

## **Circular BHIS 20/01**

### **Appendix I – Application Form A**

**TO BE COMPLETED BY APPLICANT**

## **Built Heritage Investment Scheme 2020**

**IMPORTANT NOTE**

**All sections of the form must be completed by the applicant. Incomplete applications will not be considered.**

**For further information**

**please contact your relevant local authority**

**PLEASE NOTE THE FOLLOWING BEFORE COMPLETING THIS FORM**

- **Form A** must be fully completed
- Please **type** in the relevant information, if possible
- If handwritten, please use **BLOCK CAPITALS** or ensure script is legible
- All date entries should be entered in the format **DD/MM/YYYY**
- If the structure is not presently in use, its last use must be stated in **Section 3**
- If the structure is protected by any legislation other than the Planning Acts (e.g. the National Monuments Acts), this must be stated in **Section 4**
- Where planning permission has been applied for but no decision has been made, or where the decision is under appeal, state this and the date of application or appeal in **Section 5**
- Where notification is required under section 12 (3) of the *National Monuments (Amendment) Act 1994 (Recorded Monuments)* or under section 5 (8) of the *1987 Amendment Act (Register of Historic Monuments)* details of the date on which the notification was sent to DAHG should be provided in **Section 5**
- Where Ministerial consent has been applied for but no decision has been made at the time of application to the Scheme, state this in **Section 5 including the case reference number issued by the National Monuments Service**
- The applicant must outline the total number of estimated days (a day is defined as 8 hours) of employment required for the duration of the project at the application stage in **Section 6**.
- Details of how the cost of the works, other than the amount of funding sought, is to be met must be stated in **Section 7**. The applicant must indicate the matching amount total and the source of matching funds
- The applicant must also indicate any grants, subsidies or assistance from statutory bodies, or sponsorship or assistance from a non-statutory source, received or being sought in **Section 8**. The applicant must also indicate if they have received a determination under Section 482 of the *Taxes Consolidation Act, 1997* (formerly Section 19 of the *Finance Act, 1982*), or are obtaining tax relief under the **Living City Initiative** or under the **Home Improvement Scheme**. If not, the applicant must indicate if they are in the process of applying for a determination or tax relief under *Section 482 of the Taxes Consolidation Act, 1997* (formerly Section 19 of the *Finance Act, 1982*)
- All proposed works should follow the conservation principles in the Department's *Architectural Heritage Protection Guidelines for Planning Authorities* (2011) and *Advice Series* publications. These are available from Government Publications or through any bookshop or to download from:  
<http://www.chg.gov.ie/app/uploads/2015/07/Architectural-Heritage-Protection-Guidelines-2011.pdf>
- Bats are protected under the EU Habitats Directive. Any proposed works which may affect bats or their roosts should take cognisance of DAHRRGA's bat mitigation guidelines. These are available at:  
<https://www.npws.ie/publications/search?title=bat+mitigation&keyword=&author=&series=All&year=&x=0&y=0>

- Information provided on this form in relation to the structure may be displayed on D’s or LA’s website.

**1. Project Details**

**Please provide a short, concise description of the type of works to be specifically funded under BHIS 2020 below (maximum 25 words)**

|  |
|--|
|  |
|--|

**2. Applicant Details (if owner)**

|   |      |        |
|---|------|--------|
|   |      |        |
| Owner’s Name:                           |      |        |
| Main point of contact (please specify): | Y/N: |        |
| Address:                                |      |        |
| Telephone/Mobile Number:                |      | Email: |
| Charity Number: <i>(if applicable)</i>  |      |        |
| Tax Reference Number:                   |      | Date:  |

**3. Applicant Details (if not owner)**

|   |      |        |
|---|------|--------|
|   |      |        |
| Name:                                   |      |        |
| Main point of contact (please specify): | Y/N: |        |
| Address:                                |      |        |
| Telephone/Mobile Number:                |      | Email: |
| Charity Number:                         |      |        |

|   |       |
|---|-------|
| <i>(if applicable)</i>  |       |
| Tax reference Number:   | Date: |
| Please indicate if the consent of the owner been obtained to apply under this scheme and attach consent to this Form. |       |

**4. Structure Details**

|   |                                     |
|---|-------------------------------------|
| Name:                                   | Address:                            |
| Year of construction: <i>(if known)</i> | <b>Eircode (must be provided):</b>  |
| Existing use:                           | Proposed use: <i>(if different)</i> |

**5. Classification**

|                   |   | Yes or No | If yes: enter registration number |         |
|-------------------|---|-----------|-----------------------------------|---------|
| Is the structure: | (1) a protected structure?                  |           | RPS:                              |         |
|                   | (2) a proposed protected structure?         |           |                                   |         |
|                   | (3) subject to the National Monuments Acts? |           | RMP:                              |         |
|                   | (4) in an ACA?*                             |           | Name of ACA:                      |         |
|                   | (5) included in the NIAH?***                |           | NIAH:                             | Rating: |

\* ACA = Architectural Conservation Area

\*\* NIAH = National Inventory of Architectural Heritage ([www.buildingsofireland.ie](http://www.buildingsofireland.ie))

