STATUTORY INSTRUMENTS.

S.I. No. 349 of 2015

EMPLOYMENT PERMITS (AMENDMENT) REGULATIONS 2015
S.I. No. of 2015

EMPLOYMENT PERMITS (AMENDMENT) REGULATIONS 2015

1. RICHARD BRUTON, Minister for Jobs, Enterprise and Innovation, in exercise of the powers conferred on me by sections 14, 14A, 29 and 30 (as amended or inserted by sections 17, 18, 29 and 30 of the Employment Permits (Amendment) Act 2014 (No. 26 of 2014)) of the Employment Permits Act 2006 (No. 16 of 2006), hereby make the following regulations:

Citation
1. (1) These Regulations may be cited as the Employment Permits (Amendment) Regulations 2015.

(2) The Principal Regulations, the Employment Permits (Trusted Partner) Regulations 2015 (S.I. No. 172 of 2015) and these Regulations may be cited together as the Employment Permits Regulations 2014 to 2015 and shall be construed together as one.

Commencement
2. These Regulations come into operation on 1 September 2015.

Definitions
3. In these Regulations “Principal Regulations” means the Employment Permits Regulations 2014 (S.I. No. 432 of 2014).

Amendment of Regulation 5 of Principal Regulations
4. Regulation 5(2) of the Principal Regulations is amended—

(a) in subparagraph (e), by substituting “3 month period” for “2 month period”, and

(b) in subparagraph (i)(V), by inserting “for a Critical Skills Employment Permit, General Employment Permit, Sport and Cultural Employment Permit or Intra-Company Transfer Employment Permit,” after “in the case of an application”.

Amendment of Regulation 6 of Principal Regulations
5. Regulation 6(2) of the Principal Regulations is amended—

(a) in subparagraph (b), by substituting “3 months” for “12 months”, and

(b) in subparagraph (i)(I), by substituting “3 month period” for “2 month period”.

Amendment of Regulation 10 of Principal Regulations
6. Regulation 10(2)(c)(i) of the Principal Regulations is amended by substituting “3 month period” for “2 month period”.

Amendment of Regulation 26 of Principal Regulations
7. Regulation 26(1) of the Principal Regulations is amended—

(a) in subparagraph (c), by substituting “€13.31,” for “€13.31, or”, and

(b) by substituting for subparagraph (d) the following subparagraphs:

“(d) in the case of employment as a boner (meat), the minimum annual remuneration is €27,500 and in respect of which the minimum hourly rate of remuneration is €13.56, or

(e) in any other case, the minimum annual remuneration is €30,000 and in respect of which the minimum hourly rate of remuneration is €14.79.”.

Insertion of Regulation 26A into Principal Regulations
8. The Principal Regulations are amended by inserting after Regulation 26 the following Regulation:

“Maximum number of General Employment Permits for boners (meat)
26A. The maximum number of General Employment Permits that may be granted in respect of employment as a boner (meat) is 200.”.

Amendment of Schedules 2, 3 and 4 to Principal Regulations
9. The Principal Regulations are amended by substituting for Schedules 2, 3 and 4 the Schedules set out in Schedule 1 to these Regulations.

Amendment of Schedule 6 to Principal Regulations
10. The Principal Regulations are amended by substituting for Schedule 6 the Schedule set out in Schedule 2 to these Regulations.

Revocation
11. The Employment Permits (Amendment) Regulations 2014 (S.I. No. 506 of 2014) are revoked.
**Regulation 9**

Schedule 1

New Schedules 2, 3 and 4 to the Principal Regulations

"Regulations 5 and 6"

Schedule 2

Regulatory bodies or Government Minister from which or whom registration or recognition of qualifications required

**Part A**

Regulatory bodies from which a copy of the registration or licence, or alternatively a registration number, pin number or licence number, is required

<table>
<thead>
<tr>
<th>Profession</th>
<th>Regulatory body responsible for registration of qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Practitioner</td>
<td>Medical Council of Ireland</td>
</tr>
<tr>
<td>Nurse and Midwife</td>
<td>Nursing and Midwifery Board of Ireland</td>
</tr>
<tr>
<td>Security Officer</td>
<td>Private Security Authority</td>
</tr>
</tbody>
</table>

**Part B**

Regulatory bodies or Government Minister from which or whom a copy of the registration or recognition of qualifications is required

<table>
<thead>
<tr>
<th>Profession</th>
<th>Regulatory body or Minister of Government responsible for registration or recognition of qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dentist</td>
<td>Dental Council</td>
</tr>
<tr>
<td>Diagnostic or Therapeutic Radiographer</td>
<td>Radiographers Registration Board, CORU</td>
</tr>
<tr>
<td>Dietician</td>
<td>Dieticians Registration Board, CORU</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>Occupational Therapists Registration Board, CORU</td>
</tr>
<tr>
<td>Psychologist</td>
<td>Minister for Health</td>
</tr>
<tr>
<td>Speech and Language Therapist</td>
<td>Speech and Language Therapists Registration Board, CORU</td>
</tr>
<tr>
<td>Biochemist</td>
<td>Minister for Health</td>
</tr>
<tr>
<td>Chiropodist/Podiatrist</td>
<td>Minister for Health</td>
</tr>
<tr>
<td>Environmental Health Officer</td>
<td>Minister for Health</td>
</tr>
<tr>
<td>Social Worker</td>
<td>Social Workers Registration Board, CORU</td>
</tr>
<tr>
<td>Medical Scientist</td>
<td>Academy of Medical Laboratory Sciences</td>
</tr>
<tr>
<td>Physiotherapist</td>
<td>Irish Society of Chartered Physiotherapists</td>
</tr>
<tr>
<td>Emergency Medical Technician, Paramedic &amp; Advanced Paramedic</td>
<td>Pre-Hospital Emergency Care Council</td>
</tr>
<tr>
<td>Pharmacist</td>
<td>Pharmaceutical Society of Ireland</td>
</tr>
<tr>
<td>Profession</td>
<td>Regulatory body or Minister of Government responsible for registration or recognition of qualifications</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Optometrist &amp; Dispensing Optician</td>
<td>Opticians Board</td>
</tr>
<tr>
<td>Veterinary Practitioner &amp; Veterinary Nurse</td>
<td>Veterinary Council of Ireland</td>
</tr>
</tbody>
</table>

Part C

Regulatory body or Government Minister that regulates the entry to or carrying on of the profession of the foreign national or of the employment concerned

<table>
<thead>
<tr>
<th>Profession</th>
<th>Regulatory body or Minister of Government responsible for registration or recognition of qualifications</th>
</tr>
</thead>
</table>
| Accountant                       | Association of Chartered Certified Accountants  
|                                  | Association of International Accountants  
|                                  | Chartered Institute of Management Accountants  
|                                  | Chartered Institute of Public Finance and Accountancy  
|                                  | Institute of Certified Public Accountants in Ireland  
|                                  | Institute of Chartered Accountants in Ireland  
|                                  | Institute of Chartered Accountants in England and Wales  
|                                  | Institute of Chartered Accountants in Scotland  
|                                  | Institute of Incorporated Public Accountants                                                              |
| Approved Driving Instructor      | Road Safety Authority                                                                                     |
| Archaeologist                    | National Monuments Service                                                                                |
| Architect                        | Royal Institute of Architects of Ireland                                                                  |
| Auctioneer/Estate Agent/Letting Agent/Management Agent | Property Services Regulatory Authority                                                                 |
| Barrister                        | Honourable Society of King’s Inns                                                                          |
| Building Energy Regulator        | Sustainable Energy Authority of Ireland                                                                    |
| Chartered Surveyor               | Society of Chartered Surveyors Ireland (SCSI)                                                            |
| Chemist                          | Institute of Chemistry of Ireland                                                                         |
| Electrician                      | Register of Electrical Contractors of Ireland, Electrical Contractors Safety & Standards Association       |
| Engineer                         | Institute of Engineers of Ireland                                                                          |
| Gas Installers                   | Register of Gas Installers of Ireland                                                                      |
| Insolvency Service Practitioner  | Insolvency Service of Ireland                                                                              |
| Patent Agent                     | Irish Patents Office                                                                                       |
| Primary Teacher/Post Primary Teacher | The Teaching Council                                                                                       |
| Solicitor                        | Law Society of Ireland                                                                                     |
| Tax Consultant                   | Irish Tax Institute                                                                                        |
| Town Planner                     | Irish Planning Institute                                                                                    |
| Trade Mark Agent                 | Irish Patents Office                                                                                        |
### Schedule 3

Employments in respect of which there is a shortage in respect of qualifications, experience or skills which are required for the proper functioning of the economy

<table>
<thead>
<tr>
<th>SOC-3</th>
<th>Employment category</th>
<th>SOC-4</th>
<th>Employments</th>
</tr>
</thead>
<tbody>
<tr>
<td>211</td>
<td>Natural and Social Science Professionals</td>
<td>2111</td>
<td>Chemical scientists in manufacturing (including food &amp; beverages, medical devices), product development, clinical co-vigilance, or biotechnology or related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2112</td>
<td>Medical laboratory scientists Biological scientists and biochemists in manufacturing (including food &amp; beverages, medical devices), product development, clinical co-vigilance, or biotechnology or related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2113</td>
<td>Physical scientists in manufacturing (including food &amp; beverages, medical devices), product development, clinical co-vigilance, or biotechnology or related and relevant specialist skills, qualifications or experience</td>
</tr>
</tbody>
</table>
| 212   | Engineering Professionals          | 2122  | Mechanical engineers specialising in:  
  - Quality control, or validation and regulation engineering (high tech industry; food and beverages), or  
  - Mechanical engineering (especially polymer engineering skills in the areas of pharmaceuticals, medical devices or green economy), or  
  - Chemical process engineering, or  
  - Process automation engineering, or  
  - Power generation, transmission and distribution, or  
  - Related and relevant specialist skills, qualifications or experience |
|       |                                    | 2123  | Electrical engineers specialising in:  
  - Chip design, test engineering, or application engineering, or  
  - Process automation engineering, or  
  - Power generation, transmission and distribution, or  
  - Related and relevant specialist skills, qualifications or experience |
|       |                                    | 2124  | Electronics engineers specialising in:  
  - Chip design, test engineering, or application engineering, or  
  - Process automation engineering, or  
  - Power generation, transmission and distribution, or  
  - Related and relevant specialist skills, qualifications or experience |
<table>
<thead>
<tr>
<th>SOC-3</th>
<th>Employment category</th>
<th>SOC-4</th>
<th>Employments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2126</td>
<td>Design and development engineers specialising in:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Quality control, or validation and regulation engineering (high tech industry, food and beverages), or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Chip design, test engineering, or application engineering, or</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>• Process automation engineering, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Power generation, transmission and distribution, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2127</td>
<td>Production and process engineers specialising in:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Quality control, or validation and regulation engineering (high tech industry, food and beverages), or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Chemical process engineering, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Process automation engineering, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Power generation, transmission and distribution, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td>113</td>
<td>ICT Professionals</td>
<td>1136</td>
<td>Information technology and telecommunications directors</td>
</tr>
<tr>
<td>213</td>
<td></td>
<td>2133</td>
<td>IT specialist managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2134</td>
<td>IT project and programme managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2135</td>
<td>IT business analysts, architects and systems designers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2136</td>
<td>Programmers and software development professionals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2137</td>
<td>Web design and development professionals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2139</td>
<td>All other ICT professionals</td>
</tr>
<tr>
<td>221</td>
<td>Health Professionals</td>
<td>2211</td>
<td>Medical practitioners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2217</td>
<td>• Medical radiographers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Vascular technologists</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Radiation therapists</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2219</td>
<td>Audiologists</td>
</tr>
<tr>
<td>118</td>
<td>Health and Social Services Managers and Directors</td>
<td>1181</td>
<td>Senior health services and public health managers and directors</td>
</tr>
<tr>
<td>223</td>
<td>Nursing and Midwifery Professionals</td>
<td>2231</td>
<td>• Registered Nurses (RGN, MHN, ID and Children's nurses)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Clinical Nurse Specialists</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Clinical Nurse Managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Advanced Nursing Practitioners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2232</td>
<td>• Registered Midwives</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Clinical Midwife Specialists</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Clinical Midwife Managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Advanced Midwife Practitioners</td>
</tr>
<tr>
<td>222</td>
<td>Therapy Professionals</td>
<td>2229</td>
<td>Orthoptists</td>
</tr>
<tr>
<td>321</td>
<td>Health Associate Professionals</td>
<td>3218</td>
<td>• Prosthetists</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Orthotists</td>
</tr>
<tr>
<td>242</td>
<td>Business, Research and Administrative Professionals</td>
<td>2421</td>
<td>Chartered and certified accountants and taxation experts specialising in tax, compliance, regulation, solvency, or financial management, or related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td>SOC-3</td>
<td>Employment category</td>
<td>SOC-4</td>
<td>Employments</td>
</tr>
<tr>
<td>-------</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>2423</td>
<td>Management consultants and business analysts specialising in big data analytics with skills in IT, data mining, modelling, and advanced maths or related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2424</td>
<td>Business and financial project management professionals specialising in finance &amp; investment analytics, risk analytics, credit, fraud analytics or related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2425</td>
<td>Actuaries, economists and statisticians specialising in big data analytics with skills in IT, data mining, modelling, and advanced maths or related and relevant specialist skills, qualifications or experience</td>
</tr>
<tr>
<td>246</td>
<td>Quality and Regulatory Professionals</td>
<td>2461</td>
<td>Quality control and planning engineers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2462</td>
<td>Quality assurance and regulatory professionals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2463</td>
<td>Environmental health professionals</td>
</tr>
<tr>
<td>354</td>
<td>Sales, Marketing and Related Associate Professionals</td>
<td>3542</td>
<td>Business sales executives specialising in International Sales Roles or ITB2B sales roles and with fluency in the official language, apart from English, of a state which is not a Member State of the EEA</td>
</tr>
</tbody>
</table>

Note: ‘SOC-3’ and ‘SOC-4’ refer to applicable levels in the Standard Occupational Classification system (SOC 2010).
### Schedule 4

**Employments in respect of which an employment permit shall not be granted**

<table>
<thead>
<tr>
<th>SOC-3</th>
<th>Categories of employment</th>
<th>SOC-4</th>
<th>Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>122</td>
<td>Managers in Hospitality and Leisure Services</td>
<td>1221</td>
<td>Hotel and accommodation managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1223</td>
<td>Restaurant and catering establishment managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1224</td>
<td>Publicans and managers of licensed premises</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1225</td>
<td>Leisure and sports facilities managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1226</td>
<td>Travel agency managers</td>
</tr>
<tr>
<td>124</td>
<td>Managers in Health and Care Services</td>
<td>1242</td>
<td>Residential, day and domiciliary care managers</td>
</tr>
<tr>
<td>125</td>
<td>Managers in Other Services</td>
<td>1251</td>
<td>Property, housing and estate managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1252</td>
<td>Garage managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1253</td>
<td>Hairdressing and beauty salon managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1254</td>
<td>Shopkeepers — wholesale and retail</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1255</td>
<td>Waste disposal and environmental services managers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1259</td>
<td>Other managers in other services (includes betting shop manager, graphic design manager, library manager, plant hire manager, production manager)</td>
</tr>
<tr>
<td>222</td>
<td>Therapy Professionals</td>
<td>2221</td>
<td>Physiotherapists (with the exception of a physiotherapist affiliated to a particular sporting organisation applying for a Sport and Cultural Employment Permit)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2222</td>
<td>Occupational therapists</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2223</td>
<td>Speech and language therapists</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2229</td>
<td>Other therapy professionals (with the exception of orthoptists and chiropractors who are members of the Chiropractic Association of Ireland)</td>
</tr>
<tr>
<td>244</td>
<td>Welfare Professionals</td>
<td>2442</td>
<td>Social workers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2443</td>
<td>Probation officers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2449</td>
<td>Other welfare professionals</td>
</tr>
<tr>
<td>311</td>
<td>Science, Engineering and Production Technicians</td>
<td>3114</td>
<td>Building and civil engineering technicians</td>
</tr>
<tr>
<td>312</td>
<td>Draftsmen and Related Architectural Technicians</td>
<td>3121</td>
<td>Architectural and town planning technicians</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3122</td>
<td>Draughtspersons</td>
</tr>
<tr>
<td>321</td>
<td>Health Associate Professionals</td>
<td>3213</td>
<td>Paramedics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3216</td>
<td>Dispensing opticians</td>
</tr>
<tr>
<td>SOC-3</td>
<td>Categories of employment</td>
<td>SOC-4</td>
<td>Employment</td>
</tr>
<tr>
<td>-------</td>
<td>--------------------------</td>
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<tr>
<td></td>
<td></td>
<td>3217</td>
<td>Pharmaceutical technicians</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3218</td>
<td>Dental technicians</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3219</td>
<td>Other health associate professionals (includes Acupuncturists, Homeopaths, Hypnotherapists, Massage therapists, Reflexologists, Sports therapists)</td>
</tr>
<tr>
<td>323</td>
<td>Welfare and Housing Associate Professionals</td>
<td>3231</td>
<td>Youth and community workers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3233</td>
<td>Child and early years officers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3234</td>
<td>Housing officers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3235</td>
<td>Counsellors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3239</td>
<td>Other welfare and housing associate professionals</td>
</tr>
<tr>
<td>331</td>
<td>Protective Service Occupations</td>
<td>3311</td>
<td>NCOs and other ranks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3312</td>
<td>Police officers (sergeant and below)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3313</td>
<td>Fire service officers (watch manager and below)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3314</td>
<td>Prison service officers (below principal officer)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3315</td>
<td>Police community support officers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3319</td>
<td>Other protective service associate professionals</td>
</tr>
<tr>
<td>344</td>
<td>Sports and Fitness Occupations</td>
<td>3443</td>
<td>Fitness instructors</td>
</tr>
<tr>
<td>352</td>
<td>Legal Associate Professionals</td>
<td>3520</td>
<td>Legal associate professionals</td>
</tr>
<tr>
<td>354</td>
<td>Sales, Marketing and Related Associate Professionals</td>
<td>3544</td>
<td>Estate agents and auctioneers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3546</td>
<td>Conference and exhibition managers and organisers</td>
</tr>
<tr>
<td>356</td>
<td>Public Services and Other Associate Professionals</td>
<td>3561</td>
<td>Public services associate professionals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3563</td>
<td>Vocational and industrial trainers and instructors (with the exception of mobility instructors for the visually impaired)</td>
</tr>
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<td>Careers advisers and vocational guidance specialists</td>
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<td>Inspectors of standards and regulations</td>
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<td>Health and safety officers</td>
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<td>411</td>
<td>Administrative Occupations: Government and Related Organisations</td>
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<td>National government administrative occupations</td>
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<td>Local government administrative occupations</td>
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<td>Administrative Occupations: Finance</td>
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<td>Book-keepers, payroll managers and wages clerks</td>
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<td>(with the exception of employment of a person fluent in the official language, apart from English, of a state which is not a Member State of the EEA in a role in accounts payable and credit control where the employment is supported by an enterprise development agency)</td>
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<td>Bank and post office clerks</td>
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<td>Other financial administrative occupations</td>
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<td>Administrative Occupations: Records</td>
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<td>Pensions and insurance clerks and assistants</td>
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<td>Library clerks and assistants</td>
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<td>4138</td>
<td>Human resources administrative occupations</td>
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<td>Other Administrative Occupations</td>
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<td>4159</td>
<td>Other administrative occupations</td>
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<td>416</td>
<td>Administrative Occupations: Office Managers and Supervisors</td>
<td>4161</td>
<td>Office managers</td>
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<td>4162</td>
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<td>421</td>
<td>Secretarial and Related Occupations</td>
<td>4211</td>
<td>Medical secretaries</td>
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<td>4213</td>
<td>School secretaries</td>
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<td>Company secretaries</td>
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<td>Personal assistants and other secretaries</td>
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<td>4216</td>
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<td>4217</td>
<td>Typists and related keyboard occupations</td>
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<td>Agricultural and Related Trades</td>
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<td>Farmers</td>
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<td></td>
<td>5112</td>
<td>Horticultural trades</td>
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<td>5113</td>
<td>Gardener and landscape gardeners</td>
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<td></td>
<td>5114</td>
<td>Groundsmen and greenkeepers</td>
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<td></td>
<td></td>
<td>5119</td>
<td>Other agricultural and fishing trades</td>
</tr>
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<td>521</td>
<td>Metal Forming, Welding and Related Trades</td>
<td>5211</td>
<td>Smiths and forge workers</td>
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<td>5212</td>
<td>Moulders, core makers and die casters</td>
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<td>5213</td>
<td>Sheet metal workers</td>
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<td>5214</td>
<td>Metal plate workers, and riveters</td>
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<td></td>
<td>5216</td>
<td>Pipe fitters</td>
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<td>522</td>
<td>Metal Machining, Fitting and Instrument Making Trades</td>
<td>5225</td>
<td>Air-conditioning and refrigeration engineers</td>
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<td>SOC-3</td>
<td>Categories of employment</td>
<td>SOC-4</td>
<td>Employment</td>
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</tbody>
</table>
| 523   | Vehicle Trades           | 5231  | Vehicle technicians, mechanics and electricians  
(with the exception of vehicle technicians and mechanics affiliated to a particular sporting organisation applying for a Sport and Cultural Employment Permit) |
<p>|       |                          | 5232  | Vehicle body builders and repairers |
|       |                          | 5234  | Vehicle paint technicians |
|       |                          | 5235  | Aircraft maintenance and related trades |
|       |                          | 5236  | Boat and ship builders and repairers |
|       |                          | 5237  | Rail and rolling stock builders and repairers |
| 524   | Electrical and Electronic Trades | 5241 | Electricians and electrical fitters |
|       |                          | 5244  | TV, video and audio engineers |
|       |                          | 5249  | Other electrical and electronic trades |
| 525   | Skilled Metal, Electrical and Electronic Trades Supervisors | 5250 | Skilled metal, electrical and electronic trades supervisors |
| 531   | Construction and building trades | 5312 | Bricklayers and masons |
|       |                          | 5313  | Roofers, roof tilers and slaters |
|       |                          | 5314  | Plumbers and heating and ventilating engineers |
|       |                          | 5315  | Carpenters and joiners |
|       |                          | 5316  | Glaziers, window fabricators and fitters |
|       |                          | 5319  | Other construction and building trades |
| 532   | Building Finishing Trades | 5321  | Plasterers |
|       |                          | 5322  | Floorers and wall tilers |
|       |                          | 5323  | Painters and decorators |
| 533   | Construction and Building Trades Supervisors | 5330 | Construction and building trades supervisors |
| 541   | Textiles and Garments Trades | 5411 | Weavers and knitters |
|       |                          | 5412  | Upholsterers |
|       |                          | 5413  | Footwear and leather working trades |
|       |                          | 5414  | Tailors and dressmakers |
|       |                          | 5419  | Other textiles, garments and related trades |
| 542   | Printing Trades          | 5421  | Pre-press technicians |
|       |                          | 5422  | Printers |
|       |                          | 5423  | Print finishing and binding workers |
| 543   | Food Preparation and Hospitality Trades | 5431 | Butchers (with the exception of boners (meat)) |
|       |                          | 5432  | Bakers and flour confectioners |
|       |                          | 5433  | Fishmongers and poultry dressers |</p>
<table>
<thead>
<tr>
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<th>Categories of employment</th>
<th>SOC-4</th>
<th>Employment</th>
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<td>5434</td>
<td></td>
<td>5441</td>
<td>Chefs</td>
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<td>5442</td>
<td>(with the exception of—</td>
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<td></td>
<td></td>
<td>5444</td>
<td>(a) executive chefs,</td>
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<td></td>
<td></td>
<td>5446</td>
<td>(b) head chefs,</td>
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<tr>
<td></td>
<td></td>
<td>5447</td>
<td>(c) sous chefs, and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5448</td>
<td>(d) specialist chefs</td>
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<tr>
<td></td>
<td></td>
<td>5449</td>
<td>specialising in cuisine originating from a state which is not a Member State</td>
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<td></td>
<td></td>
<td>5450</td>
<td>of the EEA and working in establishments other than fast food outlets)</td>
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<td></td>
<td></td>
<td>5451</td>
<td>Cooks</td>
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<td>5452</td>
<td>Catering and bar managers</td>
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<tr>
<td>544</td>
<td>Other Skilled Trades</td>
<td>5441</td>
<td>Glass and ceramics makers, decorators and finishers</td>
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<td>5442</td>
<td>Furniture makers and other craft woodworkers</td>
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<td>5443</td>
<td>Florists</td>
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<tr>
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<td>5444</td>
<td>All other skilled trades</td>
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<td>612</td>
<td>Childcare and Related Personal Services</td>
<td>6121</td>
<td>Nursery nurses and assistants and playworkers</td>
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<td>6122</td>
<td>Childminders and related occupations</td>
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<td>6125</td>
<td>Teaching assistants</td>
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<td>6126</td>
<td>Educational support assistants</td>
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<td>613</td>
<td>Animal Care and Control Services</td>
<td>6131</td>
<td>Veterinary nurses</td>
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<td>6132</td>
<td>Pest control officers</td>
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<td>6139</td>
<td>Other animal care services occupations (includes work riders)</td>
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<td>614</td>
<td>Caring Personal Services</td>
<td>6141</td>
<td>Nursing auxiliaries and assistants</td>
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<td>6142</td>
<td>Ambulance staff (excluding paramedics)</td>
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<td></td>
<td>6143</td>
<td>Dental nurses</td>
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<td>6144</td>
<td>Houseparents and residential wardens</td>
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<td>6145</td>
<td>Care workers and home carers (with the exception of a carer in a private home)</td>
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<td></td>
<td>6146</td>
<td>Senior care workers</td>
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<td>6147</td>
<td>Care escorts</td>
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<td>6148</td>
<td>Undertakers, mortuary and crematorium assistants</td>
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<td>621</td>
<td>Leisure and Travel Services</td>
<td>6211</td>
<td>Sports and leisure assistants</td>
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<td></td>
<td>6212</td>
<td>Travel agents</td>
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<td>6214</td>
<td>Air travel assistants</td>
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<td>Rail travel assistants</td>
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<td>6219</td>
<td>Other leisure and travel service occupations</td>
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<tr>
<td>622</td>
<td>Hairdressers and Related Services</td>
<td>6221</td>
<td>Catering and bar managers</td>
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<td>6222</td>
<td>Hairdressers, barbers, and related occupations</td>
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<td>SOC-3</td>
<td>Categories of employment</td>
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<td>Employment</td>
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<td>622</td>
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<td>Beauticians and related occupations</td>
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<td>Housekeeping and Related Services</td>
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<td>Caretakers</td>
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<td>Cleaning and Housekeeping Managers and Supervisors</td>
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<td>Sales Assistants and Retail Cashiers</td>
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<td>7112</td>
<td>Retail cashiers and check-out operators</td>
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<td>7113</td>
<td>Telephone salespersons</td>
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<td>7114</td>
<td>Pharmacy and other dispensing assistants</td>
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<td>Vehicle and parts salespersons and advisers</td>
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<td>Sales Related Occupations</td>
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<td>Collector salespersons and credit agents</td>
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<td>Debt, rent and other cash collectors</td>
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<td>Roundpersons and van salespersons</td>
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<td>7124</td>
<td>Market and street traders and assistants</td>
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<td>7125</td>
<td>Merchandisers and window dressers</td>
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<td>Other sales related occupations</td>
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<td>Process Operatives</td>
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<td>Food, drink and tobacco process operatives</td>
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<td></td>
<td>8112</td>
<td>Glass and ceramics process operatives</td>
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<td>Textile process operatives</td>
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<td>Rubber process operatives</td>
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<td>Plastics process operatives</td>
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<td>Metal making and treating process operatives</td>
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<td>Plant and Machine Operatives</td>
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<td>Paper and wood machine operatives</td>
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<td>Quarry workers and related operatives</td>
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<td>Water and sewerage plant operatives</td>
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<td>Other plant and machine operatives</td>
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<td>813</td>
<td>Assemblers and Routine Operatives</td>
<td>8131</td>
<td>Assemblers (electrical and electronic products)</td>
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<td>Assemblers (vehicles and metal goods)</td>
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<td>Routine inspectors and testers</td>
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<td>Weighers, graders and sorters</td>
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<td>Tyre, exhaust and windscreen fitters</td>
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<td>Other assemblers and routine operatives</td>
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<td>Construction Operatives</td>
<td>8141</td>
<td>Scaffolders, stagers and riggers</td>
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<td>Road construction operatives</td>
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<td>Rail construction and maintenance operatives</td>
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<td>Other construction operatives</td>
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<tr>
<td>821</td>
<td>Road Transport Drivers</td>
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<td>Large goods vehicle drivers</td>
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<td>Van drivers</td>
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<td>8213</td>
<td>Bus and coach drivers</td>
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<td>8214</td>
<td>Taxi and cab drivers and chauffeurs</td>
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<td>Driving instructors</td>
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<td>822</td>
<td>Mobile Machine Drivers and Operatives</td>
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<td>Crane drivers</td>
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<td>Fork-lift truck drivers</td>
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<td>Agricultural machinery drivers</td>
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<td>8229</td>
<td>Other mobile machine drivers and operatives</td>
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<td>Other Drivers and Transport Operatives</td>
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<td>Train and tram drivers</td>
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<td>8232</td>
<td>Marine and waterways transport operatives</td>
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<td>8233</td>
<td>Air transport operatives</td>
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<td>Other drivers and transport operatives</td>
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<td>Elementary Process Plant Occupations</td>
<td>9132</td>
<td>Industrial cleaning process occupations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9134</td>
<td>Packers, bottlers, canners and fillers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9139</td>
<td>Other elementary process plant occupations</td>
</tr>
<tr>
<td>921</td>
<td>Elementary Administration Occupations</td>
<td>9211</td>
<td>Postal workers, mail sorters, messengers and couriers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9219</td>
<td>Other elementary administration occupations</td>
</tr>
<tr>
<td>923</td>
<td>Elementary Cleaning Occupations</td>
<td>9231</td>
<td>Window cleaners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9232</td>
<td>Street cleaners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9233</td>
<td>Cleaners and domestics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9234</td>
<td>Launderers, dry cleaners and pressers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9235</td>
<td>Refuse and salvage occupations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9236</td>
<td>Vehicle valeters and cleaners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9239</td>
<td>Other elementary cleaning occupations</td>
</tr>
<tr>
<td>924</td>
<td>Elementary Security Occupations</td>
<td>9241</td>
<td>Security guards and related occupations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9242</td>
<td>Parking and civil enforcement occupations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9244</td>
<td>School midday and crossing patrol occupations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9249</td>
<td>Other elementary security occupations</td>
</tr>
<tr>
<td>925</td>
<td>Elementary Sales Occupations</td>
<td>9251</td>
<td>Shelf fillers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9259</td>
<td>Other elementary sales occupations</td>
</tr>
<tr>
<td>926</td>
<td>Elementary Storage Occupations</td>
<td>9260</td>
<td>Elementary storage occupations</td>
</tr>
<tr>
<td>927</td>
<td>Other Elementary Services Occupations</td>
<td>9271</td>
<td>Hospital porters</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9272</td>
<td>Kitchen and catering assistants</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9273</td>
<td>Waiters and waitresses</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9274</td>
<td>Bar staff</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9275</td>
<td>Leisure and theme park attendants</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9279</td>
<td>Other elementary services occupations</td>
</tr>
<tr>
<td>All</td>
<td>Work in the private home</td>
<td>All</td>
<td>Domestic operatives</td>
</tr>
</tbody>
</table>

