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| **REQUEST FOR ALTERATION/CARRY OUT WORKS TO PROPERTY FORM** |

***Please complete the following at return it to your housing officer at the address below***

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| To  *(Housing Officer)* |  |
| From:  *(Tenant Name & Address)* |  |
| Contact Tel No |  |

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| Please give details of the work you plan to carry out including dimensions – where applicable, please provide a copy of drawings/plans | | | |
|  | | | |
| Does this work require planning permission?  *If so, please provide a copy of permission* | | Yes | No |
| Do you intend to carry out the work yourself | | Yes | No |
| If not, please provide details of the contractor |  | | |

**Tenant Signature: …………………………………. Date: ……………………………**

**Advocate’s Signature:……………..……………. Date: ……………………………**

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| **Please return completed form to: HAIL, Central Hotel Chambers, Second Floor, 7-9 Dame Court, Dublin 2**  **Tel: 01- 671 8444 Email: info@hail.ie Web: www.hail.ie** |

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| **REQUEST FOR ALTERATION/CARRY OUT WORKS TO PROPERTY FORM - RESPONSE** |

**Response *(to be completed by Housing Officer)***

Following your request for authorisation to carry out works to your home as described in the attached form;

**Authorisation has been granted**

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| Authorisation is granted for you to complete the works as outlined in your request with the following conditions:- |
| 1. All works must be carried out by suitably a qualified tradesperson 2. All electrical work must be certified by the electrician & certificate submitted to HAIL 3. HAIL cannot compensate you for work carried out now or in the future 4. Should you vacate the property in the future, alterations carried out must either remain in the property or the property restored to its original condition 5. Any damage resulting from the completion of this work must be rectified by the tenant 6. HAIL will not maintain any fixture or fitting installed by the Tenant 7. The Tenant must notify HAIL when works commence and are complete 8. Works will be subject to inspection by HAIL staff 9. If, following inspection, the work is deemed to be a health and safety risk, the Tenant will be required to rectify this. |

**Authorisation has been denied**

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| Unfortunately, we are unable to authorise you to complete the works as outlined in your request for the following reason(s):- |
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**Signed:…………………………………………….Date: ………………………………**