**6. Statutory Notifications**

|  | Yes or No | If yes: enter date applied/received |
|--|-----------|-------------------------------------|
| Do the proposed works require or have they been granted planning permission?   |           | Date applied:                       |
|  |           | Planning Status:                    |
|  |           | Planning Ref. No:                   |
| Do the proposed works require notification to the Minister under the National Monuments Acts?  |           | Date of notification:               |
|  |           |                                     |
| Do the proposed works require Ministerial Consent or have they received consent under Section 14 of the National Monuments Act, 1930 (as amended)? |           | Date applied:                       |
|  |           | Date received:                      |
|  |           | Reference No:                       |
| Do any other Statutory Requirements apply?   |           | Details:                            |

**7. Project Summary**

|  | Summary |
|--|---------|
| <p>Provide a short description of the proposed works</p> <p>Describe the proposed works in no more than 300 words, in relation to:</p> <p>(a) The significance of the structure</p> <p>(b) The effectiveness of the works</p> <p><b>Estimate Employment Benefit of the project</b> including:</p> <p>i Total number of days of employment required for duration of project for all employees on the project including construction, professional staff and others (1 day=8hrs)</p> |         |

ii Types of jobs created for project and traditional craft skills to be utilised

iii Type and days of training proposed, where relevant

|   |        |         |
|---|--------|---------|
| Start and finish dates of proposed works? <b>MUST BE PROVIDED</b> | Start: | Finish: |
|---|--------|---------|

**8. Expenditure in relation to proposed works**

|  |                             |                             |
|--|-----------------------------|-----------------------------|
|  |                             |                             |
| Estimated Total Costs of Works <b>for which funding is being sought:</b> | €<br><i>(excluding VAT)</i> | €<br><i>(including VAT)</i> |
| Estimated cost of training provision:                                    | €<br><i>(excluding VAT)</i> | €<br><i>(including VAT)</i> |
| Estimated Professional Fees:   | €<br><i>(excluding VAT)</i> | €<br><i>(including VAT)</i> |
| <b>Total funding sought:</b>   | <b>€</b>                    |                             |
| Amount of matching funds:  | €                           |                             |
| Source of matching funds?  |                             |                             |

**9. Other Grants & Reliefs**

|   |  |
|---|--|
|   |  |
| Does S482 determination apply to this structure?* |  |

|  |  |
|--|--|
| Have you applied for S482 tax relief?  |  |
| Is VAT recoverable?  |  |
| Have you applied for other EU/Exchequer funding/Tax Reliefs e.g. Living City Initiative, Home Renovation Incentive?* |  |
| Have other EU/Exchequer funding /Tax Reliefs been received/refused? **   |  |

\* Section 482 of the Taxes Consolidation Act, 1997 (formerly Section 19 of the Finance Act, 1982)

\*\* This application will be cross-checked with grant data held by other state agencies (such as the Heritage Council and the Department of Housing, Planning and Local Government) to verify eligibility for funding under this scheme)

**10. Conservation Professional employed on the project**

|                          |                         |
|--------------------------|-------------------------|
|                          |                         |
| Name:                    | Position/qualification: |
| Address:                 |                         |
| Telephone/Mobile Number: | Email:                  |
| Tax Reference Number:    | Date:                   |

**If necessary, copy this page to include additional conservation professionals**

**11. Contractors/Tradespersons employed on the project**

**Contractor(s)/Tradesperson(s)**

|  |  |
|--|--|
|  |  |
| Name:  | Position/qualification:                                    |
| Address:   |  |
| Telephone/Mobile Number:   | Email:   |
| Tax Reference Number:  | Date:  |
| Satisfactory level of subcontractor tax compliance demonstrated: <i>(if applicable)*</i> | Yes: <input type="checkbox"/> No: <input type="checkbox"/> |

\*see [www.revenue.ie](http://www.revenue.ie) for further details on tax clearance procedures for contractors/subcontractors

**If necessary, copy this page to include additional contractors/tradespersons**

**12. Declaration by Owner/Applicant**

I, the applicant, certify that:

1. I understand and fulfil all the terms and conditions of the Built Heritage Investment Scheme 2020
2. The information provided in the application form and supporting documents is correct and I will notify the relevant local authority if there is any change in that information
3. I am providing at least €\_\_\_\_\_ from my own private resources towards these works
4. My tax affairs are in order
5. I understand that payment of funds by a local authority under this scheme does not imply a warranty on the part of the authority or the Minister for Culture, Heritage and the Gaeltacht in relation to the suitability or safety of the works concerned or the state of repair or condition of all or any part of the structure concerned or its fitness for use.
6. I understand that the local authority or the Department of Culture, Heritage and the Gaeltacht may make any enquiries that it considers necessary to establish my eligibility for funding under this scheme, and that the local authority's and the Minister's decisions are final.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**13. Checklist for Owners/Applicants (Insert Yes or No accordingly)**

| The following must be included in all applications to local authorities                    | Owner Yes/No | Local authority Yes/No |
|--|--------------|------------------------|
| Form A fully completed   |              |                        |
| Site location map with location of works clearly marked in red                             |              |                        |
| Evidence of Tax Compliance   |              |                        |
| Written consent of owner for proposed works (if applicable)                                |              |                        |
| Method statement attached (if available)   |              |                        |
| Outline of nature and extent of training to be provided during the project, where relevant |              |                        |
| Provide photographs which illustrate the project before works commence.                    |              |                        |