Note:

'SOC-3' and 'SOC-4' refer to applicable levels in the Standard Occupational Classification system (SOC 2010)."
Schedule 2

New Schedule 6 to the Principal Regulations

"Regulations 5, 6, 9, 10, 11 and 13"

Schedule 6

Forms — Applications, notifications and submissions
Form A

Application form for grant of Critical Skills Employment Permit

An Roimh Post, Flontar agus Nualalocha
Department of Jobs, Enterprise and Innovation

Critical Skills Employment Permit Application

This form should be used by either the Person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- an employment permit for an employment in respect of which there is a shortage in respect of the relevant qualifications, experience or skills which are required for the proper functioning of the economy and which employment are listed in Schedule 3 in the Principal Regulations, or
- all other employments with an annual remuneration of €60,000 or more, other than those employments for which an employment permit shall not be granted and which employments are listed in Schedule 4 in the Principal Regulations.

For permission to work in the State for a period of less than 90 days, the Atypical Working Scheme operated by the Department of Justice and Equality may be appropriate.

Complete all parts of this form as required in BLOCK CAPITALS. The Person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

Incomplete forms will be returned to the applicant or the authorised agent (if applicable).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2008, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section must be completed for all applications)

- Person who has made the offer of employment
- Foreign National
- Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One

Registration Details of Person who has made the offer of employment

1. Employer Registered Number: 
   Obtained from the Revenue Commissioners

2. Company Name Registered Number:
   [if applicable]:
   Obtained from the Companies Registration Office

3. Business Name Registered Number:
   [if applicable]:
   Obtained from the Companies Registration Office

4. If the Person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:
   Obtained from the Registry of Friendly Societies

5. If the Person who has made the offer of employment is a Charity, please supply the Charity Number:
   Obtained from the Revenue Commissioners

If the Person who has made the offer of employment is not a Limited Company, please complete Questions 6, 7, 8 and 9.

If the Person who has made the offer of employment is a Limited Company, please proceed to Question 10

6. If the Person who has made the offer of employment is not a registered company please indicate what type of entity it is

- Sole Trader
- Partnership
- Other (please specify)

7. Please state the full name of the Person who has made the offer of employment:

Page 1 CSEP002/15
8. Please state the nationality of the Person who has made the offer of employment:

9. If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?
   - Yes
   - No
   - Not applicable
   - If Yes, please specify

If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation)

10. Registered name of Company/Business:

11. Trading name of business (If different):

12. Nature of business:

13. Company/Business Address:
   - Address 1:
   - Address 2:
   - Town:
   - County:
   - Country:

14. Telephone Number:
16. Fax:

15. Mobile Phone Number:

17. E-mail:

18. Website:

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Person who has made the offer of employment:

20. Number of non-EEA nationals currently employed by the Person who has made the offer of employment:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Person who has made the offer of employment."

Part Two Details of Foreign National

1. Passport Number:

2. Expiry Date: D D M M Y Y

3. Nationality:

4. First Name:

5. Middle Name(s):

6. Family Name:

7. Date of Birth: D D M M Y Y

8. Male:  

9. Female:  

Enter these details exactly as they appear on the Foreign National's passport.
10. Current Address (foreign address required if residing outside the State):

<table>
<thead>
<tr>
<th>Address 1:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address 2:</td>
</tr>
<tr>
<td>Town:</td>
</tr>
<tr>
<td>County:</td>
</tr>
<tr>
<td>Country:</td>
</tr>
</tbody>
</table>

11. Telephone No.:                      |

12. Mobile Phone No.:                   |

13. Please provide the Foreign National's PPS Number, if available: 

14. Email address:                      |

16. Is the Foreign National currently in the State? [ ] Yes [ ] No

If 'Yes' on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:

<table>
<thead>
<tr>
<th>GNIB Pin No.</th>
<th>Dept. No.</th>
</tr>
</thead>
</table>

"If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current Immigration stamps and visa."

"If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, he/she may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required."

"If this is the case, by submitting this application the Foreign National confirms that he/she has considered the available options and believes that an employment permit is still required."

Enter education details of the Foreign National below, which are relevant to the Job Offer as stated in Part 4 of the application form:

16. Highest level of qualification relevant to the employment: e.g. Certificate, Diploma, Degree, etc.

17. Date of Completion:

18. Title of Course:

19. Final Subjects Taken:

20. Result Achieved: e.g. 2:1

21. Has the Foreign National previously made an application for asylum in the State? [ ] Yes [ ] No

22. Has the Foreign National sought permission to land in the State on a previous occasion? [ ] Yes [ ] No

If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted:
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. Has the Foreign National been in the State on a previous occasion without permission?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Is the Foreign National currently employed in the State?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If 'Yes' please describe on what permission they have to be employed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BLOCK CAPITALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Has the Foreign National been employed in the State previously?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If 'Yes' please describe on what permission they had to be employed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BLOCK CAPITALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Is the Foreign National married to, or in a civil partnership with, an Irish or EEA national?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If 'Yes' what nationality is their spouse/partner?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BLOCK CAPITALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Is the Foreign National the spouse, civil partner or dependant of the holder of an Employment Permit or the holder of any other type of permission to work in the State?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

You must now attach the documents outlined in Requirement for Supporting Documentation under "(B) Foreign National Requirements."
Part Three  Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(3) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months?  

Yes ☐  No ☐

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

<table>
<thead>
<tr>
<th>Signature of Person who has made the offer of employment:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Original signature required)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name (in BLOCK CAPITALS):</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BLOCK CAPITALS</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Position Held:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>
### Part Four Details of Employment

1. **Title of Job:**

2. **Regulatory Body:**

3. **Registration/Pin/Licence No.:**

   If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

   Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. **Place(s) at which the employment concerned is to be carried out:**

5. **Proposed Period of Employment**

   **(Years):**

6. **Proposed Start Date:**

   **(DD MM YY):**

   *We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.*

7. **Gross Annual Remuneration**: €

8. **Gross Annual Salary:**

   *(If different from above)*

9. **Gross Weekly Salary:**

10. **Hourly Rate of Pay:**

11. **Deductions from Gross Weekly Salary:**

12. **Health Insurance**:

   *All amounts which make up the basic salary must appear as payments on the payslips. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection.*

   *Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.*

13. **Number of hours of work per week**:

14. **What are the main functions of this job:**

15. **Please detail the qualifications, skills, knowledge and experience required for this job:**
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?  
Yes [ ] No [X]

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

If 'No' please provide details of the recruitment method:

| BLOCK CAPITALS |

You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (if applicable).
Part Five

Requirement for Payment

Is a fee payable for this Employment Permit application?  Yes [ ]  No [X]

If No, please indicate on what basis no fee is applicable?

The Person who made the offer of employment is the applicant and has charitable status with the Revenue Commissioners [ ]

Applicant is in respect of a non-EEA national married to or in a civil partnership with an EEA national [ ]

Dependant/Partner/Spouse Employment Permit [ ]

Exchange Agreement/Employment Permit [ ]

If no fee is payable proceed to Part Six.

Details of Payment

Important Note for Business Users - Payment by Electronic Funds Transfer

In accordance with Diffinance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) – an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Questions 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below

Contact Details of Payer

1. Please indicate who is making the payment:
   - [ ] Person who has made the offer of employment
   - [ ] Foreign National
   - [ ] Other

2. Title:  [ ] Mr  [ ] Mrs  [ ] Miss  [ ] Ms  [ ] Other please state

3. Name:  

4. Company (if applicable):  

5. Telephone Number:  

6. Fax Number:  

7. Mobile Phone Number:  

8. E-mail:  

Payment Details

9. Method of Payment:
   - [ ] Electronic Funds Transfer
   - [ ] Cheque
   - [ ] Bank Draft
   - [ ] Postal Order

10. Cheque No.  

11. Payment enclosed / Amount of Payment Due:  

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2000, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid).

Payer’s Signature:  

(Original signature required)  

Date:  

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Page 8  CSEP02/16
Part Six  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the Person who has made the offer of employment, as stated in Part 1 of the application form;
- If this application is for an employment in respect of a Care in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the Person who has made the offer of employment, as stated in Part 1 of the application form.

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2006, as amended; a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National:  
(Original signature required)  

Name (In BLOCK CAPITALS):  

Title:  

Date:  

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.  

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.  

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Person who has made the offer of employment

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be availed to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
  - if this application is in respect of a Critical Skills Employment Permit, a job offer of 2 years, or more, has been made to the Foreign National, as stated in Part 2 of the application form; and
  - the Foreign National, as stated in Part 2 of the application form, will be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- in accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.
- in accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is false or misleading is guilty of an offence.
- if this application is for an employment in respect of a Caretaker in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee or the employee's manager, if applicable, and to inspect such documents as the Inspector may require.
- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Person who has made the offer of employment:
(Original signature required)

Name (in BLOCK CAPITALS):

BLOCK CAPITALS

Position Held:

BLOCK CAPITALS

Title:

Date: DD MMM YYYY

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
### Authorisation of Agent

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

<table>
<thead>
<tr>
<th>Agent Name (in BLOCK CAPITALS):</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

<table>
<thead>
<tr>
<th>Signature of Agent: (Original signature required)</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agent's Address for Correspondence:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address 1: BLOCK CAPITALS</td>
</tr>
<tr>
<td>Address 2: BLOCK CAPITALS</td>
</tr>
<tr>
<td>Town: BLOCK CAPITALS</td>
</tr>
<tr>
<td>County: BLOCK CAPITALS</td>
</tr>
<tr>
<td>Country: BLOCK CAPITALS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Person who has made the offer of employment:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Foreign National: (Original signature required)</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Requirements for Supporting Documentation

(A) Requirements for Person who has made the offer of employment

If the Person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise,

Or

- If the Person who has made the offer of employment is a start-up Company which would not yet have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERN (Employers Registered Number)

If the Person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the Person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State:

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

For an employment in a restaurant, or a fast food outlet

If the application is in respect of such employment the following additional documentation is required:

- If the establishment has been operating for one year or more: a copy of a "P33L" form returned by the Person who has made the offer of employment to the Revenue Commissioners,
- An up-to-date tax clearance certificate in respect of the Person who has made the offer of employment, copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application,
- Copies of any certified qualifications of the Foreign National in respect of whom the application is made,
- In the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet,

And

- A letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

For an employment as a Carer in a private home

If the application is in respect of such eligible employment the following additional documentation is required:

- In the case of a trained medical professional:
  - (a) copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations, and
  - (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring, confirming that that person has a severe medical condition, or

In the case of a Carer with a long history of care:

- (a) a copy of a P60, payslip, a notarised letter or an affidavit establishing that the Foreign National in respect of whom the application is made has a long history of caring for the person concerned, and
- (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring confirming that that person has special care needs.
(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 2(2) of the Employment Permit Act 2006, as amended. The current fees applicable are available on the Department's website.

Refunds
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by postorder. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.

Acceptable Forms of Payment
In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day), the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the immigration authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. Only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply can lead to the revocation of the Employment Permit under section 16(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Alien Act 1835, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended; or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection
The Employment Permits Section may undertake verification of all data submitted on this application form. The person who has made the offer of employment, the Foreign National and the Authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner's website at www.dataprotection.ie. Alternatively, they may call: (057) 888 4600 / Lo-Call Number: 1800 252221.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16(4) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 29 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32(1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 18(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding £5,000 or imprisonment for a term not exceeding 12 months or both, or

(b) on conviction on indictment, to a fine not exceeding £50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department's website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

Attach 1 passport sized photograph with Foreign National's name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Person who has made the offer of employment or the Foreign National)

Part One - Details of Person who has made the offer of employment: Complete all questions

Person who has made the offer of employment should include copies of:
- Completed P30RROS Online Receipt dated within 3 months preceding the application or a copy of a letter from Revenue Commissioners confirming registration as an employer, if a start-up Company (whichever is applicable).
- Evidence of Business Permission (if applicable).

Part Two - Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date.
- Immigration stamps (if GNIB personal identification number not available).
- Visa (if GNIB personal identification number not available).

Original documents should not be submitted.

Part Three - Details of Redundancy: Complete all questions, as applicable
- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.
- Sign and date the declaration - original signature required.

Part Four - Details of Employment: Complete all questions (unless otherwise specified)

Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN/License number at Part 4, Question 3:
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.

Please supply the following in the case of an employment in a restaurant or a fast food outlet:
- If the establishment has been operating for one year or more, a copy of a "P35L" form returned by the Person who has made the offer of employment to the Revenue Commissioners,
- an up-to-date tax clearance certificate in respect of the Person who has made the offer of employment,
- copies of utility bills for the establishment's premises dated within the period of 2 months prior to the application,
- copies of any certified qualifications of the Foreign National in respect of whom the application is made,
- in the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet, and
- a letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

Please supply the following, whichever is applicable, in the case of an application for an employment in respect of an eligible Carer in a private home:
- copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations.
- a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring, confirming that that person has a severe medical condition or that that person has special care needs.
- a copy of a P60, payslip, a notarised letter or an affidavit establishing that the Foreign National in respect of whom the application is made has a long history of caring for the person concerned.

Part Five - Details of Payment: Complete all questions
- Include the appropriate fee if required. The current fees applicable are available on the Department's website.
- Sign Payment declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partner's current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.

Part Six - Acceptance of Terms & Conditions
- Sign and date the appropriate declarations - original signatures required.
**EMLOYMENT PERMITS SECTION**

<table>
<thead>
<tr>
<th><strong>E-mail:</strong></th>
<th><a href="mailto:employmentpermits@del.ie">employmentpermits@del.ie</a></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Call Centre:</strong></td>
<td>353-1- 677 5333</td>
</tr>
<tr>
<td>LoCall: 1890 201 818 (from within Ireland only)</td>
<td></td>
</tr>
<tr>
<td><strong>Fax:</strong></td>
<td>353-1-431 3368</td>
</tr>
<tr>
<td><strong>Address:</strong></td>
<td>David House</td>
</tr>
<tr>
<td></td>
<td>65A Adelaide Road</td>
</tr>
<tr>
<td></td>
<td>Dublin 2</td>
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<td></td>
<td>Ireland</td>
</tr>
</tbody>
</table>

**Contact Details**

**Employment Permits Section Web Pages**

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation’s website.

**PLEASE NOTE:** The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instructional purposes only. It is not necessary to include these pages when submitting the completed application form.
Form B

Application form for a Grant of Dependant/Partner/Spouse Employment Permit

This form should be used by either the person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- Permit for a Dependant - an employment permit for a foreign national who has permission from the Minister for Justice and Equality to reside in the State on the basis of being the child, ward, or partner of a current or previous Green Card/Critical Skills Employment Permit holder or a Researcher.
- Permit for a Partner - an employment permit for a foreign national who has permission from the Minister for Justice and Equality to reside in the State on the basis of being the partner, within the meaning of the Civil Partnership and Certain Rights and Obligations of Cohabitants Act 2010, of a current or previous Green Card/Critical Skills Employment Permit holder or a Researcher.
- Permit for a Spouse - an employment permit for a foreign national who has permission from the Minister for Justice and Equality to reside in the State on the basis of being the spouse of a current or previous Green Card/Critical Skills Employment Permit holder or a Researcher.

Applications can be in respect of all employments other than that of a domestic operative.

Complete ALL parts of this form as required in BLOCK CAPITALS. The person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section must be completed for all applications)

Person who has made the offer of employment

Foreign National

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box.

Part One Registration Details of Person who has made the offer of employment

1. Employer's Registered Number:

2. [Company Name Registered Number (if applicable):

3. Business Name Registered Number (if applicable):

4. If the person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:

5. If the person who has made the offer of employment is a Charity, please supply the Charity Number:

Obtained from the Revenue Commissioners

Obtained from the Companies Registration Office

Obtained from the Companies Registration Office

Obtained from the Registry of Friendly Societies

Obtained from the Revenue Commissioners
If the Person who has made the offer of employment is not a Limited Company, please complete Questions 6, 7, 8 and 9.

If the Person who has made the offer of employment is a Limited Company, please proceed to Question 10.

6. If the Person who has made the offer of employment is not a registered company, please indicate what type of entity it is:
   - Sole Trader
   - Partnership
   - Other (please specify) [BLOCK CAPITALS]

7. Please state the full name of the Person who has made the offer of employment:

8. Please state the nationality of the Person who has made the offer of employment:

9. If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?
   - Yes
   - No
   - Not applicable
   - If Yes, please specify [BLOCK CAPITALS]

   If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation)

10. Registered name of Company/Business:

11. Trading name of business (if different):

12. Nature of business:

13. Company/Business Address:
   - Address 1: [BLOCK CAPITALS]
   - Address 2: [BLOCK CAPITALS]
   - Town: [BLOCK CAPITALS]
   - County: [BLOCK CAPITALS]
   - Country: [BLOCK CAPITALS]

14. Telephone Number:  

15. Fax:  

16. Mobile Phone Number:  

17. E-mail:  

18. Website:  

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Person who has made the offer of employment:  

20. Number of non-EEA nationals currently employed by the Person who has made the offer of employment:  

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Person who has made the offer of employment."
## Part Two
Details of Foreign National

1. Passport Number: _________________________

2. Expiry Date: D M Y Y

3. Nationality: ____________________________

4. First Name: ____________________________

5. Middle Name(s): ________________________

6. Family Name: __________________________

7. Date of Birth: D M Y Y

8. Male: [ ] Female: [ ]

9. Current Address (required if residing outside the State):

   Address 1: ____________________________
   Address 2: ____________________________
   Town: _________________________________
   County: ______________________________
   Country: ____________________________

10. Telephone No.: _______________________

11. Mobile Phone No.: ____________________

12. Please provide the Foreign National's PPS Number if available:

13. E-mail address: _______________________

14. Is the Foreign National currently in the State? Yes [ ] No [ ]

15. If "Yes" on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:

   Enter below details exactly as they appear on the Foreign National's GNIB card:

   GNIB Pin No. __________________________
   Dept. No. ____________________________

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.

If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, he/she may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the Foreign National confirms that he/she has considered the available options and believes that an employment permit is still required.

16. Highest level of Qualification relevant to the employment:
   e.g. Certificate, Diploma, Degree, etc.

17. Date of Completion: __________________

18. Title of Course: _________________________
19. Final Subjects Taken: BLOCK CAPITALS

20. Result Achieved:

21. Has the Foreign National previously made an application for asylum in the State?
   Yes [ ] No [ ]

22. Has the Foreign National sought permission to land in the State on a previous occasion?
   Yes [ ] No [ ]
   If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted:

23. Has the Foreign National been in the State on a previous occasion without permission?
   Yes [ ] No [ ]

24. Is the Foreign National currently employed in the State?
   Yes [ ] No [ ]
   If 'Yes' please describe on what permission they have to be employed:

25. Has the Foreign National been employed in the State previously?
   Yes [ ] No [ ]
   If 'Yes' please describe on what permission they had to be employed:

26. Is the Foreign National married to, or in a civil partnership with, an Irish or EEA national?
   Yes [ ] No [ ]
   If 'Yes' what nationality is their spouse/partner?

27. Is the Foreign National the spouse, civil partner or the dependant of, the holder of an Employment Permit or to the holder of any other type of permission to work in the State?
   Yes [ ] No [ ]

You must now attach the documents outlined in Requirement for Supporting Documentation under “(B) Foreign National Requirements.”
Part Three  Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months?  

Yes ☐  No ☐

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Person who has made the offer of employment:  
(Original signature required)

Name (in BLOCK CAPITALS):  

BLOCK CAPITALS

Title:

Position Held:  

BLOCK CAPITALS

Date:  

D B M Y Y
## Part Four

### Details of Employment

**1. Title of Job:**

**2. Regulatory Body:**

**3. Registration/Pin/ Licence No.:**

**NOTE:** Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

**4. Place(s) at which the employment concerned is to be carried out:**

**5. Proposed Period of Employment Permit (maximum period of 2 years):**

**6. Proposed Start Date:**

* We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.

**7. Gross Annual Remuneration**

*Gross remuneration excludes overtime or premium payments*

**8. Gross Annual Salary:**

(If different from above)

**9. Gross Weekly Salary:**

**10. Hourly Rate of Pay:**

* Please specify purpose of deductions:

**11. Deductions from Gross Weekly Salary:**

* Please specify name of Health Insurance Provider:

**12. Health Insurance:**

* All amounts which make up the basic salary must appear as payments on the payslips. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection.

* Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.

**13. Number of hours of work per week:**

* Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

**14. What are the main functions of this job:**

**15. Please detail the qualifications, skills, knowledge and experience required for this job:**
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?  
Yes [ ]  No [ ]

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

If 'No' please provide details of the recruitment method:

| BLOCK CAPITALS |

---

**Part Four A  Details of Primary Permit Holder/Researcher**

1. Passport Number:

2. Expiry Date:  
   | D | M | M | Y |

3. Nationality:  
   | BLOCK CAPITALS |

4. First Name:  
   | BLOCK CAPITALS |

5. Middle Name(s):  
   | BLOCK CAPITALS |

6. Family Name:  
   | BLOCK CAPITALS |

7. Date of Birth:  
   | D | M | M | Y |

   8. Male: [ ]  9. Female: [ ]

---

10. Primary Permit Holder’s/Researcher’s Immigration details

   Enter below details exactly as they appear on the Primary Permit Holder’s/Researcher’s GNIB card*.

   | GNIB Pin No. | Dept. No. |

* If the Primary Permit Holder/Researcher is in the State but does not have a GNIB personal identification number then please supply a copy of their current Immigration stamps and visa.

