



**1.13 Relationship to EU citizen (please tick)**

- Spouse       Partner       Divorced/Annulled       Other family dependant  
 Parent       Sibling       Child

If "Other family dependant", please specify:

**1.14 Passport Number**

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**1.15 GNIB Registration Number**

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**1.16 Status on arrival in the state (please tick)**

- Asylum-seeker       Student       Family member of EU citizen  
 Visitor       Employment Permit or Green Card Permit       Other

If "Other", please give details:

**1.17 Date of arrival in the State**

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**1.18 Have you ever been deported or removed from the State?**

Yes       No

**1.19 Have you been convicted of any criminal offence in the State or abroad?**

Yes       No

*(If "yes", please give details)***1.20 Are there any charges pending against you in the State or abroad?**

Yes       No

*(If "yes", please give details)***Section 1B | Retention of Rights**

**This subsection is required where the applicant has been granted retention of a residence card (Form EU5) after divorce or annulment from the EU citizen or after the death of the EU citizen.**

**1.21 Applicant's current activity in the State (please tick)**

- Employment       Self-employment       Residing with sufficient resources

**1.22 Name of applicant's employer or business**

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**1.23 Address of applicant's workplace or business**

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**1.24 Email address of employer or business****1.25 Contact telephone number for applicant's employer or business**

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**1.26 Date of commencement of activity**

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**1.27 Details of applicant's financial resources**

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**Section 2** Details of EU citizen of whom the applicant is a family member

2.1 Surname / Family name (as in passport)

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2.2 Forename(s) (as in passport)

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2.3 Other name(s) (maiden name, name at birth, any other names by which you are or have been known)

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2.4 Nationality

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2.5 Date of birth

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2.6 Gender (please tick)

Male  Female

2.7 PPS Number

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2.8 Date of arrival in the State

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Day / Month / Year

2.9 Passport or National Identity Card Number

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2.10 Identification type (please tick)

Passport  National ID Card

2.11 Old Department Reference Number (if applicable)

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2.12 Contact Telephone Number

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2.13 Email Address

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2.14 Current residential address

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**If EU citizen holds a Permanent Residence Certificate**

2.15 Permanent Residence Certificate Number

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2.16 Date of issue of Certificate

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Day / Month / Year

**Section 3** Activities of the EU citizen in the State

3.1 Current or most recent activity (please tick)

Employment  Self-employment  Study  Involuntary unemployment  Residing with sufficient resources

3.2 Name of employer, business, or college

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3.3 Address of workplace, business or college

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**3.4** Email address of employer, business or college

**3.5** Contact telephone number for employer, business or college

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**3.6** Date of commencement of activity

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**3.7** Details of sufficient resources or social welfare (if applicable)

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**3.8** Previous activities of the EU citizen in the State in the last 5 years

Please provide details of activities in the State for a continuous period of five years.  
 If you require additional space, please use **Annex B**, which can be found with this application form on the Irish Naturalisation & Immigration Service website at <http://www.inis.gov.ie>.  
**NOTE:** For "Details of activity" in this section, please provide the following as applicable: name and address of workplace; name and address of business; address of college and course title; type of Social Welfare received; details of resources (e.g. pension).

**Details of activity**

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| <input type="checkbox"/> Self-employment          | <input type="checkbox"/> Residing with sufficient resources  |       |  |      |  |  |  |  |  |     |  |       |  |      |  |  |  |
| <input type="checkbox"/> Involuntary Unemployment |  |       |  |      |  |  |  |  |  |     |  |       |  |      |  |  |  |
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**Details of activity**

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| <input type="checkbox"/> Involuntary Unemployment |  |       |  |      |  |  |  |  |  |     |  |       |  |      |  |  |  |
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**Details of activity**

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| <input type="checkbox"/> Self-employment          | <input type="checkbox"/> Residing with sufficient resources  |       |  |      |  |  |  |  |  |     |  |       |  |      |  |  |  |
| <input type="checkbox"/> Involuntary Unemployment |  |       |  |      |  |  |  |  |  |     |  |       |  |      |  |  |  |
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## Section 5 | Document Checklist

Please provide **photocopies** of the documents requested below. Identity documents and civil certificates should be photocopied in colour and photocopies should include all pages (including blank passport pages).

### Evidence of identity

- |  |   |
|--|---|
| <input type="checkbox"/> Passport of applicant                 | <input type="checkbox"/> Passport or National Identity Card of EU citizen |
| <input type="checkbox"/> Two passport-size photos of applicant | <input type="checkbox"/> Two passport-size photos of EU citizen           |

### Evidence of relationship of applicant to EU citizen

Please provide supporting documents relevant to your family relationship as per Section 1.13 of this form.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Civil Marriage Certificate<br><i>(For Spouse)</i> | <input type="checkbox"/> Partnership Certificate<br><i>(For Civil Partner)</i> | <input type="checkbox"/> Birth Certificate(s)<br><i>(For Child, Parent or Sibling)</i> |
|--|--|--|

For "Partner" or "Other family dependant", please specify supporting documents enclosed:

### Evidence of activities in the State

Please provide supporting documents for economic activities. Documents should pertain to the EU citizen only, as per Section 3 of this form, except where Section 1B has been used.

