

**COMHAIRLE CHONTAE LIATROMA
LEITRIM COUNTY COUNCIL**



**Declaration Regarding Protected Structures
(Section 57 of Planning & Development Acts 2000 - 2017)**

APPLICATION FORM

1. Name of person seeking declaration [Applicant] _____

2. Postal Address of Property /Site or Building to which the declaration sought relates

- 5 NIAH Registration/ Record of Protected Structure No., if applicable.

- 6 Applicant's legal interest in the land or structure. [Give details] _____

- 7 If the applicant is not the owner and /or occupier, state the names and addresses of the owner and occupiers of the premises in question _____

- 8 State if owner / occupiers are aware of the current application for Declaration under S 57 of the Act [Y] / [N]

- 9 Has an application for a declaration previously been sought? [Yes] / [No] , if Yes Please provide details, e.g.
 - i. Declaration Ref. No. _____
 - ii. Result of declaration request _____

10. Provide full description of the question /matter / subject which arises wherein a declaration is sought? { Use a separate page, if necessary}

{NB. The applicant is advised to set out the matter on which the declaration is sought, on a separate sheet, as comprehensively as possible and should use additional material / drawings, photos etc. if necessary, to give as full account as possible of this matter.

A site map to a scale of not less than 1:2,500 based on the Ordnance Survey map for the area, shall be provided to identify the lands / structure in question.}

11 Additional accompanying documentation provided[Yes] / [No]

If Yes: schedule of documents attached

i. _____

ii. _____

iii. _____

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date Received..... Reference No.: -PSD- _____

Date acknowledged.....

Decision:.....

Date declaration made.....

M.O. No.....

**APPLICATION FORM continued: ADDITIONAL CONTACT INFORMATION
NOT TO BE MADE AVAILABLE TO THE GENERAL PUBLIC WITH APPLICATION**

Please note:

- The applicant's address **must** be submitted on this page.
- If the applicant/agent wishes to submit additional contact information, this may be included here.
- This page will not be published as part of the planning file.

8. Applicant:

<i>Address (Required)</i>	
<i>Telephone No. (optional)</i>	
<i>Email Address (if any)</i>	
<i>Fax No. (if any)</i>	

9. Person/Agent acting on behalf of the Applicant (if any):

<i>Name and Address</i>	
<i>Telephone No. (optional)</i>	
<i>Email Address (if any)</i>	
<i>Fax No. (if any)</i>	
Should all correspondence be sent to the Agent's address? (please tick appropriate box) (Please note that if the answer is 'No', all correspondence will be sent to the Applicant's address) Yes <input type="checkbox"/> No <input type="checkbox"/>	

10. Person responsible for preparation of any Drawings and Plans accompanying the application:

<i>Name and Address</i>	
<i>Telephone No. (optional)</i>	
<i>Email Address (if any)</i>	
<i>Fax No. (if any)</i>	

11. Owner (required where applicant is not the owner):

<i>Name of Owner (Required)</i>	_____
<i>Address (required)</i>	_____

<i>Telephone No. (optional)</i>	

<i>Email Address (if any)</i>	
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