11. Please enter the Hosting Agreement number for the Researcher (If applicable):

   You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (If applicable).
## Part Five

### Requirement for Payment

<table>
<thead>
<tr>
<th>Is a fee payable for this Employment Permit application?</th>
<th>Yes ☒</th>
<th>No ☐</th>
</tr>
</thead>
</table>

If No, please indicate on what basis no fee is applicable:

- The Person who made the offer of employment is the applicant and has charitable status with the Revenue Commissioners
- Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national
- Exchange Agreement Employment Permit

If no fee is payable proceed to Part Six.

## Details of Payment

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with DFine Circular 1/2013, from 16 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 6, 7, and 8) - an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 10) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

### Contact Details of Payer

1. Please indicate who is making the payment:
   - Person who has made the offer of employment
   - Foreign National
   - Other

2. Title:
   - Mr ☐
   - Mrs ☐
   - Miss ☐
   - Ms ☐
   - Other (please state) ☐

3. Name: ____________________________

4. Company (If applicable):

5. Telephone Number: ____________________________
   6. Fax Number: ____________________________

7. Mobile Phone Number: ____________________________

8. E-mail: ____________________________

### Payment Details

9. Method of Payment:
   - Electronic Funds Transfer ☐
   - Cheque ☐
   - Bank Draft ☐
   - Postal Order ☐

10. Cheque No. ____________________________

11. Payment enclosed / Amount of payment due: €

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

## Payer's Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid).

Payer's Signature: ____________________________

(Original signature required) Date: ____________

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.
Part Six

Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the Person who has made the offer of employment, as stated in Part 1 of the application form;
- If this application is for an employment in respect of a Caretaker in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the Person who has made the offer of employment, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National: ____________________________

(Original signature required)

Name (in BLOCK CAPITALS): ____________________________

Date: ____________________________

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

[ ]

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

[ ]

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).

[ ]
Declaration of Person who has made the offer of employment

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is in respect of a Critical Skills Employment Permit, a job offer of 2 years, or more, has been made to the Foreign National, as stated in Part 2 of the application form, and
- the Foreign National, as stated in Part 2 of the application form, will be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.
- In accordance with Section 29 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is false or misleading is guilty of an offence.
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and
- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Person who has made the offer of employment:

(Original signature required)

Name (in BLOCK CAPITALS):

Position Held:

Title:

Date:

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
**Authorisation of Agent**

*If no agent is representing the applicant then this section to be left blank.*

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

<table>
<thead>
<tr>
<th>Agent Name</th>
<th>Title</th>
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<tbody>
<tr>
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</table>

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

<table>
<thead>
<tr>
<th>Signature of Agent</th>
<th>Date</th>
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<td>D MM YY</td>
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</tbody>
</table>

**Agent's Address for Correspondence:**

<table>
<thead>
<tr>
<th>Address 1</th>
<th>Address 2</th>
<th>Town</th>
<th>County</th>
<th>Country</th>
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<tr>
<th>E-mail address</th>
<th>Telephone number</th>
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<td></td>
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</tbody>
</table>

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Person who has made the offer of employment: [Signature]  
Date: D MM YY

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National: [Signature]  
Date: D MM YY
Requirements for Supporting Documentation

(A) Requirements for Person who has made the offer of employment

If the person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROC (Revenue Online Service) or otherwise.
- OR
- If the person who has made the offer of employment is a start-up Company which would not yet have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERP (Employers Registration Number)

If the person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROC (Revenue Online Service) or otherwise.

Business Permission

If the person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State:

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.
- Please Note: Original documents should not be submitted

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfill this requirement.

(C) Application Requirements

Please provide the following documents in respect of the Primary Permit Holder (current or previous holder of a Green Card/Critical Skills Employment Permit) or the Researcher:

- A copy of a birth certificate, marriage certificate, civil partnership registration, evidence of permission from the Minister for Justice and Equality to remain in the State for the purpose of making an application for an employment permit, or other legal document evidencing the relationship of the dependent, civil partner or spouse with the primary permit holder or researcher.
- Clear, legible copy (preferably in colour) of the personal details pages of the primary permit holder’s or researcher’s current passport, showing his or her picture, personal details and his or her signature.
- Please supply the primary permit holder’s or researcher’s GNIB personal identification number which is shown on their GNIB card. If not available please supply a clear, legible copy (preferably in colour) of their current immigration stamps and visa.
- In respect of a primary permit holder:
  - A letter from the primary permit holder’s employer, dated within the 3 month period prior to the application, confirming the primary permit holder’s employment with that employer and his or her job title.
- In respect of a researcher:
  - Where the researcher is resident in the State on foot of holding a current Hosting Agreement, a letter from the person in the State with whom the research is being carried out, dated within the 3 month period prior to the application, confirming that the research project researcher is carrying out such research.
  - Where the researcher is no longer the holder of a Hosting Agreement and now has a stamp 4, a letter from the employer of the research project researcher dated within the 3 month period prior to the application, confirming the research project researcher’s employment with that employer and his or her job title.

For an employment in a restaurant or a fast food outlet

If the application is in respect of such employments the following additional documentation is required:

- If the establishment has been operating for one year or more, a copy of a "P35L" from returned by the Person who has made the offer of employment to the Revenue Commissioners,
- An up-to-date tax clearance certificate in respect of the Person who has made the offer of employment,
- Copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application,
- Copies of any certified qualifications of the Foreign National in respect of whom the application is made,
- A letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.
For an employment as a Carer In a private home

If the application is in respect of such eligible employment the following additional documentation is required:

- In the case of a trained medical professional:
  (a) copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations,
  (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring, confirming that the person has a severe medical condition, or
- In the case of a Carer with a long history of care:
  (a) a copy of a P90, pay slips, a notarised letter or an affidavit establishing that the Foreign National in respect of whom the application is made has a long history of caring for the person concerned, and
  (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring confirming that the person has special care needs.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2008, as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by postal order: If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment

In accordance with Diffinance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from businesses in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 18(1)(d) of the Employment Permits Act 2008, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2008, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2008, as amended, or any Order made under these Acts is an offence punishable by Law.
(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Person who has made the offer of employment, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at [www.dataprotection.ie](http://www.dataprotection.ie). Alternatively, they may call: (057) 868 4500 / Lo-Call Number: 1890 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(2), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both,

(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorized agent (if applicable).

Attach 1 passportized photograph, with Foreign National’s name printed on the back.

Indicate the following:
- The applicant (person applying) i.e. Person who has made the offer of employment or the Foreign National.

Part One – Details of Person who has made the offer of employment: Complete all questions

Person who has made the offer of employment should include copies of:
- Completed P30/ROS Online Receipt dated within 3 months preceding the application or a copy of a letter from Revenue Commissioners confirming registration as an employer, if it is a start-up Company (whichever is applicable);
- Evidence of Business Permission (if applicable)

Part Two – Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date;
- Immigration stamps (if GNIB personal identification number not available);
- Visa (if GNIB personal identification number not available)

Original documents should not be submitted.

Part Three – Details of Redundancy: Complete all questions, as applicable

- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application;
- Sign and date the declaration - original signature required.

Part Four – Details of Employment: Complete all questions (unless otherwise specified)

Please supply clear copies (preferably in colour) of the following in respect of the primary permit holder or researcher:
- Documentation evidencing the relationship between the Foreign National and the Primary Permit Holder or Researcher;
- Passport pages showing photograph, personal details and expiry date;
- Immigration stamps (if GNIB personal identification number not available);
- Visa (if GNIB personal identification number not available);
- Relevant letters from their current employers

Original documents should not be submitted.

Part Five – Details of Payment: Complete all questions

- Include the appropriate fee if required. The current fees applicable are available on the Department’s website.
- Sign Payer declaration - original signature required
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national

Part Six - Acceptance of Terms & Conditions

- Sign and date the appropriate declarations - original signatures required

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EMployment Permits Section  

Contact Details

E-mail: employmentpermits@dj.ie
Call Centre: 353-1-417 3333
LoCall: 1860 301 618
(from within Ireland only)
Fax: 353-1-417 3296
Address: Davitt House
95a Adelaide Road
Phoenix Park
Ireland

Employment Permits Section Web Pages
Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation’s website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form C

Application form for grant of General Employment Permit

General Employment Permit
New Application

This form should be used by either the person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- An employment permit in respect of all employments, other than those employments for which an employment permit shall not be granted pursuant to Schedule 4 in the Principal Regulations, and where the person who has made the offer of employment has been unable to recruit an Irish or EEA national for the employment.

For permission to work in the State for a period of less than 90 days, the Athlone Working Scheme operated by the Department of Justice and Equality may be appropriate.

Complete ALL parts of this form as required in BLOCK CAPITALS. The Person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORIZED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section MUST be completed for all applications)

Person who has made the offer of employment □ Foreign National □

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box □

Part One Registration Details of Person who has made the offer of employment

1. Employer Registered Number: Obtained from the Revenue Commissioners

2. Company Name Registered Number (if applicable): Obtained from the Companies Registration Office

3. Business Name Registered Number (if applicable): Obtained from the Companies Registration Office

4. If the Person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number: Obtained from the Registry of Friendly Societies

5. If the Person who has made the offer of employment is a Charity, please supply the Charity Number: Obtained from the Revenue Commissioners

If the Person who has made the offer of employment is not a Limited Company, please complete Questions 6, 7, 8 and 9.

If the Person who has made the offer of employment is a Limited Company, please proceed to Question 10.
6. If the Person who has made the offer of employment is not a registered company, please indicate what type of entity it is:

<table>
<thead>
<tr>
<th>Sole Trader</th>
<th>Partnership</th>
<th>Other (please specify):</th>
</tr>
</thead>
</table>

7. Please state the full name of the Person who has made the offer of employment:

8. Please state the nationality of the Person who has made the offer of employment:

9. If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
<th>If Yes, please specify:</th>
</tr>
</thead>
</table>

If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation).

10. Registered name of Company/Business:

11. Trading name of business (If different):

12. Nature of business:

13. Company/Business Address:

<table>
<thead>
<tr>
<th>Address 1:</th>
<th>Address 2:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Town:</td>
<td>County:</td>
</tr>
<tr>
<td>Country:</td>
<td></td>
</tr>
</tbody>
</table>

14. Telephone Number: 15. Fax:

16. Mobile Phone Number:

17. E-mail:

18. Website:

19. Number of EEA and/or Swiss nationals (including Irish) currently employed by the Person who has made the offer of employment:

20. Number of non-EEA nationals currently employed by the Person who has made the offer of employment:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Person who has made the offer of employment."
## Part Two
### Details of Foreign National

1. **Passport Number:**

2. **Expiry Date:**
   - Day: D
   - Month: M
   - Year: Y

3. **Nationality:**
   - Block Capital

4. **First Name:**
   - Block Capital

5. **Middle Name(s):**
   - Block Capital

6. **Family Name:**
   - Block Capital

7. **Date of Birth:**
   - Day: D
   - Month: M
   - Year: Y

8. **Male:**
   - [ ]

9. **Female:**
   - [ ]

---

### Current Address (foreign address required if residing outside the State):

- **Address 1:**
- **Address 2:**
- **Town:**
- **County:**
- **Country:**

### Telephone No.:

11. **Mobile Phone No.:**

12. **Please provide the Foreign National's PPS Number if available:**

13. **E-mail address:**

14. **Is the Foreign National currently in the State?**
   - [ ] Yes
   - [ ] No

15. **If 'Yes' on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:**
   - Block Capital

### GNIB Pin No.

- [ ]

**Note:**

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.

If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, s/he may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the Foreign National confirms that s/he has considered the available options and believes that an employment permit is still required.

*Enter education details of the Foreign National below, which are relevant to the Job Offer as stated in Part 4 of the application form.*

[Page 3] GEP0021H5
15. Highest level of Qualification relevant to the employment:  
  e.g. Certificate, Diploma, Degree, etc.

16. Title of Course:

17. Date of Completion:

18. Final Subjects Taken:

19. Result Achieved:  
e.g. 2.1

20. Has the Foreign National previously made an application for asylum in the State?  
Yes [ ] No [ ]

21. Has the Foreign National sought permission to land in the State on a previous occasion?  
Yes [ ] No [ ]

22. If 'Yes', please describe on what basis the permission was sought and indicate whether or not permission was granted:

23. Has the Foreign National been in the State on a previous occasion without permission?  
Yes [ ] No [ ]

24. Is the Foreign National currently employed in the State?  
Yes [ ] No [ ]

25. If 'Yes', please describe on what permission they have to be employed:

26. Has the Foreign National been employed in the State previously?  
Yes [ ] No [ ]

27. If 'Yes', please describe on what permission they had to be employed:

28. Is the Foreign National married to or in a civil partnership with an Irish or EEA national?  
Yes [ ] No [ ]

29. If 'Yes', what nationality is their spouse/partner?  

30. Is the Foreign National the spouse, civil partner or dependant of the holder of an Employment Permit or the holder of any other type of permission to work in the State?  
Yes [ ] No [ ]
Part Three  Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months? Yes  No

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Person who has made the offer of employment:  
(Original signature required)

Name (in BLOCK CAPITALS):  BLOCK CAPITALS  
Title:

Position Held:  BLOCK CAPITALS  
Date:  D D M M Y Y
Part Four Details of Employment

1. Title of Job: 

NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. Regulatory Body: 

3. Registration/Pin/ Licence No.: 

If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations, please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. Place(s) at which the employment concerned is to be carried out: 

5. Proposed Period of Employment Permit (maximum of 2 years) 

6. Proposed Start Date*: 

*We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.

7. Gross Annual Remuneration* € (Gross remuneration excludes overtime or premium payments)

8. Gross Annual Salary: € (if different from above)

9. Gross Weekly Salary: €

10. Hourly Rate of Pay: €

11. Deductions from Gross Weekly Salary: € Please specify purpose of deductions: 

12. Health Insurance*: € Please specify name of Health Insurance Provider: 

* All amounts which make up the basic salary must appear as payments on the payslip. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation at renewal stage, such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.

* Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994.

13. Number of hours of work per week*: 

* Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

14. What are the main functions of this job: 

15. Please detail the qualifications, skills, knowledge and experience required for this job: 

Page 6
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

**BLOCK CAPITALS**

**BLOCK CAPITALS**

**BLOCK CAPITALS**

**BLOCK CAPITALS**

17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?  

Yes [ ]  No [ ]

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

**BLOCK CAPITALS**

**BLOCK CAPITALS**

**BLOCK CAPITALS**

If 'No' please provide details of the recruitment method:

**BLOCK CAPITALS**

**BLOCK CAPITALS**

**BLOCK CAPITALS**

You must now attach the documents outlined in the requirement for Supporting Documentation under "(C) Application Requirements" (if applicable)

**Part Four A  Details of Advertisement**

The Person who has made the offer of employment in the case of a General Employment Permit application is required in all cases, other than the exemptions provided below, to offer the employment that is the subject of the General Employment Permit application to an Irish or EEA citizen by way of a Labour Market Needs Test. The Labour Market Needs Test must be conducted within the 90 day period preceding the date of the application. Applications should not be submitted unless this Labour Market Needs Test has been completed.

The Labour Market Needs Test is required in respect of the following applications:

- applications in respect of employment where there is a shortage in respect of the relevant qualifications, skills or experience which are required for the proper functioning of the economy and which employment is listed in Schedule 3,
- applications in respect of all other employments with an annual remuneration of €50,000 or more, other than those employments for which an employment permit shall not be granted and which employment is listed in Schedule 4,
- applications that are supported by a State Enterprise Agency,
- applications in respect of foreign nationals who were previously the holder of a Work Permit/General Employment Permit and who have been made redundant within 6 months of the date of application and where section 208 of the Employment Permits Act 2006, as amended, applies, and
- applications in respect of a Carer in a private home who is caring for a person with exceptional medical needs and where the non-EEA national is already providing care to that person and that person has developed a high level of dependence on that non-EEA national.

The requirements of the Labour Market Needs Test are that the employment that is the subject of the General Employment Permit application must be:

- advertised with the Department of Social Protection Employment Services/EURES employment network for a period of at least two weeks, and
- advertised for three days in a national newspaper, and
- advertised in either a local newspaper or a job website (separate to DE/DE/EURES websites) for three days.

More information about the Department of Social Protection Employment Services/EURES employment network can be found on: www.welfare.ie

All General Employment Permit applications, if applicable, provide the vacancy reference number of their advertisement with the Department of Social Protection Employment Services/EURES Employment Network below and attach copies of the other required advertisements with the application.

1. Please provide the Department of Social Protection:

**Employment Services/EURES Employment Network Reference Number of your advertisement (if applicable):**

See Requirement for Supporting Documentation "(C) Application Requirements" for further information on advertising the job vacancy and further documentary requirements.
### Part Five

<table>
<thead>
<tr>
<th>Requirement for Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a fee payable for this Employment Permit application?</td>
</tr>
<tr>
<td>If No, please indicate on what basis no fee is applicable?</td>
</tr>
<tr>
<td>The Person who made the offer of employment is the applicant and has charitable status with the Revenue Commissioners</td>
</tr>
<tr>
<td>Dependent/Partner/Spouse Employment Permit</td>
</tr>
</tbody>
</table>

If no fee is payable proceed to Part Six.

### Details of Payment

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with D/Finance Circular 1/2013 from 19 September 20 (e Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) - an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Questions 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will be sent to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users, can continue to make payment by cheque, bank draft or postal order and must complete all details below.

#### Contact Details of Payer

1. Please indicate who is making the payment: Person who has made the offer of employment [ ] Foreign National [ ] Other [ ]

2. Title: [ ] Mr [ ] Mrs [ ] Miss [ ] Ms [ ] Other (please state) [ ]

3. Name: [ ]

4. Company (if applicable): [ ]

5. Telephone Number: [ ] 6. Fax Number: [ ]

7. Mobile Phone Number: [ ]

8. E-mail: [ ]

#### Payment Details

- Method of Payment: Electronic Funds Transfer [ ] Cheque [ ] Bank Draft [ ] Postal Order [ ]

9. Cheque No. [ ]

10. Payment enclosed / Amount of payment due: [ ]

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

#### Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 80% of the total fee paid)

Payer’s Signature: [ ]

Date: [ ]

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.
Part Six  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- if this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the Person who has made the offer of employment, as stated in Part 1 of the application form;
- if this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the Person who has made the offer of employment, as stated in Part 1 of the application form.

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National: __________________________ Title: __________________________

(Original signature required)

Name (in BLOCK CAPITALS): ____________________________________ Date: __________________________ M K Y

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
**Declaration of Person who has made the offer of employment**

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is in respect of a Critical Skills Employment Permit, a job offer of 2 years, or more, has been made to the Foreign National, as stated in Part 2 of the application form; and
- the Foreign National, as stated in Part 2 of the application form, will be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.
- In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and
- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

**Signature of Person who has made the offer of employment:**

(Original signature required)

**Name (in BLOCK CAPITALS):**

**Title:**

**Position Held:**

**Date:**

---

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

---

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

Agent Name
(In BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

Signature of Agent:
(Original signature required)

Date:

Agent's Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Person who has made the offer of employment
(Original signature required)

Date:

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date:
Requirements for Supporting Documentation

(A) Requirements for Person who has made the offer of employment

If the Person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.
- OR

  If the Person who has made the offer of employment is a start-up Company which would not yet have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERN (Employers Registered Number).

If the Person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the preceding 12 months, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the Person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National's passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State:

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

Labour Market Needs Test

If applicable, please provide copies of newspaper and website advertisements which show clearly the dates of publication of such advertisements.

For an employment in a restaurant or a fast food outlet:

If the application is in respect of such employment the following additional documentation is required:

- in the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet; and
- a letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

For an employment as a Carer in a private home:

If the application is in respect of such employment the following additional documentation is required:

- In the case of a trained medical professional:
  (a) copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations; and
  (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring, confirming that that person has a severe medical condition; or
• In the case of a Care: with a long history of care:
  (a) a copy of a P60, payslips, a notarised letter or an affidavit establishing that the Foren National in respect of whom the application is made has a long history of caring for the person concerned, and a letter from a registered medical practitioner, specializing in the area of illness of the person for whom the Foreign National will be caring confirming that that person has special care needs.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fees prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department's website.

Refunds
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permit Section is unable to refund fees by postal order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.

Acceptable Forms of payment:
In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permit Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can also be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are based on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 11(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation, is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permit Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended or any Order made under those Acts is an offence punishable by Law.
(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Person who has made the offer of employment, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 688 4800 / Lo-Call Number: 1890 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended by the Employment Permits (Amendment) Act 2014, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2008, as amended by the Employment Permits (Amendment) Act 2014, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 19(2), 19(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both, or

(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

Attach 1 passport sized photograph, with Foreign National's name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Person who has made the offer of employment or the Foreign National)

Part One - Details of Person who has made the offer of employment: Complete all questions

Person who has made the offer of employment should include copies of:
- Completed P30/ROS Online Receipt dated within 3 months preceding the application or a copy of a letter from Revenue Commissioners confirming registration as an employer, if a start-up Company (whichever is applicable).
- Evidence of Business Permission (if applicable).

Part Two - Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date
- Immigration stamps (if GNIB personal identification number not available)
- Visa (if GNIB personal identification number not available)

Original documents should not be submitted.

Part Three - Details of Redundancy: Complete all questions, as applicable

- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application
- Sign and date the declaration - original signature required

Part Four - Details of Employment: Complete all questions (unless otherwise specified)

Please provide copies of newspaper and website advertisements which show clearly the dates of publication of such advertisements.

Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN/License number at Part 3, Question 3:
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.

Please supply the following in the case of an employment in a restaurant or a fast food outlet:
- If the establishment has been operating for one year or more, a copy of a "P35L" form returned by the Person who has made the offer of employment to the Revenue Commissioners,
- An up-to-date tax clearance certificate in respect of the Person who has made the offer of employment,
- Copies of utility bills for the establishment's premises dated within the period of 2 months prior to the application.
- Copies of any certified qualifications of the Foreign National in respect of whom the application is made;
- A statement from the Person who has made the offer of employment confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet, and
- A letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

Please supply the following, whichever is applicable, in the case of an application for an employment in respect of an eligible Caree in a private home:
- Copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations.
- A letter from a registered medical practitioner practising in the area of illness of the person for whom the Foreign National will be caring, confirming that the person has a severe medical condition or that that person has special care needs.
- A copy of a P60, payslip, a notarised letter or an affidavit establishing that the Foreign National in respect of whom the application is made has a long history of caring for the person concerned

Part Five - Details of Payment: Complete all questions

- Include the appropriate fee if required (see (D) Schedule of Fees for further information).
- Sign payer declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Child Partner's current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.
Part Six - Acceptance of Terms & Conditions

1. Sign and date the appropriate declarations - original signatures required

## EMPLOYMENT PERMITS SECTION

<table>
<thead>
<tr>
<th>Website:</th>
<th><a href="http://www.djiie.ie/labou/workpermits/">www.djiie.ie/labou/workpermits/</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail:</td>
<td><a href="mailto:employmentpermits@djiie.ie">employmentpermits@djiie.ie</a></td>
</tr>
<tr>
<td>Call Centre:</td>
<td>353-1-417 5333</td>
</tr>
<tr>
<td></td>
<td>LtCdt: 1890 201 816</td>
</tr>
<tr>
<td></td>
<td>(from within Ireland only)</td>
</tr>
<tr>
<td>Fax:</td>
<td>353-1-631 3268</td>
</tr>
<tr>
<td>Address:</td>
<td>David House</td>
</tr>
<tr>
<td></td>
<td>64a Adelaide Road</td>
</tr>
<tr>
<td></td>
<td>Bulfin 2</td>
</tr>
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<td></td>
<td>Ireland</td>
</tr>
</tbody>
</table>

## Contact Details

Employment Permits Section Web Pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation's website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist - parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form D

Application form for grant of Intra-Company Transfer Employment Permit

This form should be used by a Connected Person in Ireland who wishes to apply for:

- An Employment Permit to provide for a Foreign National, employed by a person outside the State (Foreign Employer) to:
  - carry out duties for a Connected Person in the State in employments in senior management or employments requiring specialist knowledge, qualifications, or experience essential to the Connected Person's service, research equipment, techniques, or management, or
  - undertake a training programme provided by a Connected Person in employments that require the Foreign National to participate in such training programmes

and where such employments are not one of the employments in respect of which an employment permit shall not be granted pursuant to Schedule 4 in the Principal Regulations

The Foreign National must have a minimum of 6 months employment with the Foreign Employer prior to the application and the duration of the transfer must be at least 90 days. For permission to carry out the duties or undergo the training for a period of less than 90 days, the Atypical Working Scheme operated by the Department of Justice and Equality may be appropriate

Before completing this form, please read, and follow, the relevant permit information which is available on the Department's website. Complete ALL parts of this form as required in BLOCK CAPITALS. The Connected Person, the Foreign Employer, the Foreign National and the Agent (if applicable) must sign the declarations at the end of the form. Incomplete forms will be returned to the applicant or the authorised agent (if applicable).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2005, as amended, the Connected Person (Irish Entity) must be the applicant in respect of all Intra-Company Transfer Employment Permit applications.

Part One

Registration Details of the Connected Person

<table>
<thead>
<tr>
<th>1. Employer Registered Number:</th>
<th></th>
<th>Obtained from the Revenue Commissioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Company Name Registered Number:</td>
<td></td>
<td>Obtained from the Companies Registration Office</td>
</tr>
<tr>
<td>3. Business Name Registered Number (if applicable):</td>
<td></td>
<td>Obtained from the Companies Registration Office</td>
</tr>
<tr>
<td>4. If the Connected Person is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:</td>
<td></td>
<td>Obtained from the Registry of Friendly Societies</td>
</tr>
<tr>
<td>5. If the Connected Person is a Charity, please supply their Charity Number:</td>
<td></td>
<td>Obtained from the Revenue Commissioners</td>
</tr>
<tr>
<td>6. Registered name of Company/Business:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Trading name of business (if different):</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In order to be eligible for an Intra-Company Transfer Employment Permit there must be a connection, as defined in the Employment Permits Act 2006, as amended, between the Connected Person and the Foreign Employer.