#### (A) For each period of **Employment**

- Letter from employer setting out terms and conditions of employment or signed contract of employment
- P60s for the last five years (*or as applicable*)

#### (B) For each period of **Self-employment**

- Agreed Tax Assessment from the Revenue Commissioner for each applicable financial year
- VAT3 receipts (*if applicable*)
- Bank statements of the business for a six-month period, and corresponding invoices or receipts issued

#### (C) For each period of **Study**

- Letter from college/course provider including course description, start date and completion date
- Letter from private medical insurance provider showing comprehensive sickness insurance
- Bank statements and other evidence of financial resources

#### (D) For each period of **Involuntary Unemployment**

- Letter from Department of Social Protection with details of benefit claims
- Letter from Employment Services Office (or FÁS) acknowledging registration as a jobseeker
- Letter from prior employer outlining circumstances of redundancy
- P60s for prior two years of employment

#### (E) For each period while **Residing with sufficient resources**

- Evidence of financial resources and corresponding bank statements
- Letter from Department of Social Protection with details of any benefit claims, or stating that there were no claims
- Letter from private medical insurance provider showing comprehensive sickness insurance

### Evidence of residence of applicant and EU citizen in the State for a continuous period of 5 years

#### For each residential address while **Renting**

- Letter from landlord/agency, tenancy agreement, or Letters of Registration from Private Residential Tenancies Board
- Utility bills in the names of both the applicant and the EU citizen for each year of residence

#### For each residential address as the **Home-owner**

- Letter from mortgage provider, local authority or County Council
- Title or deeds as applicable
- Utility bills in the names of both the applicant and the EU citizen for each year of residence

### Evidence of cessation of employment or self-employment of the EU citizen (*if applicable*)

- Documentary evidence of cessation of employment or self-employment, outlining the circumstances of cessation
- Documentary evidence of receipt of a state pension (contributory or non-contributory), or an allowance, benefit or supplement with respect to a disability, injury or illness

## Section 6 | Declarations

### Applicant

**This declaration should be signed and dated by the applicant or by the parent or guardian of an applicant under the age of 18.**

I hereby apply for a permanent residence card for myself. The information I have given is complete and is true to the best of my knowledge. I also declare that the photographs submitted with this form are a true likeness of me. I confirm that if, before my application is decided, there is a material change in my circumstances or new information relevant to this application becomes available, I will inform the EU Treaty Rights Unit of the Department of Justice and Equality in writing immediately. I understand that any false or misleading information or fraudulent supporting documentation submitted will result in the refusal of this application.

I understand that, under Section 8 of the Immigration Act 2003 and Regulation 26 of the European Communities (Free Movement of Persons) Regulations 2015, the data in this application may be disclosed to other Irish Government Departments as well as to public authorities of the Member States of the European Union and European Economic Area (EEA) for purposes connected to this application. I consent to the EU Treaty Rights Unit making enquiries to confirm any of the details or documents provided by me in this application, including my participation in an interview process.

I am aware that a person who asserts an entitlement to any rights on the basis of information which he or she knows to be false or misleading in a material particular shall be guilty of an offence and shall be liable, on summary conviction or conviction on indictment, to a fine or term of imprisonment, or both, as set out in Regulation 30 of the European Communities (Free Movement of Persons) Regulations 2015.

**Signed by applicant**

**Date**

|                      |                      |   |                      |                      |   |                      |                      |                      |                      |
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| Day                  |                      |   | Month                |                      |   | Year                 |                      |                      |                      |

### EU Citizen

**This declaration should be signed and dated by the European Union, EEA or Swiss citizen.**

The information given in this form is complete and is true to the best of my knowledge. I also declare that the photographs submitted with this form are of a true likeness of me. I confirm that if, before the application is decided, there is a material change in my circumstances or new information relevant to this application becomes available, I will inform the EU Treaty Rights Unit of the Department of Justice and Equality in writing immediately. I understand that any false or misleading information or fraudulent supporting documentation submitted will result in the refusal of this application.

I understand that, under Section 8 of the Immigration Act 2003 and Regulation 26 of the European Communities (Free Movement of Persons) Regulations 2015, the data in this application may be disclosed to other Irish Government Departments as well as to public authorities of the Member States of the European Union and European Economic Area (EEA) for purposes connected to this application. I consent to the EU Treaty Rights Unit making enquiries to confirm any of the details or documents provided by me in this application, including my participation in an interview process.

I am aware that a person who asserts an entitlement to any rights on the basis of information which he or she knows to be false or misleading in a material particular shall be guilty of an offence and shall be liable, on summary conviction or conviction on indictment, to a fine or term of imprisonment, or both, as set out in Regulation 30 of the European Communities (Free Movement of Persons) Regulations 2015.

**Signed by European Union, EEA or Swiss Citizen**

**Date**

|                      |                      |   |                      |                      |   |                      |                      |                      |                      |
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| Day                  |                      |   | Month                |                      |   | Year                 |                      |                      |                      |

**Submission of incomplete forms or failure to submit all requested documentation will result in the automatic return of your application. All documents submitted with this application should be photocopies.**

Please return completed forms and documents to:

**EU Treaty Rights Unit  
Residence Division  
Irish Naturalisation and Immigration Service  
13/14 Burgh Quay  
Dublin 2**