So Functional Need	ocia	al
If you have been a member of the local area in the area of the proposed site, state length of time and approximate you have lived in the locality. Please a map showing proposed site & locat linkages to area and other evidence of linkage as appropriate.	ple dat pro ion	ease tes ovide of

7. Economic Functional Need

Please provide details, including appropriate documentary evidence of an economic functional need to reside in the rural area.

8. Occupational Details

Occupation	
Name & Address of Employer	
Actual Place of Work	
Distance of work from proposed site	

Any other information in support plication that you feel is relevant.	of	your

Please continue on a separate sheet if required.

Please note that all information / supporting documentation submitted will be available publicly to view online and at the Planning Authority offices.

Therefore, applicant(s) should ensure that any personal information (i.e. PPSN, Bank Account numbers, date of birth, etc.) is removed from the documentation before it is submitted as part of the planning application.

Declaration by Applicant(s)

I hereby declare that the information provided in and accompanying this application is correct, accurate and true. I understand that should any of the information be found to be deliberately misleading that the County Council shall be entitled to take appropriate action.

GDPR Compliance

I understand that <u>all</u> documentation provided with this planning application will be made available on our website, <u>www.wexfordcoco.ie</u>, prior to and following the decision on the application.

Please do not include any documents or information that you do not wish to be made public.

Signature of Applicant(s) (not Agent)

Applicant 1 (Sign & Print Name)

Applicant 2 (Sign & Print Name)

Date ___/__/