The eligible connections are defined as follows:

(a) the connected person must be a subsidiary of the foreign employer, or
(b) the foreign employer must be a subsidiary of the connected person, or
(c) the connected person and the foreign employer must both be subsidiaries of a holding company that carries on business in the State or outside the State, or
(d) the connected person and the foreign employer must have entered into an agreement with another person whereby each of them agree to carry on business or provide services with each other in more than one state and to carry on business or provide services in the manner provided for in the agreement.

The term subsidiary above has the meaning assigned to it by section 155 of the Companies Act 1963.

Documentary evidence may be requested.

1. Please provide details of the relevant connection below:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

---

**Part One A**

**Details of the Connection between the Connected Person and the Foreign Employer**
### Part One B  Details of the Foreign Employer

1. Name of Foreign Employer:  

2. Address of Foreign Employer:  

You must now attach the documents outlined in Requirement for Supporting Documentation under "(a) Requirements for Connected Person."

### Part Two  Details of Foreign National

1. Passport Number:  

2. Expiry Date:  

3. Nationality:  

4. First Name:  

5. Middle Name(s):  

6. Family Name:  

7. Date of Birth:  

Enter these details exactly as they appear on the Foreign National's passport.

8. Male:  

9. Female:  

10. Current Address (Foreign address required if residing outside the State):  

   Address 1:  

   Address 2:  

   Town:  

   County:  

   Country:  

11. Telephone No.:  

12. Mobile Phone No.:  

13. Please provide the Foreign National's PPS Number if available:  

14. E-mail address:  

15. Is the Foreign National currently in the State?  

   Yes  

   No  

   If 'Yes' on what basis are they currently in the State, please describe, and complete GNI B card details, as requested, below:  

   Enter below details exactly as they appear on the Foreign National's GNI B card.
16. Highest level of Qualification relevant to the employment: e.g. Certificate, Diploma, Degree, etc.

17. Date of Completion:

18. Title of Course:

19. Final Subjects Taken:

20. Result Achieved: e.g. 2.1

21. Has the Foreign National previously made an application for asylum in the State?

22. Has the Foreign National sought permission to land in the State on a previous occasion?

If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted.

23. Has the Foreign National been in the State on a previous occasion without permission?

24. Is the Foreign National currently employed in the State?

If 'Yes' please describe on what permission they have to be employed:

25. Has the Foreign National been employed in the State previously?

If 'Yes' please describe on what permission they had to be employed:

26. Is the Foreign National married to, or in a civil partnership with an Irish or EEA national?

If 'Yes' what nationality is their spouse/partner?

27. Is the Foreign National married to or, the dependant of, the holder of an Employment Permit or to the holder of any other type of permission to work in the State?

You must now attach the documents outlined in Requirement for Supporting Documentation under "(b) Requirements for Foreign National."
Part Three Details of Redundancy

To be completed by the Connected Person in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Connected Person been made redundant in the employment that is the subject of this Employment Permit application over the last six months? Yes ☐ No ☐

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Connected Person: [Signature]

(Original signature required)

Name (in BLOCK CAPITALS): [Name]

Title: [Title]

Position Held: [Position]

Date: [Date]

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Part Four  Details of Intra-Company Transfer

1. Current Position of Foreign National: 

2. Length of time that Foreign national had been with Foreign Employer prior to transfer: 
   ('The proposed Foreign National must be with Foreign Employer for 6 months or more') 
   * Documentary evidence in the form of payslips may be requested.

3. Please outline, in detail, the reason for the transfer. This should include a description of the functions that will be undertaken by the Foreign National and why the transfer is required. Please continue on a separate sheet if required and append it to the application form.
### Part Five  
**Details of Employment**

1. Please indicate the category of employment this Irish Company Transfer Employment Permit application is in respect of:
   - Senior Management
   - Key Personnel
   - Trainees

2. Proposed Position of Foreign National with Connected Person:

   **NOTE:** Questions 3 and 4 to be completed by Health Professionals only.

3. Regulatory Body:

4. Registration/Pin No.:

If the application is in respect of Registered Doctors or Nurses listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

5. Duration of Transfer (definite start and end dates to a maximum of 2 years):

6. Place(s) at which the duties/training concerned is to be carried out:

7. Calculation of Remuneration:

   **a.** Basic Salary. Payments in respect of Board and Accommodation (or its monetary value) and Health Insurance can be included. If the current basic hourly rate of pay is below the Irish National Minimum Wage or an hourly rate of pay fixed under or pursuant to any other enactment, the additional payment to bring it up to or over the applicable hourly level should be shown separately below. The amount reckonable for this purpose must be an amount that is deemed allowable under Schedule One of the Minimum Wage Act, 2000.

   **(a)** Current Basic Annual Salary

   **(b)** Additional payment to bring Basic Annual Salary up to or over the Irish National Minimum Wage or the rate fixed under or pursuant to any other enactment (if applicable)

   **(c)** Deductions from either (a) or (b) above (if applicable)

   **(d)** "Total Basic Annual Salary less deductions at (c) if applicable"

   **Boat and Accommodation**

   Payments in respect of (if applicable)

   Monetary Value of (if applicable)

   **Payments in respect of Health Insurance**

   **Total Remuneration**

<table>
<thead>
<tr>
<th>Annual Salary (Foreign Currency)</th>
<th>Hourly Rate (Foreign Currency)</th>
<th>Annual Salary (in euro)</th>
<th>Hourly Rate (in euro)</th>
<th>Exchange Rate Used</th>
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All amounts which make up the basic salary, including any additional payments, must appear as payments on the payslip. If payments or the monetary value of Board and Accommodation (or either of them) or Health Insurance is being included in Gross Annual Remuneration this must be reconcilable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection and/or at renewal stage.

8. Number of hours of work per week:

*Please note that for the purposes of Employment Permit applications, the standard working week is considered to be 39 hours per week.*
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<tr>
<th>9. Please detail the qualifications, skills, knowledge or experience required for this job:</th>
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<table>
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<tr>
<th>10. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:</th>
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You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements."
Part Six

Requirement for Payment

Is a fee payable for this Employment Permit application?

Yes [ ] No [ ]

If No, please indicate on what basis no fee is applicable?

The Connected Person has charitable status with the Revenue Commissioners [ ]

Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national [ ]

If no fee is payable proceed to Part Seven.

Details of Payment

Important Note for Business Users - Payment by Electronic Funds Transfer

In accordance with DFVr Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) - an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Questions 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

Contact Details of Payer

1. Please indicate who is making the payment: Connected Person [ ] Other [ ]

2. Title: Mr [ ] Mrs [ ] Miss [ ] Ms [ ] Other (please state) [ ]

3. Name: [BLOCK CAPITALS]

4. Company (if applicable): [BLOCK CAPITALS]

5. Telephone Number: [ ] 6. Fax Number: [ ]

7. Mobile Phone Number: [ ]

8. E-mail: [ ]

Payment Details

9. Method of Payment: Electronic Funds Transfer [ ] Cheque [ ] Bank Draft [ ] Postal Order [ ]

10. Cheque No. [ ]

11. Payment enclosed? [ ] Amount of payment due: [ ]

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006 as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid).

Payer’s Signature: [ ] (Original signature required)

Date: [ ]

Employment Permits Section is unable to refund fees by postal order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.
Part Seven  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to carry out duties or undergo training with the Connected Person on the basis of this application. I hereby solemnly declare that:

- the qualification, skills, knowledge and experience I have attained, as stated in Part 2 of the application form, are true and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 5 of the application form (if applicable);
- I have been employed by the Foreign Employer named in this application form for a minimum of six months;
- I will continue to be employed, satisfied and paid under an employment contract outside the State by the Foreign Employer stated on this application form; and
- I will be fully tax compliant in the State.

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National: ___________________________  
(Original signature required)  
Date: ___________________________

Title: ___________________________

Name (in BLOCK CAPITALS): ___________________________

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address. [ ]

Tick this box if you want your permit to be posted to the Connected Person as stated in Part 1 of this Form. [ ]

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable). [ ]
Declaration of Connected Person

I, the Connected Person in the State, confirm that the Foreign National will be performing duties or undergoing training in the State that arises out of the intra-Company Transfer arrangement between the Foreign Employer and me and I understand that the Foreign National will be returning to his/her employment outside the State with the Foreign Employer after the completion of the duties or training with me.

I hereby solemnly declare that I have taken reasonable steps to satisfy myself that:

- the qualifications, skills, knowledge and experience attained by the Foreign National, as stated in Part 2 of the application form, are true and they correspond with and are relevant to the position on offer;
- the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
- the Foreign National has been employed by the Foreign Employer named in this application form for a minimum of six months;
- the Foreign National named in this application form will continue to be employed, salaried and paid under an employment contract outside the State by the Foreign Employer as stated in Part 1 of this application form
- in cases where I am assuming responsibility for the provision of board and accommodation (or either of them) and health insurance in respect of the Foreign National that:
  - appropriate board and accommodation (or either of them) will be provided for the Foreign National while he or she is in the State to carry out duties lor, or participate in a training programme provided by me,
  - appropriate Health insurance will be provided in respect of the Foreign National should he or she require medical treatment for illness or injury during the period for which he or she will be in the State pursuant to the employment permit; and
  - where a person outside the State provides insurance for medical treatment in respect of the Foreign National, the health insurance has the same, or similar, effect as the health insurance provided by a health insurer entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994.

I understand and accept that:

- in accordance with Section 23 of the Employment Permits Act 2006, as amended, I shall not seek to recover from the Foreign national any charge, fee or expense arising out of the application for the Employment Permit or any matter relating to or concerning such an application or the grant of the Employment Permit.

- in accordance with Section 26 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Connected Person:
(Original signature required)

Name (in BLOCK CAPITALS):

Position Held:

Title:

Date:

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
Declaration of Foreign Employer

I, the Foreign Employer, give an undertaking that the Foreign National will be fully tax compliant for the duration of the Foreign National's stay in the State. I confirm that the Foreign National will be returning to my overseas place of employment after the completion of the duties or training with the Connected Person.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience attained by the Foreign National, as stated in Part 2 of the application form, are true and they correspond with and are relevant to the position on offer;
- the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part B of the application form (if applicable);
- the Foreign National has been employed by me for a minimum of six months prior to the transfer;
- where the foreign salary currently paid by me does not meet the Irish National Minimum Wage hourly rate of pay or an hourly rate of pay fixed under or pursuant to any other enactment that applies to the employment concerned, I undertake to pay an additional payment to achieve the National Minimum Wage hourly rate or the hourly rate fixed under or pursuant to any other enactment and that this amount will appear on the foreign national's payslip for the duration of their assignment in the State;
- the Foreign National named in this application form will continue to be employed, salaried and paid under an employment contract outside the State by me, the Foreign Employer, as stated in Part 1 of this application form;
- in cases where I am assuming responsibility for the provision of board and accommodation (or either of them) and health insurance in respect of the Foreign National that:
  - appropriate board and accommodation (or either of them) will be provided for the Foreign National while he or she is in the State to carry out duties for, or participate in a training programme provided by the Connected Person,
  - appropriate Health insurance will be provided in respect of the Foreign National should he or she require medical treatment for illness or injury during the period for which he or she will be in the State pursuant to the employment permit; and
  - where a person outside the State provides insurance for medical treatment in respect of the Foreign National, the health insurance has the same, or similar, effect as the health insurance provided by a health insurer entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994.

I understand and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of the employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State in accordance with Section 25 of the Employment Permits Act 2006, as amended.

- a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Foreign Employer:
(Original signature required)

Name (in BLOCK CAPITALS):

Position Held:

Title:

Date:

DDMMYYYY
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the Connected Person) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is requested, all parties must be in agreement with the nomination of an agent. Agents will be copied any correspondence regarding this application.

Agent Name (in BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Agent:
(Original signature required)

Date:

Agent's Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Connected Person, permit the above named agent to act on my behalf in respect of this application.

Signature of Connected Person:
(Original signature required)

Date:

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date:

I, the Foreign Employer, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign Employer:
(Original signature required)

Date:
Requirements for Supporting Documentation

(A) Requirements for Connected Person

If the Connected Person has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise,
- OR
- If the Connected Person is a start-up Company which would not yet have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and tax ID (Employer Identification Number).

If the Connected Persons has been issued with an Employment Permit before but has not been issued with an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

All Connected Persons who have not previously applied for and been issued with an Intra-Company Transfer Employment Permit within the past two years are required to submit the following documentation:

- Evidence of the connection between the Connected Person and the Foreign Employer.

Additional documentation
The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available, please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted

Important Note concerning the passport expiry date
In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfill this requirement.

(C) Application Requirements

For an employment in a restaurant or a fast food outlet

If the application is in respect of such employment, the following additional documentation is required:

- If the establishment has been operating for one year or more, a copy of a “P35L” form returned by the Person who has made the offer of employment to the Revenue Commissioners.
- An up-to-date tax clearance certificate in respect of the Person who has made the offer of employment.
- Copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application.
- Copies of any certified qualifications of the Foreign National in respect of whom the application is made.
- In the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast-food outlet, and
- A letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.
Refunds
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment
In accordance with DfInfrac Circular 1/2013, from 19 September 2014 (4 Dąy) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will be sent to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned.
Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.
B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 18(1)(B) of the Employment Permits Act 2006, as amended.
C. The Foreign National remains an employee of the Foreign Employer for the duration of the transfer.
D. The Foreign National only performs the duties or undergoes the training in respect of which the Employment Permit is issued.
E. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.
F. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
G. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.
H. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with the provisions of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, and Orders made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection
The Employment Permits Section may undertake verification of all data submitted on this application form. The Connected Person, the Foreign Employer, the Foreign National and the authorised Agent (if applicable) are advised that, in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 888 4800 / Lo-Call Number: 1980 252231

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (c) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 20(4) or 25 is liable—
(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both.
(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

**Attach 1 passport sized photograph, with Foreign National’s name printed on the back.**

**Part One – Details of the Connected Person, Details of the Foreign Employer and Details of the Connection between the Connected Person and the Foreign Employer: Complete all questions**

Connected Persons should include copies of:
- Completed P30/RCS Online Receipt dated within 3 months preceding the application; Or a copy of a letter from Revenue Commissioners confirming registration as an employee, if a start-up Company (whichever is applicable).
- Evidence of Connection between Connected Person and Foreign Employer (if applicable)

**Part Two – Details of Foreign National: Complete all questions**

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date
- Immigration stamps (if GNIB personal identification number not available)
- Visa (if GNIB personal identification number not available)

Original documents should not be submitted.

**Part Three – Details of Redundancy: Complete all questions, as applicable.**

- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.
- Sign and date the declaration - original signature required.

**Part Four – Details of Intra-Company Transfer: Complete all questions.**

- Please complete in relation to the reason for the Intra-Company Transfer.

**Part Five – Details of Employment: Complete all questions (unless otherwise specified)**

Please supply copies of the following in the case of health professionals, including registered doctors and registered nurses who have not provided their Registration/PIN number at Part 5. Questions 3 and 4:
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations

Please supply the following in the case of an employment in a restaurant or a fast food outlet:
- If the establishment has been operating for one year or more, a copy of a “P35L” form returned by the Person who has made the offer of employment to the Revenue Commissioners,
- an up-to-date tax clearance certificate in respect of the Person who has made the offer of employment,
- copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application,
- copies of any certified qualifications of the Foreign National in respect of whom the application is made, in the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet, and a letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

**Part Six – Details of Payment: Complete all questions**

- Include the appropriate fee if required. The current fees applicable are available on the Department’s website
- Sign Payer declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national

**Part Seven - Acceptance of Terms & Conditions**

- Sign and date the appropriate declarations - original signatures required
### EMPLOYMENT PERMITS SECTION

<table>
<thead>
<tr>
<th>E-mail:</th>
<th><a href="mailto:employmentpermits@dipi.ie">employmentpermits@dipi.ie</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Call Centre:</td>
<td>353-1- 7 5333</td>
</tr>
<tr>
<td></td>
<td>(LoCall: 1890 201 816 (from within Ireland only))</td>
</tr>
<tr>
<td>Fax:</td>
<td>353-1- 601 3288</td>
</tr>
<tr>
<td>Address:</td>
<td>Davitt House</td>
</tr>
<tr>
<td></td>
<td>56a Adelaide Road</td>
</tr>
<tr>
<td></td>
<td>Dublin 2</td>
</tr>
<tr>
<td></td>
<td>Ireland</td>
</tr>
</tbody>
</table>

### Contact Details

#### Employment Permits Section Web pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation’s website.

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**PLEASE NOTE:** The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for Instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form E

Application form for Grant of Contract for Services Employment Permit

An Roinn Post, Fiontar agus Nualchothta
Department of Jobs, Enterprise and Innovation

Contract for Services Employment Permit
NEW Application

This form should be used by Foreign Contractors who wish to apply for:

- An Employment Permit to provide for the employment in the State of a Foreign National who is employed by a Contractor outside the State, to perform duties in the State for an Irish entity (Relevant Person) in situations where the foreign employer (Contractor) and the Irish entity (Relevant Person) have entered into a contract service agreement.

- The Foreign National must have a minimum of 5 months continuous employment with the Contractor prior to the transfer and the duration of the transfer must be at least 90 days. For permission to work for a period of less than 90 days, the Aypical Working Scheme operated by the Department of Justice and Equality may be appropriate.

Before completing this form, please read the relevant permit information which is available on the Department’s website. Complete ALL parts of this form as required in BLOCK CAPITALS. The Contractor, the Relevant Person, the Foreign National and the Agent (if applicable) must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE CONTRACTOR OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?
In accordance with the Employment Permits Act 2008, as amended, the Contractor (foreign employer) must be the applicant in respect of all Contract for Services Employment Permit applications.

<table>
<thead>
<tr>
<th>Part One</th>
<th>Registration Details of Contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Employer Registered Number</td>
<td>Obtained from the Revenue Commissioners</td>
</tr>
<tr>
<td>2. Company Name Registered Number (if applicable)</td>
<td>Obtained from the Companies Registration Office</td>
</tr>
<tr>
<td>3. Business Name Registered Number (if applicable)</td>
<td>Obtained from the Companies Registration Office</td>
</tr>
<tr>
<td>4. If the Contractor is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:</td>
<td>Obtained from the Registry of Friendly Societies</td>
</tr>
<tr>
<td>5. Registered name of Company/Business:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>6. Trading name of business (if different):</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>7. Nature of business:</td>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>
### Part One A  
**Details of Relevant Person**

1. **Name of Relevant Person (Irish Entity):**

2. **Address of Relevant Person (Irish Entity):**  
   (Place at which the employment concerned, in respect of the Contract Service Agreement, is to be carried out)

3. **Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Relevant Person:**

4. **Number of non EEA nationals currently employed by the Relevant Person:**

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*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

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Part Two  
Details of Foreign National

1. Job title of Foreign National:  

2. Length of time that the Foreign National has been employed by the Contractor prior to this application:  
(The Foreign National must be employed by the Contractor for 6 months or more*)

* Documentary evidence may be requested in the form of relevant payslips.

3. Passport Number:  

4. Expiry Date:  

5. Nationality:  

6. First Name:  

7. Middle Name(s):  

8. Family Name:  

9. Date of Birth:  

10. Male:  

11. Female:  

Enter these details exactly as they appear on the Foreign National’s passport.

12. Current Address of Foreign National:  

Enter these details exactly as they appear on the Foreign National’s GNIB card*  

13. Is the Foreign National currently in the State?  

Yes  
No  

If ‘Yes’ on what basis are they currently in the State, please describe:  

Enter education details below relevant to the Job Offer as stated in Part 5 of the application form

14. Highest level of Qualification relevant to the employment:  
(e.g. Certificate, Diploma, Degree, etc.)  

15. Date of Completion:  

16. Title of Course:  

17. Final Subjects Taken:  

* If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.
18. Result Achieved:
   e.g. 5f

19. Has the Foreign National previously made an application for asylum in the State? Yes □ No □

20. Has the Foreign National sought permission to land in the State on a previous occasion?
    Yes □ No □
    If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted:

21. Has the Foreign National been in the State on a previous occasion without permission? Yes □ No □

22. Is the Foreign National currently employed in the State? Yes □ No □
    If 'Yes' please describe on what basis they are employed:

23. Has the Foreign National been employed in the State previously? Yes □ No □
    If 'Yes' please describe on what basis they were employed:

24. Is the Foreign National married to, or in a civil partnership with an Irish or EEA national? Yes □ No □
    If 'Yes' what nationality is their spouse/partner?

25. Is the Foreign National married to, or the dependant of, an Employment Permit holder or to the holder of any other type of permission to work in the State? Yes □ No □

*You must now attach the documents outlined in Requirement for Supporting Documentation under "(B) Requirements for Foreign National."*
# Part Three

## Details of Redundancy

To be completed by the Relevant Person in respect of any dismissals by reason of redundancy within the meaning of section 8 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Relevant Person been made redundant in the employment that is the subject of this Employment Permit application over the last six months?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

<table>
<thead>
<tr>
<th>Signature of Relevant Person:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(Original signature required)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name (in BLOCK CAPITALS):</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Position Held:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Title:</th>
<th></th>
</tr>
</thead>
</table>

| Date:                         | D O M Y Y |
### Part Four Details of Contract Service Agreement

<p>| | | | | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Start Date of Contract:</td>
<td><strong>D</strong></td>
<td><strong>O</strong></td>
<td><strong>M</strong></td>
<td><strong>M</strong></td>
<td><strong>Y</strong></td>
<td><strong>Y</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>End Date of Contract:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

2. Please outline, in detail, the details of the Contract Service Agreement. This should include a description of the Contract entered into and should be as a result of a one to one contract with the Relevant Person (Irish Entity). Please continue on a separate sheet if required and append it to the application form.

*Documentary evidence may be requested.*
# Part Five

## Details of Employment

### 1. Title of Job:

NOTE: Questions 2 and 3 to be completed by Health Professionals only.

### 2. Regulatory Body:

### 3. Registration/Pin No.:

If the application is in respect of Registered Doctors or Nurses listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

### 4. Place(s) at which the employment concerned is to be carried out:

### 5. Proposed Period of Employment Permit (maximum of 2 years):

### 6. Proposed Start Date:

* We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.

### 7. Calculation of Remuneration:

* Basic Salary, Payments in respect of Board and Accommodation (or its monetary value) and Health Insurance can be included. If the current basic hourly rate of pay is below the Irish National Minimum Wage or the rate fixed under or pursuant to any other enactment, the additional payment to bring it up to or over the applicable hourly level should be shown separately below. The amount reckonable for this purpose must be an amount that is deemed allowable under Schedule One of the Minimum Wage Act, 2000.

<table>
<thead>
<tr>
<th>Description</th>
<th>Annual Salary (Foreign Currency)</th>
<th>Hourly Rate (Foreign Currency)</th>
<th>Annual Salary (in euro)</th>
<th>Hourly Rate (in euro)</th>
<th>Exchange Rate Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Current Basic Annual Salary</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>(b) Additional payment to bring Basic Annual Salary up to or over the Irish National Minimum Wage or the rate fixed under or pursuant to any other enactment (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>(c) Deductions from either (a) or (b) above (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>(d) Total Basic Annual Salary less deductions at (c) (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Board and Accommodation Payments in respect of (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Monetary Value of (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Payments in respect of Health Insurance (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Total Remuneration</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
</tbody>
</table>

All amounts which make up the basic salary, including any additional payments, must appear as payments on the payslip. If payments or the monetary value of Board and Accommodation (or either of them) or Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection and/or at renewal stage.

### 8. Number of hours of work per week:

*Please note that for the purposes of Employment Permit applications, the standard working week is considered to be 39 hours per week.
9. Please detail the qualifications, skills, knowledge or experience required for this job:

   BLOCK CAPITALS

   BLOCK CAPITALS

   BLOCK CAPITALS

10. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

   BLOCK CAPITALS

   BLOCK CAPITALS

   BLOCK CAPITALS

   BLOCK CAPITALS

Part Five A  
Details of Advertisement

The Contractor in the case of a Contract for Services Employment Permit application is required in all cases other than the exemptions provided below, to offer the employment that is the subject of the Contract for Services Employment Permit application to an Irish or EEA citizen by way of a Labour Market Needs Test. The Labour Market Needs Test must be conducted within the 90 day period preceding the date of the application. Applications should not be submitted unless this Labour Market Needs Test has been completed.

The Labour Market Needs Test is not required in respect of the following applications:

- applications in respect of employments where there is a shortage in respect of the relevant qualifications, skills or experience which are required for the proper functioning of the economy and which employments are listed in Schedule 3 to the Principal Regulations,
- applications in respect of all other employments with an annual remuneration of €69,000 or more, other than those employments for which an employment permit shall not be granted and which employments are listed in Schedule 4 to the Principal Regulations, and
- applications that are supported by a State Enterprise Agency.

The requirements of the Labour Market Needs Test are that the employment that is the subject of the Contract for Services Employment Permit application must be:

- advertised with the Department of Social Protection Employment Services/EURES employment network for a period of at least two weeks and
- advertised for three days in a national newspaper, and
- advertised in either a local newspaper or a job website (separate to DSP/EURES websites) for three days.

More information about the Department of Social Protection Employment Services/EURES employment network can be found on:

www.welfare.ie

All Contract for Services Employment Permit applications must, if applicable, provide the vacancy reference number of their advertisement with the Department of Social Protection Employment Services/EURES Employment Network below, and attach copies of the other required advertisements with the application.

1. Please provide the Department of Social Protection Employment Services/EURES Employment Network Reference number or your advertisement (if applicable):

   See Requirement for Supporting Documentation "(C) Application Requirements".
Part Six

Requirement for Payment

Is a fee payable for this Employment Permit application? [ ] Yes [ ] No

If No, please indicate on what basis no fee is applicable:

Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national.

If no fee is payable proceed to Part Seven.

Details of Payment

Important Note for Business Users - Payment by Electronic Funds Transfer:

In accordance with DfInnance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 6, 7, and 8) - an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

Contact Details of Payer

1. Please indicate who is making the payment:

[ ] Contractor [ ] Other (please state)

2. Title:

Mr [ ] Mrs [ ] Miss [ ] Ms [ ]

3. Name:

[ ] BLOCK CAPITALS

4. Company (if applicable):

[ ] BLOCK CAPITALS

5. Telephone Number:

6. Fax Number:

7. Mobile Phone Number:

8. E-mail:

Payment Details

9. Method of Payment:

Electronic Funds Transfer [ ] Cheque [ ] Bank Draft [ ] Postal Order [ ]

10. Cheque No.

11. Payment enclosed / Amount of payment due: €

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1, (Under the Employment Permits Act 2008, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer’s Signature: ____________________________ Date: __________

(Original signature required)

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.
Part Seven

Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to perform the duties with the Relevant Person on the basis of this application. I hereby solemnly declare that:

- the qualification, skills, knowledge and experience I have attained, as stated in Part 2 of the application form are true and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 6 of the application form (if applicable);
- I have been employed by the Contractor named in this application form for a minimum of six months prior to this application;
- I will continue to be employed, salaried and paid under an employment contract outside the State by the Contractor stated on this application form; and
- I will be fully tax compliant in the State.

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National:
(Original signature required)

Name (in BLOCK CAPITALS):

Title:

Date:

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Contractor as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).

Declaration of Relevant Person

I, the Relevant Person in Ireland, confirm that the Foreign National will be performing duties in the State that arise out of the contract service agreement between the Contractor and me and I understand that the Foreign National will be returning to his/her employment outside the State with the Contractor after the completion of the duties which are part of the contract service agreement.

I understand and accept that:

- in accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Relevant Person:
(Original signature required)

Name (in BLOCK CAPITALS):

Title:

Date:

Page 10

CFSEP002/15
Declaration of Contractor

I, the Contractor, give an undertaking that the Foreign National will be fully tax compliant for the duration of the Foreign National’s stay in Ireland. I confirm that the Foreign National will be returning to my overseas place of employment after the completion of the duties as part of the contract service agreement.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience attained by the Foreign National, as stated in Part 2 of the application form, are true and they correspond with and are relevant to the position on offer;
- the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 6 of the application form (if applicable);
- the Foreign National has been employed by me for a minimum of six months prior to this application;
- where the foreign salary currently paid by me does not meet the Irish National Minimum Wage hourly rate of pay or an hourly rate of pay fixed under or pursuant to any other enactment that applies to the employment concerned, I undertake to make an additional payment to achieve the National Minimum Wage hourly rate or the hourly rate fixed under or pursuant to any other enactment and that this amount will appear on the Foreign National’s payslip for the duration of their assignment in the State;
- appropriate board and accommodation (or either of them) will be provided for the Foreign National while he or she is in the State to carry out the duties as part of the contract service agreement;
- appropriate Health Insurance will be provided in respect of the Foreign National should he or she require medical treatment for illness or injury during the period for which he or she will be in the State pursuant to the employment permit; and
- where the insurance for medical treatment in respect of the Foreign National is provided by a health insurance provider outside the State, the health insurance has the same, or similar, effect as the health insurance provided by a health insurer entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994;
- the Foreign National named in this application form will continue to be employed, salaried and paid under an employment contract outside the State by me, the Foreign Employer, as stated in Part 1 of this application form.

I understand and accept that:

- in accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of the employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State in accordance with Section 25 of the Employment Permits Act 2006, as amended;
- a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence;
- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Contractor: ___________________________
(Original signature required)

Name (in BLOCK CAPITALS): _______________________
Title: _______________________
Date: ____________ M _______ Y ________

Certified Copy of Employment Permit

The certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this form.

Tick this box if you want your permit to be posted to your current address. □

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable). □
## Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the Contractor) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. Agents will be copied any correspondence regarding this application.

**Agent Name**

(in BLOCK CAPITALS):  

**Title:**

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

**Signature of Agent:**  

(Original signature required)

**Date:**  

**Agent’s Address for Correspondence:**

| Address 1: |  
| Address 2: |  
| Town: |  
| County: |  
| Country: |  

**E-mail address:**

**Telephone number:**

I, the Contractor, permit the above named agent to act on my behalf in respect of this application.

**Signature of Contractor:**  

(Original signature required)

**Date:**  

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

**Signature of Foreign National:**

(Original signature required)

**Date:**  

I, the Relevant Person, assent to the above named agent acting on behalf of the Contractor in respect of this application.

**Signature of Relevant Person:**  

(Original signature required)

**Date:**  

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*Page 12*  
*CFSEP00215*
Requirements for Supporting Documentation

(A) Requirements for Contractor

If the Contractor has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.
- OR
- If the Contractor has not yet have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERN (Employers Registered Number).

If the Contractor has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Additional documentation
The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign Nationa's passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State:

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date
In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

Labour Market Needs Test
If applicable, please provide copies of newspaper and website advertisements which show clearly the dates of publication of such advertisements.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employments Permits Act 2006 (as amended). The current fees applicable are available on the Department's website.

Refunds
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.

Acceptable Forms of payment
In accordance with DFinANCE Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to Department of Jobs, Enterprise & Innovation.
(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on the Employment Permit. The remuneration being paid must be verifiable in the event of a national Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 16(1)(d) of the Employment Permits Act 2006, as amended.

C. The Foreign National remains an employee of the Foreign Employer for the duration of the transfer.

D. The Foreign National only performs the duties or undergoes the training in respect of which the Employment Permit is issued.

E. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

F. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

G. A fee, as determined by the Minister for Jobs. Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

H. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Contractor, the Relevant Person, the Foreign National and the Authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner's website at www.dataprotection.ie. Alternatively, they may call: (057) 868 4800 / Lo-Call Number: 1800 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 29 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32(1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both,

(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department's website.
**Application Form Checklist**

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

<table>
<thead>
<tr>
<th>Attach 1 passport sized photograph, with Foreign National's name printed on the back.</th>
</tr>
</thead>
</table>

**Part One – Details of the Contractor and the Details of the Relevant Person:** Complete all questions

Contractors should include copies of:
- Completed P30/ROS/ON Line Receipt dated within 3 months preceding the application. Or a copy of a letter from Revenue Commissioners confirming registration as an employer, if no returns have been made in respect of employees (whichever is applicable).

**Part Two – Details of Foreign National:** Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date.
- Immigration stamps (if GNIB personal identification number not available).
- Visa (if GNIB personal identification number not available).

Original documents should not be submitted.

**Part Three – Details of Redundancy:** Complete all questions, as applicable.

- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.
- Sign and date the declaration – original signature required.

**Part Four – Details of Contract Service Agreement:** Complete all questions.

- Please complete in relation to the details of the contract service agreement.

**Part Five – Details of Employment:** Complete all questions (unless otherwise specified)

Please provide copies of newspaper and website advertisements which show clearly the dates of publication of such advertisements.

Please supply copies of the following in the case of health professionals, including registered doctors and registered nurses who have not provided their Registration/PIN number at Part 5, Questions 3 and 4.
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Regulations.

**Part Six – Details of Payment:** Complete all questions

- Include the appropriate fee if required. The current fees applicable are available on the Department’s website.
- Sign Payee declaration – original signature required.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing his/her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the Civil Partnership registration evidencing the relationship of the Foreign National and the EEA national.

**Part Seven – Acceptance of Terms & Conditions**

- Sign and date the appropriate declarations – original signatures required.
## EMPLOYMENT PERMITS SECTION

### Contact Details

<table>
<thead>
<tr>
<th>E-mail:</th>
<th><a href="mailto:employmentpermits@djiel.ie">employmentpermits@djiel.ie</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Call Centre:</td>
<td>353-1417 5333</td>
</tr>
<tr>
<td>LoCall:</td>
<td>1890 201 916</td>
</tr>
<tr>
<td></td>
<td>(from within Ireland only)</td>
</tr>
<tr>
<td>Fax:</td>
<td>353-1-831 3368</td>
</tr>
<tr>
<td>Address:</td>
<td>David House</td>
</tr>
<tr>
<td></td>
<td>65a Adelaide Road</td>
</tr>
<tr>
<td></td>
<td>Dublin 2</td>
</tr>
<tr>
<td></td>
<td>Ireland</td>
</tr>
</tbody>
</table>

### Employment Permits Section Web pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation's website.

**PLEASE NOTE:** The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form F

Application form for grant of Reactivation Employment Permit

An Róltais Post, Fiontar agus Nuallochta
Department of Jobs Entrupri p e and Innovation

Reactivation Employment Permit
New Application

This form should be used by either the person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- an Employment Permit to facilitate the employment of a foreign national who has received permission from the Minister for Justice and Equality to be in the State for the purposes of making an application for a Reactivation Employment Permit, and
- in respect of any employment other than that of a domestic operative.

Complete ALL parts of this form as required in BLOCK CAPITALS. The person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee. If applicable, from the foreign national.

(This section MUST be completed for all applications)

Person who has made the offer of employment [ ] Foreign National [ ]

Health Professional [ ]

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One
Registration Details of Person who has made the offer of employment

1. Employer Registered Number: [ ] Obtained from the Revenue Commissioners

2. Company Name Registered Number
(if applicable): [ ] Obtained from the Companies Registration Office

3. Business Name Registered Number
(if applicable): [ ] Obtained from the Companies Registration Office

4. If the Person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:

   Obtained from the Registry of Friendly Societies

5. If the Person who has made the offer of employment is a Charity, please supply the Charity Number:

   Obtained from the Revenue Commissioners

If the Person who has made the offer of employment is not a Limited Company, please complete Questions 6, 7, 8 and 9.

If the Person who has made the offer of employment is a Limited Company, please proceed to Question 10.

6. If the Person who has made the offer of employment is not a registered company, please indicate what type of entity it is:

   Sole Trader [ ] Partnership [ ] Other (please specify) [ ]

   BLOCK CAPITALS
7. Please state the full name of the Person who has made the offer of employment:

8. Please state the nationality of the Person who has made the offer of employment:

9. If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?

   Yes  No  Not applicable  If Yes, please specify

If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation)

10. Registered name of Company/Business:

11. Trading name of business (if different):

12. Nature of business:

13. Company/Business Address:

   Address 1:
   Address 2:
   Town:
   County:
   Country:

14. Telephone Number:

15. Fax:

16. Mobile Phone Number:

17. E-mail:

18. Website:

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Person who has made the offer of employment:

20. Number of non-EEA nationals currently employed by the Person who has made the offer of employment:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Person who has made the offer of employment."
### Part Two: Details of Foreign National

1. **Passport Number:**

2. **Expiry Date:**

3. **Nationality:**

4. **First Name:**

5. **Middle Name:**

6. **Family Name:**

7. **Date of Birth:**

8. **Male:**

9. **Female:**

10. **Current Address (foreign address required if residing outside the State):**
    - **Address 1:**
    - **Address 2:**
    - **Town:**
    - **County:**
    - **Country:**

11. **Telephone No.:**

12. **Mobile Phone No.:**

13. **Please provide the Foreign National's PP Number if available:**

14. **E-mail address:**

15. **Is the Foreign National currently in the State?**
   - **Yes**
   - **No**

16. **If "Yes" on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:**

17. **GNIB Pin No.**

18. **Highest level of Qualification relevant to the employment:**
   - **e.g. Certificate, Diploma, Degree, etc.**

---

*Enter these details exactly as they appear on the Foreign National's passport.*

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.*

*If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, s/he may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required.*

*If this is the case, by submitting this application the Foreign National confirms that s/he has considered the available options and believes that an employment permit is still required.*

*Enter education details of the Foreign National below, which are relevant to the Job Offer as stated in Part 4 of the application form.*
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>21. Has the Foreign National been employed in the State previously?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes, please provide on what permission they had to be employed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Has the Foreign National currently employed in the State?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes, please provide on what permission they have to be employed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Is the Foreign National the spouse, civil partner or dependant of the holder of an Employment Permit or the holder of any other type of permission to work in the State?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes, please provide on what basis the permission was sought and indicate whether or not permission was granted.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part Three Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months?

Yes [ ] No [ ]

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Person who has made the offer of employment: [ ]

(Original signature required)

Name (In BLOCK CAPITALS): [ ]

Title: [ ]

Position Held: [ ]

Date: [ ]
### Part Four: Details of Employment

1. **Title of Job:**

   **Note:** Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. **Regulatory Body:**

3. **Registration/Pin/Licence No.:**

   If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations, please provide your registration details above. Documentary evidence will not be required.

   Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. **Place(s) at which the employment concerned is to be carried out:**

5. **Proposed Period of Employment Permit (maximum of 2 years):**

6. **Proposed Start Date:**

   **We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.**

7. **Gross Annual Remuneration:**

   €

   *(Gross remuneration excludes overtime or premium payments)*

8. **Gross Annual Salary: (If different from above):**

9. **Gross Weekly Salary:**

10. **Hourly Rate of Pay:**

    €

    **Please specify purpose of deductions:**

    **Please specify name of Health Insurance Provider:**

11. **Deductions from Gross Weekly Salary:**

    €

12. **Health insurance:**

    €

   *All amounts which make up the basic salary must appear as payments on the pay slips. If Health Insurance is being included in the Gross Annual Remuneration, this must be verifiable by way of supporting documentation at renewal stage; such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.*

    *Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.*

13. **Number of hours of work per week:**

   39

   **Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.**

14. **What are the main functions of this job:**

    **BLOCK CAPITALS**

15. **Please detail the qualifications, skills, knowledge and experience required for this job:**

    **BLOCK CAPITALS**

    **BLOCK CAPITALS**

    **BLOCK CAPITALS**
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?

Yes [ ] No [ ]

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

| BLOCK CAPITALS |
| BLOCK CAPITALS |
| BLOCK CAPITALS |

If 'No' please provide details of the recruitment method:

| BLOCK CAPITALS |

You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (if applicable).
### Part Five: Requirement for Payment

<table>
<thead>
<tr>
<th>Question</th>
<th>Option 1</th>
<th>Option 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a fee payable for this Employment Permit application?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If No, please indicate on what basis no fee is applicable?</td>
<td>Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national</td>
<td></td>
</tr>
<tr>
<td>Dependant/Partner/Spouse Employment Permit</td>
<td>Exchange Agreement Employment Permit</td>
<td></td>
</tr>
</tbody>
</table>

If no fee is payable proceed to Part 6a.

### Details of Payment

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with DF/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) and an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payer’s Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

#### Contact Details of Payer

1. **Please indicate who is making the payment:**
   - Person who has made the offer of employment
   - Foreign National
   - Other (please state)

2. **Title:**
   - Mr
   - Mrs
   - Miss
   - Ms
   - Other

3. **Name:**
   **BLOCK CAPITALS**

4. **Company (if applicable):**
   **BLOCK CAPITALS**

5. **Telephone Number:**
6. **Fax Number:**

7. **Mobile Phone Number:**

8. **E-mail:**

#### Payment Details

9. **Method of Payment:**
   - Electronic Funds Transfer
   - Cheque
   - Bank Draft
   - Postal Order

10. **Cheque No.:**
11. **Payment enclosed / Amount of payment due:**

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

#### Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1 (under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid).

Payer’s Signature: ____________________________ Date: __________/________/________

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

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Page 8

REP002/15
Part Six

Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the Person who has made the offer of employment, as stated in Part 1 of the application form;
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the Person who has made the offer of employment, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is false or misleading is guilty of an offence.

Signature of Foreign National: ___________________________ Title: __________
(Original signature required)

Name (in BLOCK CAPITALS): ___________________________ Date: ________

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address. ______

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form. ______

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable). ______
Declaration of Person who has made the offer of employment

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is in respect of a Critical Skills Employment Permit, a job offer of 2 years, or more, has been made to the Foreign National, as stated in Part 2 of the application form; and
- the Foreign National, as stated in Part 2 of the application form, will be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.
- In accordance with Section 23 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employees should the need arise, and
- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Person who has made the offer of employment:
(Original signature required)

Name (in BLOCK CAPITALS):

Position Held:

BLOCK CAPITALS

Title:

Date: D M Y Y

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

Agent Name
(In BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

Signature of Agent:
(Original signature required)

Date:

Agent's Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Person who has made the offer of employment:
(Original signature required)

Date:

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date:
## Requirements for Supporting Documentation

### (A) Requirements for Person who has made the offer of employment

If the Person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.
- OR
- If the Person who has made the offer of employment is a start-up Company which would not yet have made returns to the Revenue Commissioners in respect of employers, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERN (Employers Registered Number).

If the Person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

### Business Permission

If the Person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

### Additional documentation

The Minister may request such other information as might maternally assist in making a decision on an application.

### (B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State:

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available, please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted.

### Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

### (C) Application Requirements

Please provide a copy of the Reactivation Employment Permit letter issued to the Foreign National by the Department of Justice and Equality.

For an employment in a restaurant or a fast food outlet:

If the application is in respect of such employments the following additional documentation is required:

- If the establishment has been operating for one year or more, a copy of a "P35L" form returned by the Person who has made the offer of employment to the Revenue Commissioners.
- An up-to-date tax clearance certificate in respect of the Person who has made the offer of employment.
- Copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application.
- Copies of any certified qualifications of the Foreign National in respect of whom the application is made.
- A letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

For an employment as a Carer in a private home:

If the application is in respect of such eligible employments the following additional documentation is required:

- In the case of a trained medical professional:
  - (a) copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations.
  - (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring, confirming that that person has a severe medical condition.
- In the case of a Carer with a long history of care:

---

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REP002/15
(a) a copy of a P60, payslip, a notarised letter or an affidavit establishing that the Foreign National in respect of whom the application is made has a long history of caring for the person concerned, and
(b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring confirming that that person has special care needs.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 3(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds:
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment
In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 18(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent [if applicable] for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent [if applicable] for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Person who has made the offer of employment, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commission’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Lo-Call Number: 1850 252231

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 18(2), information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(2), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both, or
(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
### (G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent if applicable.

#### Attach 1 passport sized photograph, with Foreign National’s name printed on the back.

#### Indicate the following:
- The applicant (person applying i.e. Person who has made the offer of employment or the Foreign National).

#### Part One – Details of Person who has made the offer of employment: Complete all questions

Person who has made the offer of employment should include copies of:
- Completed P30/P26 Online Receipt dated within 3 months preceding the application, Or a copy of a letter from Revenue Commissioners confirming registration as an employer, if a start-up Company (whichever is applicable).
- Evidence of Business Permission (if applicable).

#### Part Two – Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date
- Immigration stamps (if GNIB personal identification number not available)
- Visa (if GNIB personal identification number not available)

Original documents should not be submitted.

#### Part Three – Details of Redundancy: Complete all questions, as applicable.
- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.
- Sign and date the declaration - original signature required.

#### Part Four – Details of Employment: Complete all questions (unless otherwise specified)

Please provide a copy of the Reacivation Employment Permit letter issued to the Foreign National concerned by the Department of Justice and Equality.

Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN/License number at Part 3, Question 3:
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.

Please supply the following in the case of an employment in a restaurant or a fast food outlet:
- If the establishment has been operating for one year or more, a copy of a "F35L" form returned by the Person who has made the offer of employment to the Revenue Commissioners;
- An up-to-date tax clearance certificate in respect of the Person who has made the offer of employment;
- Copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application;
- Copies of any certified qualifications of the Foreign National in respect of whom the application is made,
- A letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.

Please supply the following, whichever is applicable, in the case of an application for an employment in respect of an eligible Care in a private home:
- Copies of qualifications confirming that the Foreign National in respect of whom the application is made is a trained medical professional in a profession listed in Part A of Schedule 2 in the Principal Regulations,
- A letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will be caring, certifying that that person has a severe medical condition or that that person has special care needs,
- A copy of a P60, payslips, a notarised letter or an affidavit establishing that the Foreign National in respect of whom the application is made has a long history of caring for the person concerned.

#### Part Five – Details of Payment: Complete all questions

- Include the appropriate fee if required. The fees currently applicable are available on the Department’s website.
- Sign Payer declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, a copy of a relevant page of the EEA Spouse/Civil Partners’ current passport showing is or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.

#### Part Six - Acceptance of Terms & Conditions
- Sign and date the appropriate declarations - original signatures required.
PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form G

Application form for grant of Exchange Agreement Employment Permit

An Roinn Post, Fiontar agus Nualialocha
Department of Job Enterprise and Innovation

Exchange Agreement Employment Permit Application

This form should be used by either the person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- An Employment Permit to facilitate the employment in the State, of a foreign national pursuant to an agreement or an international agreement to which the State is a party and which agreements are listed in Schedule 5 in the Principal Regulations.
- Applications can be in respect of all employments that come within the terms of the relevant Exchange Agreement.
- Exchange Agreement Employment Permits are non-renewable and are issued for a maximum period of 12 months.

For permission to work in the State for a period of less than 90 days, the Annual Working Scheme operated by the Department of Justice and Equality may be appropriate.

Complete ALL parts of this form as required in BLOCK CAPITALS. The Person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of this form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section MUST be completed for all applications)

Person who has made the offer of employment □ Foreign National □

Health Professional □

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box □

Part One Registration Details of Person who has made the offer of employment

1. Employer Registered Number: □ Obtained from the Revenue Commissioners

2. Company Name Registered Number (if applicable): □ Obtained from the Companies Registration Office

3. Business Name Registered Number (if applicable): □ Obtained from the Companies Registration Office

4. If the person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number □ Obtained from the Registry of Friendly Societies

5. If the person who has made the offer of employment is a Charity, please supply the Charity Number □ Obtained from the Revenue Commissioners

Page 1
If the Person who has made the offer of employment is not a Limited Company, please complete Questions 5, 7, 8 and 9.

If the Person who has made the offer of employment is a Limited Company, please proceed to Question 10.

6. If the Person who has made the offer of employment is not a registered company, please indicate what type of entity it is:

- Sole Trader
- Partnership
- Other (please specify): [Blank]

7. Please state the full name of the Person who has made the offer of employment:

8. Please state the nationality of the Person who has made the offer of employment:

9. If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?

- Yes
- No
- Not applicable
- If Yes, please specify: [Blank]

   If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation).

10. Registered name of Company/Business:

11. Trading name of business (if different):

12. Nature of business:

13. Company/Business Address:

   - Address 1:
   - Address 2:
   - Town:
   - County:
   - Country:

14. Telephone Number:

15. Fax:

16. Mobile Phone Number:

17. E-mail:

18. Website:

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Person who has made the offer of employment:

20. Number of non-EEA nationals currently employed by the Person who has made the offer of employment:

   *The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

"You must now attach the documents outlined in Requirement for Supporting Documentation under (1A) Requirements for Person who has made the offer of employment."
**Part Two**

### Details of Foreign National

1. **Passport Number:**

2. **Expiry Date:**
   - **D D M M Y**

3. **Nationality:**
   - **BLOCK CAPITALS**

4. **First Name:**
   - **BLOCK CAPITALS**

5. **Middle Name(s):**
   - **BLOCK CAPITALS**

6. **Family Name:**
   - **BLOCK CAPITALS**

7. **Date of Birth:**
   - **D D M M Y**

8. **Gender:**
   - Male: [ ]
   - Female: [ ]

9. **Current Address (foreign address required if residing outside the State):**
   - **Address 1:**
   - **Address 2:**
   - **Town:**
   - **County:**
   - **Country:**

10. **Telephone No.:**
11. **Mobile Phone No.:**

12. **Please provide the Foreign National's PPS Number if available:**

13. **E-mail address:**

14. **Is the Foreign National currently in the State?**
   - Yes [ ]
   - No [ ]

15. **If 'Yes' on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:**
   - **BLOCK CAPITALS**

16. **Enter below details exactly as they appear on the Foreign National's GNIB card:**
   - **GNIB Pin No.**
   - **Dept. No.**

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.*

If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, they may be eligible to apply for a Stamp 4 permit to remain from the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the Foreign National confirms that they have considered the available options and believes that an employment permit is still required.

Enter education details of the Foreign National below, which are relevant to the Job Offer as stated in Part 4 of the application form.
16. Highest level of Qualification relevant to the employment: e.g. Certificate, Diploma, Degree, etc.

17. Date of Completion:

18. Title of Course:

19. Final Subjects Taken:

20. Result Achieved: e.g. 2.1

21. Has the Foreign National previously made an application for asylum in the State?
   Yes [ ] No [ ]

22. Has the Foreign National sought permission to land in the State on a previous occasion?
   Yes [ ] No [ ]

   If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted:

23. Has the Foreign National been in the State on a previous occasion without permission?
   Yes [ ] No [ ]

24. Is the Foreign National currently employed in the State?
   Yes [ ] No [ ]

   If 'Yes' please describe on what permission they have to be employed:

25. Has the Foreign National been employed in the State previously?
   Yes [ ] No [ ]

   If 'Yes' please describe on what permission they had to be employed:

26. Is the Foreign National married to or in a civil partnership with an Irish or EEA national?
   Yes [ ] No [ ]

   If 'Yes' what nationality is their spouse/partner?

27. Is the Foreign National the spouse, civil partner or dependant of, the holder of an Employment Permit or the holder of any other type of permission to work in the State?
   Yes [ ] No [ ]
Part Three  Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months?  Yes ☐ No ☐

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Person who has made the offer of employment: ____________________________
(Original signature required)

Name (in BLOCK CAPITALS): ____________________________ Title: ____________________________

Position Held: ____________________________ Date: ____________________________

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## Part Four

### Details of Employment

1. **Title of Job:**
   
   [Block Capitals]

   **NOTE:** Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. **Regulatory Body:**
   
   [Block Capitals]

3. **Registration/PIN/Licence No.:**
   
   [Block Capitals]

   If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A or Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

   Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. **Place(s) at which the employment concerned is to be carried out:**
   
   [Block Capitals]

5. **Proposed Period of Employment Permit (maximum of 1 year):**
   
   [Block Capitals]

   **6. Proposed Start Date:**
   
   [Block Capitals]

   *We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.*

7. **Gross Annual Remuneration:**

   € [Block Capitals]

   (Gross remuneration excludes overtime or premium payments)

8. **Gross Annual Salary:**

   € [Block Capitals]

   (If different from above)

9. **Gross Weekly Salary:**

   € [Block Capitals]

10. **Hourly Rate of Pay:**

    € [Block Capitals]

   **11. Deductions from Gross Weekly Salary:**

    € [Block Capitals]

    Please specify purpose of deductions:

    [Block Capitals]

    Please specify name of Health Insurance Provider:

    [Block Capitals]

   *All amounts which make up the basic salary must appear as payments on the payroll. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection.*

   *Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.*

13. **Number of hours of work per week:**

    [Block Capitals]

    *Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.*

14. **What are the main functions of this job:**

    [Block Capitals]

15. **Please detail the qualifications, skills, knowledge and experience required for this job:**

    [Block Capitals]
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

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17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?  
Yes ☐ No ☐

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

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If 'No' please provide details of the recruitment method:

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*You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (If applicable)*
### Part Five

#### Requirement for Payment

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<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>Is a fee payable for this Employment-Permit application?</td>
<td></td>
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<tr>
<td>The Person who made the offer of employment is the applicant and has charitable status with the Revenue Commissioners</td>
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<tr>
<td>Dependant/Partner/Spouse Employment-Permit</td>
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</table>

If no fee is payable proceed to Part Six.

#### Details of Payment

**Important Note for Business Users—Payment by Electronic Funds Transfer**

In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) — an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 10) and Payer’s Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

#### Contact Details of Payer

1. Please Indicate who is making the payment: Person who has made the offer of employment
   - Foreign National
   - Other

2. Title:  
   - Mr
   - Mrs
   - Miss
   - Ms
   - Other (please state)

3. Name: [BLOCK CAPITALS]

4. Company (If applicable): [BLOCK CAPITALS]

5. Telephone Number: ____________________________________________  
   6. Fax Number: _____________________________________________

7. Mobile Phone Number: _________________________________________

8. E-mail: ___________________________________________________

#### Payment Details

9. Method of Payment:  
   - Electronic Funds Transfer
   - Cheque
   - Bank Draft
   - Postal Order

10. Cheque No. ___________________________________________________________________________

11. Payment enclosed /  
    Amount of payment due: € __________________________________________________________________

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

#### Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2008, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer’s Signature: [Original signature required]  
Date: ____________

Employment Permits Section is unable to refund fees by payable order. If a refund of fee is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

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Part Six  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the Person who has made the offer of employment, as stated in Part 1 of the application form;
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the Person who has made the offer of employment, as stated in Part 1 of the application form.

Furthermore, I understand and accept that in accordance with Section 35 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National: [Signature]

Name (in BLOCK CAPITALS): [Name]

Title: [Title]

Date: [Date]

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Person who has made the offer of employment

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is in respect of a Critical Skills Employment Permit, a job offer of 2 years, or more, has been made to the Foreign National, as stated in Part 2 of the application form; and
- the Foreign National, as stated in Part 2 of the application form, will be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.
- In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and
- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Person who has made the offer of employment: ______________________
(Original signature required)

Name (in BLOCK CAPITALS): ______________________

Position Held: ______________________

Date: DD MM YY

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address. [ ]

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable). [ ]
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

Agent Name
(in BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

Signature of Agent:
(Original signature required)

Date:

Agent's Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Person who has
made the offer of employment:
(Original signature required)

Date:

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date:
Requirements for Supporting Documentation

(A) Requirements for Person who has made the offer of employment

If the Person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise, OR
  - If the Person who has made the offer of employment is a start-up Company which would not yet have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERN (Employers Registered Number).

If the Person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the Person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign Nationals

For all Foreign Nationals

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National's passport, showing his or her picture, personal details and his or her signature,
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfill this requirement.

(C) Application Requirements

The following additional documentation must be supplied with all Exchange Agreement Employment Permit applications.

- An original letter from the organisation operating the Exchange Agreement confirming that the Exchange Agreement applies to the Foreign National concerned.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006 as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.
Acceptable Forms of payment
In accordance with Diffinance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an e-mail will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order. drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 16(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection
The Employment Permits Section may undertake verification of all data submitted on this application form. The Person who has made the offer of employment, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Local Call Number: 1890 535231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both, or

(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publically available on the Department’s website.
### (G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

<table>
<thead>
<tr>
<th>Attach 1 passport sized photograph, with Foreign National’s name printed on the back</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicate the following:</td>
</tr>
<tr>
<td>• The applicant (person applying i.e. Person who has made the offer of employment or the Foreign National).</td>
</tr>
</tbody>
</table>

#### Part One – Details of Person who has made the offer of employment: Complete all questions

<table>
<thead>
<tr>
<th>Person who has made the offer of employment should include copies of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Completed P30/ROS Online Receipt dated within 3 months preceding the application. Or a copy of a letter from Revenue Commissioners confirming registration as an employer, if a start-up Company (whichever is applicable).</td>
</tr>
<tr>
<td>• Evidence of Business Permission (if applicable)</td>
</tr>
</tbody>
</table>

#### Part Two – Details of Foreign National: Complete all questions

<table>
<thead>
<tr>
<th>Please supply clear copies (preferably in colour) of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Passport pages showing photograph, personal details and expiry date</td>
</tr>
<tr>
<td>• Immigration stamps (if GNIB personal identification number not available)</td>
</tr>
<tr>
<td>• Visa (if GNIB personal identification number not available)</td>
</tr>
</tbody>
</table>

| Original documents should not be submitted |

#### Part Three – Details of Redundancy: Complete all questions, as applicable

<table>
<thead>
<tr>
<th>Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sign and date the declaration - original signature required</td>
</tr>
</tbody>
</table>

#### Part Four – Details of Employment: Complete all questions (unless otherwise specified)

| Please supply an original letter from the organisation operating the Exchange Agreement confirming that the Exchange Agreement applies to the Foreign National concerned. |

#### Part Five – Details of Payment: Complete all questions

<table>
<thead>
<tr>
<th>Include the appropriate fee if required. The current fees applicable are available on the Department’s website.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sign Payee declaration - original signature required</td>
</tr>
<tr>
<td>• If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status</td>
</tr>
<tr>
<td>• If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or civil partnership registration evidencing the relationship of the Foreign National and the EEA national.</td>
</tr>
</tbody>
</table>

#### Part Six – Acceptance of Terms & Conditions

| Sign and date the appropriate declarations - original signatures required |

### EMPLOYMENT PERMITS SECTION

<table>
<thead>
<tr>
<th>E-mail: <a href="mailto:employmentpermits@dji.ie">employmentpermits@dji.ie</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Call Centre: 353-1-417 5333</td>
</tr>
<tr>
<td>Locall: 1890 201 615</td>
</tr>
<tr>
<td>(From within Ireland only)</td>
</tr>
<tr>
<td>Fax: 353-1-631 3268</td>
</tr>
<tr>
<td>Address: Bevitt House</td>
</tr>
<tr>
<td>Blue Aisles Road</td>
</tr>
<tr>
<td>Dublin 2, Ireland</td>
</tr>
</tbody>
</table>

### Contact Details

<table>
<thead>
<tr>
<th>Employment Permits Section Web Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation’s website</td>
</tr>
</tbody>
</table>

**PLEASE NOTE:** The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form H

Application form for grant of Sport and Cultural Employment Permit

An Roinn Post, Fiontar agus Nualachta
Department of Jobs, Enterprise and Innovation

Sport and Cultural Employment Permit
New Application

This form should be used by either the person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- An employment permit for a foreign national who has the relevant qualifications, skills, experience or knowledge and whose employment is required for the development, operation and capacity of sporting and cultural activities in the State.

Applications can be in respect of all employment in sport and cultural activities other than those for which an employment permit shall not be granted pursuant to Schedule 4 in the Principal Regulations.

Complete ALL parts of this form as required in BLOCK CAPITALS. The Person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section must be completed for all applications)

Person who has made the offer of employment
Foreign National

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One
Registration Details of Person who has made the offer of employment

1. Employer Registered Number: [ ]
   Obtained from the Revenue Commissioners

2. Company Name Registered Number
   (If applicable): [ ]
   Obtained from the Companies Registration Office

3. Business Name Registered Number
   (If applicable): [ ]
   Obtained from the Companies Registration Office

4. If the person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:
   [ ]
   Obtained from the Registry of Friendly Societies

5. If the person who has made the offer of employment is a Charity, please supply the Charity Number:
   [ ]
   Obtained from the Revenue Commissioners

If the person who has made the offer of employment is not a Limited Company, please complete Questions 6, 7, 8 and 9.

If the person who has made the offer of employment is a Limited Company, please proceed to Question 10.

6. If the person who has made the offer of employment is not a registered company, please indicate what type of entity it is:
   Sole Trader [ ]
   Partnership [ ]
   Other (please specify) [ ]
   BLOCK CAPITALS
1. Passport Number:
2. Expiry Date: 
3. Nationality: 
4. First Name: 
5. Middle Name(s): 
6. Family Name: 
7. Date of Birth: 
8. Male: 
9. Female: 

**Part Two**

**Details of Foreign National**

Enter these details exactly as they appear on the Foreign National's passport.
10. Current Address (foreign address required if residing outside the State):

| Address 1: | BLOCK CAPITALS |
| Address 2: | BLOCK CAPITALS |
| Town: | BLOCK CAPITALS |
| County: | BLOCK CAPITALS |
| Country: | BLOCK CAPITALS |

11. Telephone No.:  
12. Mobile Phone No.:  

13. Please provide the Foreign National's PPB Number if available:  

14. E-mail address:  

15. Is the Foreign National currently in the State?  
   Yes [ ]  
   No [ ]  

   If 'Yes' on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:  

   Enter below details exactly as they appear on the Foreign National's GNIB card*:  

<table>
<thead>
<tr>
<th>GNIB Pin No.</th>
<th>Dept. No.</th>
</tr>
</thead>
</table>

   *If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa  

   If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, s/he may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required.  

   If this is the case, by submitting this application the Foreign National confirms that s/he has considered the available options and believes that an employment permit is still required.  

   Enter education details of the Foreign National below, which are relevant to the Job Offer as stated in Part 4 of the application form  

   16. Highest level of Qualification relevant to the employment:  
      e.g. Certificate, Diploma, Degree, etc. | BLOCK CAPITALS |

   17. Date of Completion:  

   18. Title of Course:  

   19. Final Subjects Taken:  

   20. Result Achieved:  
      e.g. 2.1  

   21. Has the Foreign National previously made an application for asylum in the State?  
      Yes [ ]  
      No [ ]  

   22. Has the Foreign National sought permission to land in the State on a previous occasion?  
      Yes [ ]  
      No [ ]  

      If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted:  

      Enter completion details here...  
      Enter completion details here...  
      Enter completion details here...  
      Enter completion details here...  
      Enter completion details here...  
      Enter completion details here...  
      Enter completion details here...
23. Has the Foreign National been in the State on a previous occasion without permission?  
   Yes ☐  No ☐

24. Is the Foreign National currently employed in the State?  
   Yes ☐  No ☐

   If 'Yes' please describe on what permission they have to be employed:  
   BLOCK CAPITALS

25. Has the Foreign National been employed in the State previously?  
   Yes ☐  No ☐

   If 'Yes' please describe on what permission they had to be employed:  
   BLOCK CAPITALS

26. Is the Foreign National married to, or in a civil partnership with an Irish or EEA national?  
   Yes ☐  No ☐

   If 'Yes' what nationality is their spouse/partner?  
   BLOCK CAPITALS

27. Is the Foreign National the spouse, civil partner or dependant of, the holder of an Employment Permit or the holder of any other type of permission to work in the State?  
   Yes ☐  No ☐

You must now attach the documents outlined in Requirement for Supporting Documentation under "(B) Foreign National Requirements."
Part Three Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 8 of the Redundancy Payments Act 1997 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 24 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months? Yes ☐ No ☐

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Person who has made the offer of employment: [Signature] (Original signature required)

Name (in BLOCK CAPITALS): [Block Capitals]

Position Held: [Block Capitals]

Title: [ ]

Date: [ ]

Page 5

:CEP002/16
Part Four

Details of Employment

1. Title of Job: ____________________________

NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. Regulatory Body: ____________________________

3. Registration/PIR/ Licence No.: ____________________________

If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A or Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. Place(s) at which the employment concerned is to be carried out: ____________________________

5. Proposed Period of Employment Permit (maximum of 2 years) ____________________________

6. Proposed Start Date*: DD MM YY

*We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.

7. Gross Annual Remuneration* € ____________________________ (Gross remuneration excludes overtime or premium payments)

8. Gross Annual Salary; (If different from above) € ____________________________

9. Gross Weekly Salary: € ____________________________

10. Hourly Rate of Pay: € ____________________________

11. Deductions from Gross Weekly Salary: € ____________________________

Please specify purpose of deductions: ____________________________

Please specify name of Health Insurance Provider: ____________________________

12. Health Insurance*: ____________________________

* All amounts which make up the basic salary must appear as payments on the payslip. If Health insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation at renewal stage, such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.

* Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.

13. Number of hours of work per week*: ____________________________

* Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

14. What are the main functions of this job: ____________________________

15. Please detail the qualifications, skills, knowledge and experience required for this job: ____________________________

Page 6

SCEP00315
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

<table>
<thead>
<tr>
<th>BLOCK CAPITALS</th>
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<tbody>
<tr>
<td>BLOCK CAPITALS</td>
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<tr>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>

17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?  
Yes [ ] No [ ]

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

<table>
<thead>
<tr>
<th>BLOCK CAPITALS</th>
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<tbody>
<tr>
<td>BLOCK CAPITALS</td>
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<tr>
<td>BLOCK CAPITALS</td>
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</tbody>
</table>

If 'No' please provide details of the recruitment method:

<table>
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<th>BLOCK CAPITALS</th>
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</thead>
<tbody>
<tr>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>

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**Part Four A Details of Governing Body**

In accordance with Section 3F of the Employment Permits Act 2006, as amended, the Minister may consult with any person who, the Minister is satisfied, has knowledge of or expertise in the sport or cultural activity concerned, e.g. the sport's Governing Body. Please provide contact details below.

28. Name of organisation:

| BLOCK CAPITALS |

29. Contact person:

| BLOCK CAPITALS | 30. Title: [ ] |

31. Position Held:

| BLOCK CAPITALS |

32. Telephone Number:

---

*You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (if applicable)*
### Part Five

#### Requirement for Payment

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a fee payable for this Employment Permit application?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If No, please Indicate on what basis no fee is applicable?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Person who made the offer of employment is the applicant and has charitable status with the Revenue Commissioners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependant/Partner/Spouse Employment Permit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Application is in respect of a non-EEA national married to, or in a civil partnership with an EEA national</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exchange Agreement Employment Permit</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If no fee is payable proceed to Part Six.

---

### Details of Payment

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with DfInance Circular 1/2013, from 19 September 2014 (a-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper-based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) – an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

#### Contact Details of Payer

1. Please Indicate who is making the payment:  
   - [ ] Person who has made the offer of employment
   - [ ] Foreign National
   - [ ] Other

2. Title:  
   - Mr
   - Mrs
   - Miss
   - Ms
   - Other (please state)

3. Name:  
   [BLOCK CAPITALS]

4. Company (If applicable):  
   [BLOCK CAPITALS]

5. Telephone Number:  
   [BLOCK CAPITALS]

6. Fax Number:  
   [BLOCK CAPITALS]

7. Mobile Phone Number:  
   [BLOCK CAPITALS]

8. E-mail:  
   [BLOCK CAPITALS]

#### Payment Details

9. Method of Payment:  
   - Electronic Funds Transfer
   - Cheque
   - Bank Draft
   - Postal Order

10. Cheque No:  
    [BLOCK CAPITALS]

11. Payment enclosed / Amount of payment due:  
    [BLOCK CAPITALS]

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

#### Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer’s Signature:  
(Original signature required)

Date:  
[ ] [ ] [ ] [ ] [ ] [ ] [ ]

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.
Part Six

Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the Person who has made the offer of employment, as stated in Part 1 of the application form;
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the Person who has made the offer of employment, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is false or misleading is guilty of an offence.

---

Signature of Foreign National:

(Original signature required)

Name (In BLOCK CAPITALS):

Title:

Date:

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Person who has made the offer of employment

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
  - the Foreign National, as stated in Part 2 of the application form, will be employed, satisfied and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerning any change, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and

- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Person who has made the offer of employment: (Original signature required)

Name (in BLOCK CAPITALS): BLOCK CAPITALS

Position Held: BLOCK CAPITALS

Title: DUMMY

Date: DUMMY

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

Agent Name
(In BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

Signature of Agent:
(Original signature required)

Date: __________

Agent’s Address for Correspondence:

Address 1: __________________________________________________________________________

Address 2: __________________________________________________________________________

Town: ________________________________________________________________________________

County: ______________________________________________________________________________

Country: ______________________________________________________________________________

E-mail address: _________________________________________________________________________

Telephone number: _____________________________________________________________________

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Person who has made the offer of employment:
(Original signature required)

Date: __________

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date: __________
Requirements for Supporting Documentation

(A) Requirements for Person who has made the offer of employment

If the person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding the application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise,
- OR
- If the person who has made the offer of employment is a start-up Company which would not yet have made return to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer, date of registration and the ERN (Employers Registered Number).

If the person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details page of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State:

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamp and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date:

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

For an employment in a restaurant or a fast food outlet:

If the application is in respect of such employment the following additional documentation is required:

- If the establishment has been operating for one year or more, a copy of a "P55L" form returned by the Person who has made the offer of employment to the Revenue Commissioners;
- an up-to-date tax clearance certificate in respect of the Person who has made the offer of employment;
- copies of utility bills for the establishment’s premises dated within the period of 2 months prior to the application;
- copies of any certified qualifications of the Foreign National in respect of whom the application is made;
- In the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet, and
- a letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant at the premises.
(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment

In accordance with DfInFone Circular 1/2013, from 19 September 2014 (a-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 16(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employer that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2008, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Person who has made the offer of employment, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Lo-Call Number: 1890 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 18(6) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20 information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32(1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both;
(b) on conviction on indictment, to a fine not exceeding €450,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

Attach 1 passport sized photograph, with Foreign National’s name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Person who has made the offer of employment or the Foreign National)

Part One – Details of Person who has made the offer of employment: Complete all questions

Person who has made the offer of employment should include copies of:
- Completed P3ROS Online Receipt dated within 3 months preceding the application, or a copy of a letter from Revenue Commissioners confirming registration as an employer, if a start-up Company (whichever is applicable).
- Evidence of Business Permit (if applicable).

Part Two – Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date.
- Immigration stamps (if GNIB personal identification number not available).
- Visa (if GNIB personal identification number not available).

Original documents should not be submitted.

Part Three – Details of Redundancy: Complete all questions, as applicable.
- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.
- Sign and date the declaration - original signature required.

Part Four – Details of Employment: Complete all questions (unless otherwise specified)

Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN number at Part 3, Question 3:
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.

Please supply details of the Governing Body of the Sport or Cultural activity concerned.

Please supply the following in the case of an employment in a restaurant or a fast food outlet:
- in the case of an establishment that has been operating for one year or more, a copy of a "P3SL" form returned by the Person who has made the offer of employment to the Revenue Commissioners,
- an up-to-date tax clearance certificate in respect of the Person who has made the offer of employment,
- copies of utility bills for the establishment's premises dated within the period of 2 months prior to the application,
- copies of any certified qualifications of the Foreign National in respect of whom the application is made,
- in the case of an application for employment as an executive chef, head chef, sous chef or specialist chef specialising in cuisine originating from a state that is not a Member State of the EEA, a statement from the Person who has made the offer of employment, confirming that the Foreign National in respect of whom the application is made shall be employed in an establishment other than a fast food outlet, and
- a letter from the relevant Local Health Authority confirming that the Person who has made the offer of employment has been granted permission to operate a restaurant or the premises.

Part Five – Details of Payment: Complete all questions
- Include the appropriate fee if required. The current fees applicable are available on the Department’s website.
- Sign Payment declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.

Part Six - Acceptance of Terms & Conditions
- Sign and date the appropriate declarations - original signatures required.
EMPLEYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@cit.ie
Call Centre: 0818-247233
Lo-Call: 1890208181 (from within Ireland only)
Fax: 353-1-6313268
Address: David House
65a Adelaide Road
Dublin 2
Ireland

Employment Permits Section Web pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation’s website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist—parts A, B, C, D, E, F and G are for Instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form 1

Application form for Grant of Internship Employment Permit

An Roinn Post, Fhiants agus Nualaimhta
Department of Jobs, Enterprise and Innovation

IEP002/15

Internship Employment Permit Application

This form should be used by either the Person who has made the offer of employment or the Foreign National, the subject of that offer of employment, who wish to apply for:

- An Employment Permit to facilitate the employment in the State, of a foreign national who is a full-time student enrolled in a third level institution outside the State for the purposes of gaining work experience for the completion of their Degree.
- The foreign national must:
  > be pursuing a degree course or higher in a discipline linked to the employment in respect of which there is a shortage in respect of the qualifications, skills, knowledge or experience and which are required for the proper functioning of the economy and which are listed in Schedule 3 in the Principal Regulations, and
  > have an offer of an Internship with an employer in the State.

Internship Employment Permits are non-renewable and are issued for a maximum period of 12 months. For permission to work in the State for a period of less than 90 days, the An早日 Working Scheme operated by the Department of Justice and Equality may be appropriate.

Complete ALL parts of this form as required in BLOCK CAPITALS. The Person who has made the offer of employment, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form. INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national. (This section MUST be completed for all applications)

<table>
<thead>
<tr>
<th>Person who has made</th>
<th>Foreign National</th>
</tr>
</thead>
<tbody>
<tr>
<td>the offer of employment</td>
<td></td>
</tr>
</tbody>
</table>

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One

Registration Details of Person who has made the offer of employment

| 1. Employer Registered Number: | Obtained from the Revenue Commissioners |
| 2. Company Name Registered Number (if applicable): | Obtained from the Companies Registration Office |
| 3. Business Name Registered Number (if applicable): | Obtained from the Companies Registration Office |
| 4. If the Person who has made the offer of employment is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number: | Obtained from the Registry of Friendly Societies |
| 5. If the Person who has made the offer of employment is a Charity, please supply the Charity Number: | Obtained from the Revenue Commissioners |
If the Person who has made the offer of employment is not a Limited Company, please complete Questions 6, 7, 8 and 9.

If the Person who has made the offer of employment is a Limited Company, please proceed to Question 10.

6. If the Person who has made the offer of employment is not a registered company, please indicate what type of entity it is:

<table>
<thead>
<tr>
<th>Sole Trader</th>
<th>Partnership</th>
<th>Other (please specify):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>BLOCK CAPITALS</td>
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</table>

7. Please state the full name of the Person who has made the offer of employment:

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<th>BLOCK CAPITALS</th>
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</table>

8. Please state the nationality of the Person who has made the offer of employment:

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<th>BLOCK CAPITALS</th>
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</table>

9. If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?

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<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable</th>
<th>If Yes, please specify</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>

If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation).

10. Registered name of Company/Business:

<table>
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</table>

11. Trading name of business (if different):

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<th>BLOCK CAPITALS</th>
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</table>

12. Nature of business:

<table>
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<tr>
<th>BLOCK CAPITALS</th>
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</table>

13. Company/Business Address:

<table>
<thead>
<tr>
<th>Address 1:</th>
<th>BLOCK CAPITALS</th>
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</thead>
<tbody>
<tr>
<td>Address 2:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>Town:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>County:</td>
<td>BLOCK CAPITALS</td>
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<tr>
<td>Country:</td>
<td>BLOCK CAPITALS</td>
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</tbody>
</table>

14. Telephone Number:

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<th>BLOCK CAPITALS</th>
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15. Fax:

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<th>BLOCK CAPITALS</th>
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</table>

16. Mobile Phone Number:

<table>
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<tr>
<th>BLOCK CAPITALS</th>
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</table>

17. E-mail:

<table>
<thead>
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<th>BLOCK CAPITALS</th>
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</table>

18. Website:

<table>
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</table>

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Person who has made the offer of employment:

<table>
<thead>
<tr>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

20. Number of non-EEA nationals currently employed by the Person who has made the offer of employment:

<table>
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<th>BLOCK CAPITALS</th>
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</thead>
</table>

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Person who has made the offer of employment."
**Part Two: Details of Foreign National**

1. **Passport Number:**

2. **Expiry Date:**

3. **Nationality:**

4. **First Name:**

5. **Middle Name(s):**

6. **Family Name:**

7. **Date of Birth:**

   - [ ] Male
   - [ ] Female

8. **Current Address (if residing outside the State):**
   - **Address 1:**
   - **Address 2:**
   - **Town:**
   - **County:**
   - **Country:**

9. **Telephone No.:**

10. **Mobile Phone No.:**

11. **Please provide the Foreign National’s PPS Number if available:**

12. **E-mail address:**

13. **Is the Foreign National currently in the State?**
   - [ ] Yes
   - [ ] No

   **If Yes, on what basis are they currently in the State, please describe, and complete GNIB card details, as requested, below:**

14. **GNIB Pin No.:**

15. **Dept. No.:**

---

*If the Foreign National is in the State but does not have a GNIB personal identification number, please supply a copy of the current immigration status and visa.

If the Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, s/he may be eligible to apply for a Stamp 4 permission to remain in the Irish Naturalisation and Immigration Service. However, if the Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the Foreign National confirms that s/he has considered the available options and believes that an employment permit is still required.*
15. Highest level of Qualification relevant to the employment:
   e.g. Certificate, Diploma, Degree, etc.
   Block Capitals

17. Date of Completion:
   Block Capitals

18. Title of Course:
   Block Capitals

19. Final Subjects Taken:
   Block Capitals
   Block Capitals
   Block Capitals
   Block Capitals
   Block Capitals

20. Result Achieved:
   e.g. 21
   Block Capitals

21. Has the Foreign National previously made an application for asylum in the State?
   Yes ☐ No ☐

22. Has the Foreign National sought permission to land in the State on a previous occasion?
   Yes ☐ No ☐

   If 'Yes' please describe on what basis the permission was sought and indicate whether or not permission was granted:
   Block Capitals

23. Has the Foreign National been in the State on a previous occasion without permission?
   Yes ☐ No ☐

24. Is the Foreign National currently employed in the State?
   Yes ☐ No ☐

   If 'Yes' please describe on what permission they have to be employed:
   Block Capitals

25. Has the Foreign National been employed in the State previously?
   Yes ☐ No ☐

   If 'Yes' please describe on what permission they had to be employed:
   Block Capitals

26. Is the Foreign National married to, or in a civil partnership with, an Irish or EEA national?
   Yes ☐ No ☐

   If 'Yes' what nationality is their spouse/partner?
   Block Capitals

27. Is the Foreign National the spouse, civil partner or dependant of, the holder of an Employment Permit or the holder of any other type of permission to work in the State?
   Yes ☐ No ☐
Part Three  Details of Redundancy

To be completed by the Person who has made the offer of employment in respect of any dismissals by reason of redundancy within the meaning of section 9 of the Redundancy Payments Act 1967 and where such dismissal was attributable wholly or mainly to the conditions specified in paragraphs (a), (b), (c), (d) or (e) of section 7(2) or to section 21 of that Act.

Please complete and sign the declaration below in full.

Have any employees of the Person who has made the offer of employment been made redundant in the employment that is the subject of this Employment Permit application over the last six months?

Yes [ ] No [ ]

If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months please outline the reason(s) for the redundancies. This should include information on the numbers of positions in that employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application, differs from those positions in that employment made redundant. Please continue on a separate sheet if required and append it to the application form.

I hereby solemnly declare the above information to be true and accurate.

Signature of Person who has made the offer of employment: [ ]
(Original signature required)

Name (in BLOCK CAPITALS): [ ]

Position Held: [ ]

Title: [ ]

Date: [ ]

Page 5

IEP007/15
### Part Four  Details of Employment

1. **Title of Job:**

   [Blank]

   **NOTE:** Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. **Regulatory Body:**

   [Blank]

3. **Registration/Pin/S:**

   [Blank]

   Licence No.: [Blank]

   If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

   Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or certification of their qualifications from the Department of Health.

4. **Place(s) at which the employment concerned is to be carried out:**

   [Blank]

5. **Proposed Period of Employment (maximum of 1 year):**

   [Blank]

6. **Proposed Start Date:**

   [Blank]

   *We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment.*

7. **Gross Annual Remuneration**

   [Blank]  

   *(Gross remuneration excludes overtime or premium payments)*

8. **Gross Annual Salary:**

   [Blank]

   *(If different from above)*

9. **Gross Weekly Salary:**

   [Blank]

10. **Hourly Rate of Pay:**

    [Blank]

   *Please specify purpose of deductions:*

   [Blank]

   *Please specify name of Health insurance Provider:*

   [Blank]

   *All amounts which make up the basic salary must appear as payments on the payslip. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection.*

   *Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.*

11. **Deductions from Gross Weekly Salary:**

    [Blank]

12. **Health Insurance:**

    [Blank]

   *Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.*

13. **Number of hours of work per week:**

    [Blank]

14. **What are the main functions of this job:**

    [Blank]

15. **Please detail the qualifications, skills, knowledge and experience required for this job:**

    [Blank]
16. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:

[Blank lines for details]

17. Did you use an Agent/Recruitment Agency to recruit the Foreign National?

Yes [ ] No [ ]

If 'Yes' please provide name and address of the Agent/Recruitment Agency:

[Blank lines for details]

If 'No' please provide details of the recruitment method:

[Blank lines for details]

You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (if applicable).
### Part Five: Requirement for Payment

**Is a fee payable for this Employment Permit application?**

- [ ] Yes
- [ ] No

**If No, please indicate on what basis no fee is applicable?**

- The person who made the offer of employment is the applicant and has charitable status with the Revenue Commissioners
- [ ] Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national
- [ ] Exchange Agreement Employment Permit

If no fee is payable proceed to Part Six.

### Details of Payment

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with Diffincent Circular 1/2015, from 19 September 2015 (e-Debit), the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Payment must be in the form of a Euro-denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

**Payer’s Declaration**

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the applicant specified on Page 1. (under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid.)

**Payer’s Signature:**

(Original signature required)

**Date:**

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

---

### Contact Details of Payer

1. **Person who has made the offer of employment:**
   - [ ] Person
   - [ ] Other

2. **Name:**
   - [ ] Mr
   - [ ] Mrs
   - [ ] Miss
   - [ ] Ms
   - [ ] Other (please state)

3. **Company (if applicable):**

4. **Telephone Number:**

5. **Mobile Phone Number:**

6. **E-mail:**

7. **Fax Number:**

8. **Payment Details**

9. **Method of Payment:**
   - [ ] Electronic Funds Transfer
   - [ ] Cheque
   - [ ] Bank Draft
   - [ ] Postal Order

10. **Cheque No.:**

11. **Amount of payment due:**

   **E**

---

IEP002/15
Part Six

Acceptance of Terms & Conditions

Declaration of Foreign
National

I, the undersigned, agree to undertake employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- the qualifications, skills, knowledge and experience I have attained are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- If this application is for a Critical Skills Employment Permit, I have received a job offer of 2 years, or more, from the person who has made the offer of employment, as stated in Part 1 of the application form;
- If this application is for an employment in respect of a carer in a private home and an employment permit is granted, I will have no objection to an inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will be employed, salaried and paid under an employment contract governed by the laws of the State by the person who has made the offer of employment, as stated in Part 1 of the application form.

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign
National: ____________________________
(Original signature required)

Name (in BLOCK CAPITALS): ____________________________

Title: ____________________________

Date: ____________________________

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address. [ ]

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form. [ ]

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable). [ ]
Declaration of Person who has made the offer of employment

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the qualifications, skills, knowledge and experience attained by the Foreign National are as stated in Part 2 of the application form and they correspond with and are relevant to the position on offer;
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
  - the Foreign National, as stated in Part 2 of the application form, will be employed, salaries and paid under an employment contract governed by the laws of the State by me, the Person who has made the offer of employment, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.

- In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and

- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Person who has made the offer of employment: ____________________________
(Original signature required)

Name (in BLOCK CAPITALS): _______________________________________________________

Position Held: ____________________________

Title: ____________________________

Date: ________________ M ________ Y ________

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address. __________

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable). __________
**Authorisation of Agent**

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

**Agent Name**
(In BLOCK CAPITALS):

**Title:**

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

**Signature of Agent:**
(Original signature required)

**Date:**

**Agent’s Address for Correspondence:**

**Address 1:**

**Address 2:**

**Town:**

**County:**

**Country:**

**E-mail address:**

**Telephone number:**

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

**Signature of Person who has made the offer of employment:**
(Original signature required)

**Date:**

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

**Signature of Foreign National:**
(Original signature required)

**Date:**
Requirements for Supporting Documentation

(A) Requirements for Person who has made
the offer of employment

If the Person who has made the offer of employment has not been granted an Employment Permit before, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

OR

If the Person who has made the offer of employment is a start-up Company which would not, yet, have made returns to the Revenue Commissioners in respect of employees, a copy of an official letter from Revenue confirming registration as an employer's data of registration and the ERN (Employer's Registered Number)

If the Person who has made the offer of employment has been granted an Employment Permit before but has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission:

If the Person who has made the offer of employment has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National's passport, showing his or her picture, personal details and his or her signature.

- In the case of health professionals listed in Part A of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

For all Foreign Nationals resident in the State

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available, please supply a clear, legible copy (preferably in colour) of your current Immigration stamps and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

The following additional documentation must be supplied with all Internship Employment Permit applications.

An original letter from a third level Institution outside the State:

- confirming that the foreign national is enrolled as a full-time student at that Institution,
- providing the name and description of the course of study in which the foreign national is enrolled,
- providing the qualifications or skills with which the course of study is wholly or substantially concerned,
- confirming that the employment in respect of which the application is made is wholly or substantially concerned with the course of study on which the foreign national is enrolled,
- confirming that the foreign national is required, for the completion of the course of study, to obtain experience in the practice of the skills or qualifications with which the course of study is concerned for a period of not more than 12 months in an employment that requires the practice of those skills or qualifications, and
- confirming that the foreign national is required to return to the Institution at the end of the 12 month period in order to complete the course of study.

An original letter from the person who has made the offer of employment:

- confirming that the employment is for a period not exceeding 12 months,
- stating the employment, as listed in Schedule 3 of the Principal Regulations, in which the foreign national is to be employed.
(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment
In accordance with DFlcience Circular 5/2013, from 19 September 2014 (a Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payments can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 15(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the foreign national is required to take up employment.

D. Any application which contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1995, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection
The Employment Permits Section may undertake verification of all data submitted on this application form. The Person who has made the offer of employment, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call 057 888 4800 / Lo-Call Number: 1890 252231

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable—
(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both, or
(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
**Application Form Checklist**

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

Attach 1 passport sized photograph, with Foreign National’s name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Person who has made the offer of employment or the Foreign National).

**Part One – Details of Person who has made the offer of employment: Complete all questions**

Person who has made the offer of employment should include copies of:
- Completed P30/ROS Online Receipt dated within 3 months preceding the application or a copy of a letter from Revenue Commissioners confirming registration as an employer; if a start-up company (whichever is applicable).
- Evidence of Business Permission (if applicable).

**Part Two – Details of Foreign National: Complete all questions**

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date.
- Immigration stamps (if GNIB personal identification number not available).
- Visa (if GNIB personal identification number not available).

Original documents should not be submitted.

**Part Three – Details of Redundancy: Complete all questions, as applicable**

- Please complete in relation to any redundancies within the last 6 months in the employment that is the subject of the Employment Permit application.
- Sign and date the declaration - original signature required.

**Part Four – Details of Employment: Complete all questions (unless otherwise specified)**

Please supply an original letter from the third level institution outside the State to include the following:
- Providing the name and description of the course of study in which the foreign national is enrolled.
- Providing the qualifications or skills with which the course of study is wholly or substantially concerned.
- Confirming that the employment in respect of which the application is made is wholly or substantially concerned with the course of study on which the foreign national is enrolled.
- Confirming that the foreign national is required, for the completion of the course of study, to obtain experience in the practice of the skills or qualifications with which the course of study is concerned for a period of not more than 12 months in an employment that requires the practice of those skills or qualifications, and
- Confirming that the foreign national is required to return to the institution at the end of the 12 month period in order to complete the course of study.

Please supply an original letter from the person who has made the offer of employment to include the following:
- Confirming that the employment is for a period not exceeding 12 months, and
- Stating the employment, as listed in Schedule 3 of the Principal Regulations, in which the foreign national is to be employed.

**Part Five – Details of Payment: Complete all questions**

- Include the appropriate fee (if required, see (3) Schedule of Fees for further information).
- Sign Payer declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.

**Part 9b – Acceptance of Terms & Conditions**

- Sign and date the appropriate declarations - original signatures required.
<table>
<thead>
<tr>
<th><strong>Employment Permits Section</strong></th>
<th><strong>Contact Details</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>E-mail:</strong></td>
<td>employmentpermits@eir</td>
</tr>
<tr>
<td><strong>Call Centre</strong></td>
<td>053-1-417 5333</td>
</tr>
<tr>
<td><strong>Locally:</strong> 1890 591 616</td>
<td></td>
</tr>
<tr>
<td><strong>Fax:</strong></td>
<td>053-1-631 3290</td>
</tr>
<tr>
<td><strong>Address:</strong></td>
<td>Dáití House</td>
</tr>
<tr>
<td></td>
<td>65a Adelaide Road</td>
</tr>
<tr>
<td></td>
<td>Dublin 2, Ireland</td>
</tr>
</tbody>
</table>

**PLEASE NOTE:** The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instructional purposes only. It is not necessary to include these pages when submitting the completed application form.
Form J

Application form for renewal of Dependant/Partner/Spouse Employment Permit

Dependant/Partner/Spouse Employment Permit
RENEWAL Application

This form should be used by either the Employer or the Foreign National, who is the holder of the Employment Permit concerned, who wish to apply for:

- A renewal of an existing Dependant/Partner/Spouse Employment Permit for the same employer and employment.
- A renewal application for a Dependant/Partner/Spouse Employment Permit should be made within the period of 4 months ending on the date of expiry of the existing Dependant/Partner/Spouse Employment Permit.

This form should NOT be used where an Employer or a Foreign National wishes to apply for:

- a change in the type of Employment Permit held by the foreign national,
- a change in the type of employment currently specified on the existing Employment Permit, or
- an Employment Permit for a foreign national currently employed by a different employer on foot of an Employment Permit.

In these cases a new Employment Permit application is required and the New Employment Permit Application Form for the relevant permit type should be used.

Before completing this form, please read the relevant permit information which is available on the Department's website. Complete ALL parts of this form as required in BLOCK CAPITALS. The Employer, the Foreign National and the Agent (if applicable) must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT IF APPLICABLE.

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.
(This section MUST be completed for all applications)

Employer

Foreign National (Holder of Employment Permit)

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One
Registration Details of Employer

1. Employer Registered Number:

2. Company Name Registered Number
   (if applicable):

3. Business Name Registered Number
   (if applicable):

4. If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:

5. If the Employer is a Charity, please supply the Charity Number:

Obtained from the Revenue Commissioners
Obtained from the Companies Registration Office
Obtained from the Companies Registration Office
Obtained from the Registry of Friendly Societies
Obtained from the Revenue Commissioners
6. If the Employer is not a registered company, please indicate what type of entity it is:

- Sole Trader
- Partnership
- Other (please specify): BLOCK CAPITALS

7. Please state the full name of the Employer: BLOCK CAPITALS

8. Please state the nationality of the Employer: BLOCK CAPITALS

9. If the Employer is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?

- Yes
- No
- Not applicable
- If Yes, please specify: BLOCK CAPITALS

If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation).

10. Registered name of Company/Business: BLOCK CAPITALS

11. Trading name of business (if different): BLOCK CAPITALS


13. Company/Business Address:

- Address 1: BLOCK CAPITALS
- Address 2: BLOCK CAPITALS
- Town: BLOCK CAPITALS
- County: BLOCK CAPITALS
- Country: BLOCK CAPITALS

14. Telephone Number: 

15. Fax: 

16. Mobile Phone Number: 

17. E-mail: 

18. Website: 

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Employer: 

20. Number of non-EEA nationals currently employed by the Employer: 

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.

"You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Employer."
## Part Two
Details of Foreign National (Holder of Employment Permit)

<p>| | |</p>
<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Passport Number:</td>
<td></td>
</tr>
<tr>
<td>2. Expiry Date:</td>
<td>D O M M Y Y</td>
</tr>
<tr>
<td>3. Nationality:</td>
<td></td>
</tr>
<tr>
<td>4. First Name:</td>
<td></td>
</tr>
<tr>
<td>5. Middle Names(s):</td>
<td></td>
</tr>
<tr>
<td>6. Family Name:</td>
<td></td>
</tr>
<tr>
<td>7. Date of Birth:</td>
<td>D O M M Y Y</td>
</tr>
<tr>
<td>8. Male:</td>
<td></td>
</tr>
<tr>
<td>9. Female:</td>
<td></td>
</tr>
<tr>
<td>10. Telephone No.:</td>
<td></td>
</tr>
<tr>
<td>11. Mobile Phone No.:</td>
<td></td>
</tr>
<tr>
<td>13. Please provide the Foreign National’s PPB Number:</td>
<td></td>
</tr>
<tr>
<td>14. Please provide the number of the Employment Permit being renewed:</td>
<td></td>
</tr>
<tr>
<td>15. E-mail:</td>
<td></td>
</tr>
<tr>
<td>16. Immigration Details (Please enter the details exactly as they appear on your current GNIB card*)</td>
<td></td>
</tr>
</tbody>
</table>

*GNIB Pin No. |   |
| Dept. No. |   |

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of their current immigration stamps and visa.

If the proposed Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, s/he may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the proposed Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the proposed Foreign National confirms that s/he has considered the available options and believes that an employment permit is still required.

You must now attach the documents outlined in Requirement for Supporting Documentation under "(I) Foreign National (Holder of Employment Permit) Requirements."
## Part Three  
### Details of Employment

1. **Title of Job:**

   NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. **Regulatory Body:**

3. **Registration/Pin/Licence No.:**

   If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

   Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. **Place(s) at which the employment concerned is to be carried out:**

5. **Proposed Period of Employment Permit (maximum period of 3 years).**

   * If this is an application for an unlimited permit, please write "Unlimited" in this box. An unlimited Employment Permit may be applied for at the renewal stage if a foreign national has been in continuous employment with the same employer for five years or more. Please note that all Employment Permit renewal applications should be submitted to this Department at least 12 weeks before the expiry date of the existing Employment Permit.

6. **Gross Annual Remuneration**

   (Gross remuneration excludes overtime or premium payments)

7. **Gross Annual Salary:**

   *(if different from above)*

8. **Gross Weekly Salary:**

9. **Hourly Rate of Pay:**

10. **Deductions from Gross Weekly Salary:**

    * Please specify purpose of deductions:

11. **Health Insurance:**

    * Please specify name of Health Insurance Provider:

   * All amounts which make up the basic salary must appear as payments on the pay slips. If Health Insurance is being included in the Gross Annual Remuneration this must be verified by way of supporting documentation at renewal stage; such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.

   * Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.

12. **Number of hours of work per week:**

    * Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

13. **What are the main functions of this job:**
Part Three A  Details of Primary Permit Holder/ Researcher

1. Passport Number:  

2. Expiry Date:  D D M M Y Y  

3. Nationality:  BLOCK CAPITALS  

4. First Name:  BLOCK CAPITALS  

5. Middle Name(s):  BLOCK CAPITALS  

6. Family Name:  BLOCK CAPITALS  

7. Date of Birth:  D D M M Y Y  

8. Male:  

9. Female:  

Enter these details exactly as they appear on the Primary Permit Holder's or Researcher's passport.

10. Primary Permit Holder's/Researcher's Immigration details

Enter below details exactly as they appear on the Primary Permit Holder's/Researcher's GNIB card.

GNIB Pin No.  Dept. No.  

* If the Primary Permit Holder/Researcher is in the State but does not have a GNIB personal identification number then please supply a copy of their current immigration stamps and visa

11. Please enter the Hosting Agreement number for the Researcher (If applicable):  

You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (if applicable)
## Part Four

### Requirement for Payment

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a fee payable for this Employment Permit application?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If No, please indicate on what basis no fee is applicable?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Employer is the applicant and has charitable status with the Revenue Commissioners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependant/Partner/Spouse Employment Permit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unlimited, General, Reintegration or Sports and Cultural Employment Permit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If no fee is payable proceed to Part Five.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Details of Payment

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with DfIntram Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper-based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) – an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users, can continue to make payment by cheque, bank draft or postal order and must complete all details below.

### Contact Details of Payer

1. Please indicate who is making the payment:
   - Employer
   - Foreign National
   - Other

2. Title:
   - Mr
   - Mrs
   - Miss
   - Ms
   - Other (please state)

3. Name: [BLOCK CAPITALS]

4. Company (if applicable): [BLOCK CAPITALS]

5. Telephone Number: [ ]

6. Fax Number: [ ]

7. Mobile Phone Number: [ ]

8. E-mail: [ ]

### Payment Details

9. Method of Payment:
   - Electronic Funds Transfer
   - Cheque
   - Bank Draft
   - Postal Order

10. Cheque No.: [ ]

11. Payment enclosed / Amount of payment due: [ ]

Payment must be in the form of a Euro denominated cheque, bank draft, or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

### Payer's Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer's Signature: [ ]

(Original signature required)

Date: [DD MM YY]

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.
Part Five  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake to continue in employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by the Employer, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National: ________________________________
(Original signature required)

Name (in BLOCK CAPITALS): ________________________________

Date: ____________

Title: ________________________________

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Employer as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Employer

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will continue to be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
  - the Foreign National, as stated in Part 2 of the application form, will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Employer, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee about the need arise; and

- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Employer:
(Original signature required)

Name (In BLOCK CAPITALS):

Position Held:

Title:

Date:

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
**Authorisation of Agent**

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

**Agent Name**  
(In BLOCK CAPITALS): [Redacted]

**Title:** [Redacted]

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

**Signature of Agent**  
(Original signature required)

**Date:** [Redacted]

**Agent’s Address for Correspondence:**

**Address 1:** [Redacted]

**Address 2:** [Redacted]

**Town:** [Redacted]

**County:** [Redacted]

**Country:** [Redacted]

**E-mail address:** [Redacted]

**Telephone number:** [Redacted]

I, the Employer, permit the above named agent to act on my behalf in respect of this application.

**Signature of Employer**  
(Original signature required)

**Date:** [Redacted]

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

**Signature of Foreign National**  
(Original signature required)

**Date:** [Redacted]
### Requirements for Supporting Documentation

#### (A) Requirements for the Employer

If the Employer has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

**Business Permission**

If the Employer has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

**Additional documentation**

The Minister may request such other information as might materially assist in making a decision on an application.

#### (B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.
- Please supply your GNI B personal identification number which is shown on your GNI B card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and Visa.

**Please Note:** Original documents should not be submitted.

**Important Note concerning the passport expiry date**

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 3 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

#### (C) Application Requirements

Please provide the following documents in respect of the Primary Permit Holder (current or previous holder of a Green Card/Critical Skills Employment Permit) or the Researcher:

- Clear, legible copy (preferably in colour) of the personal details pages of the primary permit holder’s or researcher’s current passport, showing his or her picture, personal details and his or her signature.
- Please supply the primary permit holder’s or researcher’s GNI B personal identification number which is shown on their GNI B card. If not available please supply a clear, legible copy (preferably in colour) of their current immigration stamps and visa.
- In respect of a primary permit holder:
  - a letter from the primary permit holder’s employer, dated within the 3 month period prior to the application, confirming the primary permit holder’s employment with that employer and his or her job title, or
- In respect of a researcher:
  - a letter from the employer in respect of the research project researcher dated within the 3 month period prior to the application, confirming the research project researcher’s employment with that employer and his or her job title.

**Clarification on Remuneration Paid**

All applications for renewal of an employment permit must include the following documentation:

- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months
- Copies of PINs issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit
- Documentary evidence of payments in respect of health insurance, if applicable.

For renewal of an employment in a restaurant or a fast food outlet

If the application is in respect of such employment the following additional documentation is required:

- An up-to-date tax clearance certificate in respect of the Employer
(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment

In accordance with DoFinance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to Department of Jobs, Enterprise & Innovation.

(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 16(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for a Renewal Employment Permit should be made at least 12 weeks before the expiry of the existing permit.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Employer, the Foreign National and the Authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Lo-Call Number: 1890 252231

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(2), 22(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding 5,000 or imprisonment for a term not exceeding 12 months or both,

(b) on conviction on Indictment, to a fine not exceeding £50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

Attach 1 passport sized photograph, with Foreign National's name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Employer or the Foreign National (Holder of Employment Permit)).

<table>
<thead>
<tr>
<th>Part One – Details of Employer: Complete all questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer should include copies of:</td>
</tr>
<tr>
<td>• Completed P30/ROS Online Receipt dated within 3 months preceding the application.</td>
</tr>
<tr>
<td>• Evidence of Business Permission (if applicable).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Two – Details of Foreign National: Complete all questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please supply clear copies (preferably in colour) of the following:</td>
</tr>
<tr>
<td>• Passport pages showing photograph, personal details and expiry date</td>
</tr>
<tr>
<td>• Immigration stamps (if GNIIB personal identification number not available)</td>
</tr>
<tr>
<td>• Visa (if GNIIB personal identification number not available).</td>
</tr>
<tr>
<td>Original documents should not be submitted.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Three – Details of Employment: Complete all questions (unless otherwise specified)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please supply clear copies (preferably in colour) of the following in respect of the primary permit holder or researcher:</td>
</tr>
<tr>
<td>• Passport pages showing photograph, personal details and expiry date</td>
</tr>
<tr>
<td>• Immigration stamped (if GNIIB personal identification number not available).</td>
</tr>
<tr>
<td>• Visa (if GNIIB personal identification number not available).</td>
</tr>
<tr>
<td>• Relevant letters from their current employers.</td>
</tr>
<tr>
<td>Please provide the following:</td>
</tr>
<tr>
<td>• Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months</td>
</tr>
<tr>
<td>• Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit.</td>
</tr>
<tr>
<td>• Documentary evidence of payments in respect of Health Insurance, if applicable.</td>
</tr>
<tr>
<td>Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/INR number at Part 3, Question 3:</td>
</tr>
<tr>
<td>• A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.</td>
</tr>
<tr>
<td>Please supply the following in the case of the renewal of an employment in a restaurant or a fast food outlet:</td>
</tr>
<tr>
<td>• an up-to-date tax clearance certificate in respect of the Employer.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Four – Details of Payment: Complete all questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Include the appropriate fee if required (see (D) Schedule of Fees for further Information.</td>
</tr>
<tr>
<td>• Sign Payroll declaration - original signature required</td>
</tr>
<tr>
<td>• If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status</td>
</tr>
<tr>
<td>• If applicable, clear photocopies of the relevant pages of the EEA Spouses/Civil Partners’ current passport showing is or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Five - Acceptance of Terms &amp; Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sign and date the appropriate declarations - original signatures required.</td>
</tr>
</tbody>
</table>
PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form K

Application form for renewal of General Employment Permit

General Employment Permit
RENEWAL Application

This form should be used by either the Employer or the Foreign National who is the holder of the Employment Permit concerned, who wish to apply for:

- A renewal of an existing General Employment Permit for the same employer and employment.
- A renewed application for a General Employment Permit should be made within the period of 4 months ending on the date of expiry of the existing General Employment Permit.

This form should NOT be used where an Employer or a Foreign National wishes to apply for:

- a change in the type of Employment Permit held by the foreign national.
- a change in the type of employment currently specified on the existing Employment Permit.
- an Employment Permit for a foreign national currently employed by a different employer on foot of an Employment Permit.

In these cases a New Employment Permit application is required and the New Employment Permit Application Form for the relevant permit type should be used.

Before completing this form, please read the relevant permit information which is available on the Department’s website. Complete ALL parts of this form as required IN BLOCK CAPITALS. The Employer, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section MUST be completed for all applications)

Employer

Foreign National (Holder of Employment Permit)

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One

Registration Details of Employer

1. Employer Registered Number: 

Obtained from the Revenue Commissioners

2. Company Name Registered Number (if applicable):

Obtained from the Companies Registration Office

3. Business Name Registered Number (if applicable):

Obtained from the Companies Registration Office

4. If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:

Obtained from the Registry of Friendly Societies

5. If the Employer is a Charity, please supply the Charity Number:

Obtained from the Revenue Commissioners
If the Employer is not a Limited Company, please complete Questions 6, 7, 8 and 9.
If the Employer is a Limited Company, please proceed to Question 10.

6. If the Employer is not a registered company, please indicate what type of entity it is:
   - Sole Trader
   - Partnership
   - Other (please specify): BLOCK CAPITALS

7. Please state the full name of the Employer:

8. Please state the nationality of the Employer:

9. If the Employer is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?
   - Yes
   - No
   - Not applicable
   If Yes, please specify: BLOCK CAPITALS
   If yes, you must endorse copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be refused (see Requirements for Supporting Documentation)

10. Registered name of Company/Business:

11. Trading name of business (if different):

12. Nature of business:

13. Company/Business Address:
   - Address 1:
   - Address 2:
   - Town:
   - County:
   - Country:

14. Telephone Number:
15. Fax:

16. Mobile Phone Number:

17. E-mail:

18. Website:

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Employer:

20. Number of non-EEA nationals currently employed by the Employer:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.
### Part Two: Details of Foreign National (Holder of Employment Permit)

1. **Passport Number:**
   - 

2. **Expiry Date:**
   - 

3. **Nationality:**
   - BLOCK CAPITALS

4. **First Name:**
   - BLOCK CAPITALS

5. **Middle Name(s):**
   - BLOCK CAPITALS

6. **Family Name:**
   - BLOCK CAPITALS

7. **Date of Birth:**
   - 

8. **Male:**
   - 

9. **Female:**
   - 

10. **Telephone No.:**
    - 

11. **Mobile Phone No.:**
    - 

12. **Current Address:**
    - BLOCK CAPITALS
    - BLOCK CAPITALS
    - BLOCK CAPITALS
    - BLOCK CAPITALS

13. **Please provide the Foreign National's PPS Number:**
    - 

14. **Please provide the number of the Employment Permit being renewed:**
    - 

15. **E-mail:**
    - 

16. **Immigration Details (Please enter the details exactly as they appear on your current GNIB card)*
    - **GNIB Pin No.:**
    - **Dept. No.:**

*Note: If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of their current immigration stamps and visa.*

If the proposed Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, s/he may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the proposed Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the proposed Foreign National confirms that s/he has considered the available options and believes that an employment permit is still required.

You must now attach the documents outlined in Requirement for Supporting Documentation under "(B) Foreign National (Holder of Employment Permit) Requirements."
### Part Three  Details of Employment

<table>
<thead>
<tr>
<th>1. Title of Job:</th>
<th></th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

**NOTE:** Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

<table>
<thead>
<tr>
<th>2. Regulatory Body:</th>
<th></th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Registration/PIN/</td>
<td>Licence No.:</td>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>

If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

<table>
<thead>
<tr>
<th>4. Place(s) at which the employment concerned is to be carried out:</th>
<th></th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>5. Proposed Period of Employment Permit (maximum period of 3 years)*</th>
<th></th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

* If this is an application for an unlimited permit, please write "Unlimited" in this box. An unlimited Employment Permit may be applied for at the renewal stage if a foreign national has been in continuous employment with the same employer for five years or more. Please note that all Employment Permit renewal applications should be submitted to this Department at least 12 weeks before the expiry date of the existing Employment Permit.

<table>
<thead>
<tr>
<th>6. Gross Annual Remuneration*</th>
<th>€</th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

(Gross remuneration excludes overtime or premium payments)

<table>
<thead>
<tr>
<th>7. Gross Annual Salary:</th>
<th>€</th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

(If different from above)

<table>
<thead>
<tr>
<th>8. Gross Weekly Salary:</th>
<th>€</th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

9. Hourly Rate of Pay: €

<table>
<thead>
<tr>
<th>10. Deductions from Gross Weekly Salary:</th>
<th>€</th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

Please specify purpose of deductions:

<table>
<thead>
<tr>
<th>11. Health Insurance*:</th>
<th>€</th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

Please specify name of Health Insurance Provider:

* All amounts which make up the basic salary must appear as payments on the payslips. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation at renewal stage; such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.

* Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.

<table>
<thead>
<tr>
<th>12. Number of hours of work per week*:</th>
<th></th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

* Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

<table>
<thead>
<tr>
<th>13. What are the main functions of this job:</th>
<th></th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
</table>

You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (If applicable)
### Part Four: Requirement for Payment

<table>
<thead>
<tr>
<th>Requirement for Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a fee payable for this Employment Permit application? Yes [ ] No [ ]</td>
</tr>
<tr>
<td>If No, please indicate on what basis no fee is applicable? Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national [ ] Unlimited General, Reactivation or Sports and Cultural Employment Permit [ ]</td>
</tr>
<tr>
<td>The Employer is the applicant and has charitable status with the Revenue Commissioners [ ]</td>
</tr>
<tr>
<td>Dependant/Partner/Spouse Employment Permit [ ]</td>
</tr>
</tbody>
</table>

### Detailey

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with Offinance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) - an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payer's Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

#### Contact Details of Payer

1. Please indicate who is making the payment: Employer [ ] Foreign National [ ] Other [ ]

2. Title: Mr [ ] Mrs [ ] Miss [ ] Ms [ ] Other (please state) [ ]

3. Name: BLOCK CAPITALS

4. Company (If applicable): BLOCK CAPITALS

5. Telephone Number: 6. Fax Number: 

7. Mobile Phone Number: 

8. E-mail: 

#### Payment Details

9. Method of Payment: Electronic Funds Transfer [ ] Cheque [ ] Bank Draft [ ] Postal Order [ ]

10. Cheque No. 

11. Payment enclosed / Amount of payment due: €

*Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.*

#### Payer's Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer's Signature: (Original signature required) Date: D M Y

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.
Part Five  
Acceptance of Terms & Conditions  

Declaration of Foreign National  
I, the undersigned, agree to undertake to continue in employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);

- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and

- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by the Employer, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 28 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

<table>
<thead>
<tr>
<th>Signature of Foreign National:</th>
<th>Title: [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Original signature required)</td>
<td></td>
</tr>
</tbody>
</table>

Name (In BLOCK CAPITALS): [ ]  
Date: [DDMMYY]  

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.  

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).  

Declaration of Employer

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will continue to be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
  - the Foreign National, as stated in Part 2 of the application form, will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Employer, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any change, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.
- In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and
- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Employer:
(Original signature required)

Name (in BLOCK CAPITALS):

Position Held:

Title:

Date:

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (If applicable).
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nominalisation of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

Agent Name
(In BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

Signature of Agent:
(Original signature required) Date:

Agent's Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Employer:
(Original signature required) Date:

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required) Date:
Requirements for Supporting Documentation

(A) Requirements for the Employer

If the Employer has not been granted an Employment Permit within the 12 months proceeding the application, they MUST submit clear copies of the following documentation:

- Copy of P390 returned to the Revenue Commissioners within the 3 months proceeding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the Employer has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National's passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 to the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.
- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 3 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

Clarification on Remuneration Paid

All applications for renewal of an employment permit must include the following documentation:

- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months.
- Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit.
- Documentary evidence of payments in respect of Health Insurance, if applicable.

For renewal of an employment in a restaurant or a fast food outlet:

If the application is in respect of such employment the following additional documentation is required:

- An up-to-date tax clearance certificate in respect of the Employer.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employments Permits Act 2008, as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by postal order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of Payment

In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.
(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on the Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 18(1)(d) of the Employment Permits Act 2009, as amended.

C. It is recommended that an application for a Renewal Employment Permit should be made at least 12 weeks before the expiry of the existing permit.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for correction.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with Section 24 of the Employment Permits Act 2008, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2008, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Employer, the Foreign National and the Authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Lo-Call Number: 1890 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (c) of the Employment Permits Act 2008, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 26 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20 information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both, or
(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorized agent (if applicable).

Attach 1 passport sized photograph, with Foreign National's name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Employer or the Foreign National (Holder of Employment Permit)).

Part One - Details of Employer: Complete all questions

Employer should include copies of:
- Completed P30/ROS Online Receipt dated within 3 months preceding the application.
- Evidence of Business Permission (if applicable).

Part Two - Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date.
- Immigration stamp(s) (if GNIB personal identification number not available).
- Visa (if GNIB personal identification number not available).

Original documents should not be submitted.

Part Three - Details of Employment: Complete all questions (unless otherwise specified)

Please provide the following:

- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months.
- Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit.
- Documentary evidence of payments in respect of Health Insurance, if applicable.

Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN number at Part 3, Question 3:

- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.

Please supply the following in the case of the renewal of an employment in a restaurant or a fast food outlet:

- An up-to-date Food Safety certificate in respect of the Employer.

Part Four - Details of Payment: Complete all questions

- Include the appropriate fee if required (see (D) Schedule of Fees for further information).
- Sign Payer declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners' current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national.

Part Five - Acceptance of Terms & Conditions

- Sign and date the appropriate declarations - original signatures required.

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@dpi.ie
Call Centre: 353-1-417 5333
LoCall: 1890 201 816 (from within Ireland only)
Fax: 353-1-431 9208
Address: Davitt House
65a Adelaide Road
Dublin 2
Ireland

Employment Permits Section Web pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation's website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form L

Application form for renewal of Intra-Company Transfer Employment Permit

Intra-Company Transfer Employment Permit
RENEWAL Application

This form should be used by a Connected Person in Ireland who wishes to apply for:

- A renewal of an existing Intra-Company Transfer Employment Permit to provide for the Foreign National, the holder of the existing Intra-Company Transfer Employment, to continue to
  - carry out duties for the Connected Person in the State in the same employment in senior management or employments requiring specialist knowledge, qualifications or experience essential to the Connected Person's service, research equipment, techniques or management.

- A renewal application for an Intra-Company Transfer Employment Permit should be made within the period of 4 months ending on the date of expiry of the existing Intra-Company Transfer Employment Permit.

Before completing this form, please read, and follow, the relevant permit information which is available on the Department's website. Complete ALL parts of this form as required. In BLOCK CAPITALS. The Connected Person, the Foreign Employer, the Foreign national and the Agent (if applicable) must sign the declarations at the end of the form. Incomplete forms will be returned to the applicant or the authorised agent (if applicable).

Who is applying for the permit (i.e. Who is the applicant)?
In accordance with the Employment Permits Act 2006, as amended, the Connected Person (Irish Entity) must be the applicant in respect of all Intra-Company Transfer Employment Permit applications.

<table>
<thead>
<tr>
<th>Part One</th>
<th>Registration Details of Connected Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Employer Registered Number:</td>
<td>Obtained from the Revenue Commissioners</td>
</tr>
<tr>
<td>2. Company Name Registered Number:</td>
<td>Obtained from the Companies Registration Office</td>
</tr>
<tr>
<td>3. Business Name Registered Number (if applicable):</td>
<td>Obtained from the Companies Registration Office</td>
</tr>
<tr>
<td>4. If the Connected Person is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:</td>
<td>Obtained from the Registry of Friendly Societies</td>
</tr>
<tr>
<td>5. If the Connected Person is a Charity, please supply their Charity Number:</td>
<td>Obtained from the Revenue Commissioners</td>
</tr>
<tr>
<td>6. Registered name of Company/Business:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>7. Trading name of business (if different):</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>8. Nature of business:</td>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>
Part One A  Details of the Foreign Employer

1. Name of Foreign Employer:
   
2. Address of Foreign Employer:
   
Part Two  Details of Foreign National (Holder of Employment Permit)

1. Passport Number:
   
2. Expiry Date:   D D M M Y Y
   
3. Nationality:
   
4. First Name:
   
5. Middle Name(s):
   
6. Family Name:
   
7. Date of Birth:  D D M M Y Y

Enter these details exactly as they appear on the Foreign National’s passport.

8. Male:  
9. Female:  

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.

You must now attach the documents outlined in Requirement for Supporting Documentation under “(A) Requirements for Connected Person.”
10. Current Address (foreign address required if residing outside the State):

Address 1:  
Address 2:  
Town:  
County:  
Country:  

11. Telephone No.:   12. Mobile Phone No.:   

13. Please provide the Foreign National's PPIB Number:   

14. Please provide the number of the Employment Permit being renewed:   

15. E-mail address:   

16. Immigration Details (Please enter the details exactly as they appear on your current GNI card*)

GNIB Pin No.   Dept. No.   

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.

You must now attach the documents outlined in Requirement for Supporting Documentation under "(B) Requirements for Foreign nationals."
### Part Three  Details of Requirement for Renewal of Intra-Company Transfer

1. Please outline, in detail, the reason for the renewal of the Intra-Company transfer. This should include a description of the functions that will continue to be undertaken by the Foreign National and why a continuation of the transfer is required. Please continue on a separate sheet if required and append it to the application form.
Part Four

Details of Employment

1. Proposed Position of Foreign National with Connected Person:

NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations

2. Regulatory Body:

3. Registration/PIN:

If the application is in respect of Registered Doctors or Nurses listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. Duration of Transfer (definite start and end dates up to a maximum of 3 years):

5. Place(s) at which the duties/training concerned is to be carried out:

6. Calculation of Remuneration:

(a) Current Basic Annual Salary

(b) Additional payment to bring Basic Annual Salary up to or over the Irish National Minimum Wage or the rate of pay fixed under or pursuant to any other enactment (if applicable)

(c) Deductions from either (a) or (b) above (if applicable)

(d) Total Basic Annual Salary less deductions at (c) (if applicable)

Annual Salary (Foreign Currency) Hourly Rate (Foreign Currency) Annual Salary (in euro) Hourly Rate (in euro) Exchange Rate Used

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
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Board and Accommodation Payments in respect of (if applicable)

Monetary Value of (if applicable)

Payments in respect of Health Insurance (if applicable)

Total Remuneration

All amounts which make up the basic salary, including any additional payments, must appear as payments on the payslips. If payments or the monetary value of Board and Accommodation (or either of them) or Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (NERA) inspection and at renewal stage.

7. Number of hours of work per week:

8. What are the main functions of this job:

You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements."
**Part Five**  

**Requirement for Payment**

<table>
<thead>
<tr>
<th>Is a fee payable for this Employment Permit application?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

If No, please indicate on what basis no fee is applicable?

- The Connected Person has charitable status with the Revenue Commissioners
- Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national

If no fee is payable proceed to Part Six.

**Details of Payment**

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) – an e-mail address to request payment must be provided at Question 6. They should also complete Payment Details (Question 9 and 11) and Payer’s Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

**Contact Details of Payer**

1. Please indicate who is making the payment:
   - Connected Person
   - Other (please state)  

2. Title:
   - Mr
   - Mrs
   - Miss
   - Ms

3. Name:  

4. Company (if applicable):  

5. Telephone Number:  

6. Fax Number:  

7. Mobile Phone Number:  

8. E-mail:  

**Payment Details**

9. Method of Payment:
   - Electronic Funds Transfer
   - Cheque
   - Bank Draft
   - Postal Order

10. Cheque No.

11. Payment enclosed / Amount of payment due: €

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

**Payer’s Declaration**

1. I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

   - Payer’s Signature:
   - Date:  

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due by any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

---

**Page 6**  

**IRICTEP002/15**
Part Six  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to continue to carry out duties with the Connected Person on the basis of this application. I hereby solemnly declare that:

- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- I will continue to be employed, salaried and paid under an employment contract outside the State by the Foreign Employer stated on this application form; and
- I will be fully tax compliant in the State.

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, in an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National:

(Original signature required)

Name (in BLOCK CAPITALS): [REDACTED]

Title: [REDACTED]

Date: 01/01/2015

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Connected Person as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Connected Person

I, the Connected Person in the State, confirm that the Foreign National will continue to perform duties in the State that arise out of the Intra-Company Transfer arrangement between the Foreign Employer and me and I understand that the Foreign National will be returning to his/her employment outside the State with the Foreign Employer after the completion of the duties with me.

I hereby solemnly declare that I have taken reasonable steps to satisfy myself that:

- the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- the Foreign National named in this application form will continue to be employed, salaried and paid under an employment contract outside the State by the Foreign Employer as stated in Part 1 of this application form; and
- in cases where I am assuming responsibility for the provision of board and accommodation (or either of them) and health insurance in respect of the Foreign National that:
  - appropriate board and accommodation (or either of them) will be provided for the Foreign National while he or she is in the State to carry out duties for, or participate in a training programme provided by me,
  - appropriate Health insurance will be provided in respect of the Foreign National should he or she require medical treatment for illness or injury during the period for which he or she will be in the State pursuant to the employment permit; and
  - where a person outside the State provides insurance for medical treatment in respect of the Foreign National, the health insurance has the same, or similar, effect as the health insurance provided by a health insurer entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994.

I understand and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I shall not seek to recover from the Foreign national any charge, fee or expense arising out of the application for the Employment Permit or any matter relating to or concerning such an application or the grant of the Employment Permit.

- In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 30, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is false or misleading is guilty of an offence.

Signature of Connected Person:

(Original signature required)

Name (in BLOCK CAPITALS):

Title:

Position Held:

Date:

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
Declaration of Foreign Employer

I, the Foreign Employer, give an undertaking that the Foreign National will be fully tax compliant for the duration of the Foreign National’s stay in the State. I confirm that the Foreign National will be returning to my overseas place of employment after the completion of the duties with the Connected Person.

I hereby solemnly declare that:

- the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- where the foreign salary currently paid by me does not meet the Irish National Minimum Wage hourly rate of pay or an hourly rate of pay fixed under or pursuant to any other enactment that applies to the employment concerned, I undertake to make an additional payment to achieve the National Minimum Wage hourly rate or the hourly rate fixed under or pursuant to any other enactment and that this amount will appear on the Foreign National’s payslip for the duration of their assignment in the State;
- in cases where I am assuming responsibility for the provision of board and accommodation (or either of them) and health insurance in respect of the Foreign National that:
  - appropriate board and accommodation (or either of them) will be provided for the Foreign National while he or she is in the State to carry out duties for, or participate in a training programme provided by me;
  - appropriate Health insurance will be provided in respect of the Foreign National should he or she require medical treatment for illness or injury during the period for which he or she will be in the State pursuant to the employment permit; and
  - where a person outside the State provides insurance for medical treatment in respect of the Foreign National, the health insurance has the same, or similar, effect as the health insurance provided by a health insurer entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994;
- the Foreign National named in this application form will continue to be employed, salaried and paid under an employment contract outside the State by me, the Foreign Employer as stated in Part 1 of this application form.

I understand and accept that:

- in accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of the employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit, or
  - any amount previously paid to the holder in respect of travelling expenses insured by the holder in connection with taking up the employment in the State in accordance with Section 26 of the Employment Permits Act 2006, as amended;
- a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence,
- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Foreign Employer: [Signature]

(Original signature required)

Name (in BLOCK CAPITALS): [BLOCK CAPITALS]

Title: [Title]

Position Held: [BLOCK CAPITALS]

Date: [DOB: D M Y]

Page 9
**Authorisation of Agent**

*If no agent is representing the applicant then this section to be left blank*

If you (the Connected Person) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. Agents will be copied any correspondence regarding this application.

<table>
<thead>
<tr>
<th>Agent Name (in BLOCK CAPITALS):</th>
<th>Title:</th>
</tr>
</thead>
</table>

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

<table>
<thead>
<tr>
<th>Signature of Agent: (Original signature required)</th>
<th>Date:</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Agent's Address for Correspondence:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address 1:</td>
</tr>
<tr>
<td>Address 2:</td>
</tr>
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<td>Town:</td>
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<td>County:</td>
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<td>Country:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail address:</th>
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<table>
<thead>
<tr>
<th>Telephone number:</th>
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</thead>
</table>

I, the Connected Person, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Connected Person: (Original signature required)</th>
<th>Date:</th>
</tr>
</thead>
</table>

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Foreign National: (Original signature required)</th>
<th>Date:</th>
</tr>
</thead>
</table>

I, the Foreign Employer, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Foreign Employer: (Original signature required)</th>
<th>Date:</th>
</tr>
</thead>
</table>
## Requirements for Supporting Documentation

### (A) Requirements for Connected Person

All Connected Person who have not previously applied for and been issued with an Intra-Company Transfer Employment Permit within the 12 months preceding the application MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

All Connected Person who have not previously applied for and been issued with an Intra-Company Transfer Employment Permit within the past two years are required to submit the following documentation:

- Evidence of the connection between the Connected Person and the Foreign Employer.

Additional documentation:

The Minister may request such other information as might materially assist in making a decision on an application.

### (B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.

- In the case of health professionals listed in Part B of Schedule 2 in the Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.

- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamp and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date:

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 3 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

### (C) Application Requirements

Clarification on Remuneration Paid

All applications for renewal of an employment permit must include the following documentation:

- Copies of 3 recent pay slips issued to the holder of the Employment Permit dated within the last 4 months which must comply with the requirements of the Employment Permit Act 2005, as amended.
- Copies of P90s or P21s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit. If P90s are not available then copies of P21s are required.
- Documentary evidence of payments in respect of Board and Accommodation and Health Insurance, if applicable.

For renewal of an employment as an executive chef, head chef, sous chef or specialist chef specialising in a non-EEA cuisine in an establishment other than a fast food outlet, if the application is in respect of such employment the following additional documentation is required:

- An up-to-date tax clearance certificate in respect of the Employer.

### (D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds:

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases empanelment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment:

In accordance with DfE Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete and it will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned.

Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.
(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 15(2)(d) of the Employment Permits Act 2006, as amended.

C. The Foreign National remains an employee of the Foreign Employer for the duration of the transfer.

D. The Foreign National only performs the duties in respect of which the Employment Permit is issued.

E. It is recommended that an application for a renewal Employment Permit should be made at least 12 weeks before the expiry of the existing Employment Permit.

F. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

G. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

H. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with the provisions of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, and Orders made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection
The Employment Permits Section may undertake verification of all data submitted on this application form. The Connected Person, the Foreign Employer, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Lo-Call Number 1890 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 24 or 25, information that is false or misleading for a fraudulent or ulterior reason knowing that it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(2), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both;

(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: Within effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer are made publicly available on the Department’s website.
### (G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorized agent if applicable.

**Attach:** 1 passport sized photograph, with Foreign National's name printed on the back.

### Part One – Details of the Connected Person, Details of the Foreign Employer and Details of the Connection between the Connected Person and the Foreign Employer: Complete all questions

- Completed P30ROS Online Receipt dated within 3 months preceding the application, if applicable.
- Evidence of Connection between Connected Person and Foreign Employer (if applicable).

### Part Two – Details of Foreign National: Complete all questions

- Please supply clear copies (preferably in colour) of the following:
  - Passport pages showing photograph, personal details and expiry date
  - Immigration Stamps (if GNIB personal identification number not available)
  - Visa (if GNIB personal identification number not available)

Original documents should **not** be submitted.

### Part Three – Details of Intra-Company Transfer: Complete all questions

- Please complete in relation to the reason for the renewal of the Intra-Company Transfer.

### Part Four – Details of Employment: Complete all questions (unless otherwise specified)

- Please supply copies of the following in the case of health professionals, including registered doctors and registered nurses who have not provided their Registration/PRIN number at Part 4, Questions 2 and 3:
  - A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations
  - A copy of the Health Act 2007 and the Industrial Relations Act.

- Please supply the following in the case of a renewal of an employment in a restaurant or a fast food outlet:
  - an up-to-date tax clearance certificate in respect of the person who has made the offer of employment.

- Please supply copies of the following:
  - Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months which must comply with the requirements of the Employment Permits Act 2006, as amended
  - Copies of PINs issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit. If PINs are not available then copies of P21s are required
  - Documentary evidence of payments in respect of Board and Accommodation and Health Insurance, if applicable.

### Part Five – Details of Payment: Complete all questions

- Include the appropriate fee (see (D) Schedule of Fees for further information
- Sign Payee declaration - original signature required
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners' current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national

### Part Six - Acceptance of Terms & Conditions

- Sign and date the appropriate declarations - original signatures required.
EMployment permits section

Contact Details

E-mail: employmentpermits@e.se

Call Centre: 203-1-417 3333
Loc. Call: 1890 201 916
(from within Ireland only)

Fax: 353-1-831 3288

Address: Davit House
55A Adelaide Road
Dublin 2
Ireland

Employment permits section web pages

Information and application forms may be downloaded from the Employment permits section web pages on the Department of Jobs, Enterprise and Innovation’s website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist: parts A, B, C, D, E, F, and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form M

Application form for renewal of Contract for Services Employment Permit

An Roinn Post, Fiontar agus Nualachónta
Department of Jobs, Enterprise and Innovation

RCFSEP002/15

Contract for Services Employment Permit
RENEWAL Application

This form should be used by Foreign Contractors who wish to apply for:

- A renewal of an existing Contract for Services Employment Permit to provide for the continued employment in the State of a Foreign National, the holder of the existing Contract for Services Employment Permit, to
  - perform duties in the State for an Irish entity (Relevant Person) as part of the contract service agreement.
- A renewal application for a Contract for Services Employment Permit should be made within the period of 4 months ending on the date of expiry of the existing Contract for Services Employment Permit.

Before completing this form, please read the relevant permit information which is available on the Department’s website. Complete ALL parts of this form as required in BLOCK CAPITALS. The Contractor, the Relevant Person, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE CONTRACTOR OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?
In accordance with the Employment Permits Act 2008, as amended, the Contractor (foreign employer) must be the applicant in respect of all Contract for Services Employment Permit applications.

Part One Registration Details of Contractor

<table>
<thead>
<tr>
<th>1. Employer Registered Number</th>
<th>Retrieved from the Revenue Commissioners</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Company Name Registered Number (if applicable)</td>
<td>Retrieved from the Companies Registration Office</td>
</tr>
<tr>
<td>3. Business Name Registered Number (if applicable)</td>
<td>Retrieved from the Companies Registration Office</td>
</tr>
<tr>
<td>4. If the Contractor is an Industrial and Provident Society, Friendly Society or a Trade Union, please supply their Registration Number:</td>
<td>Retrieved from the Registry of Friendly Societies</td>
</tr>
<tr>
<td>6. Registered name of Company/Business:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>8. Trading name of business (if different):</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>7. Nature of business:</td>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>
8. Company/Business Address (outside the State):

9. Telephone Number:

10. Fax Number:

11. Mobile Phone Number:

12. E-mail address:

13. Website:

14. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Contractor:

16. Number of non EEA nationals currently employed by the Contractor:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Contractor."

### Part One A
**Details of Relevant Person**

1. Name of Relevant Person (Irish Entity):

2. Address of Relevant Person (Irish Entity):
   (Primary address/location at which the employment concerned, in respect of the Contract for Services, is to be carried out)

3. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Relevant Person:

4. Number of non EEA nationals currently employed by the Relevant Person:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Contractor."

### Part Two
**Details of Foreign National (Holder of Employment Permit)**

1. Passport Number:

2. Expiry Date:

3. Nationality:

4. First Name:

5. Middle Name(s):

6. Family Name:

7. Date of Birth:

8. Male: [ ]

9. Female: [ ]

Enter these details exactly as they appear on the Foreign National’s passport.
10. Current Address (foreign address required if residing outside the State):

<table>
<thead>
<tr>
<th>Address 1:</th>
<th>BLOCK CAPITALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address 2:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>Town:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>County:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>Country:</td>
<td>BLOCK CAPITALS</td>
</tr>
</tbody>
</table>

11. Telephone No.: ______________  12. Mobile Phone No.: ______________

13. Please provide the Foreign National’s PPS Number: ______________

14. Please provide the number of the Employment Permit being renewed: ______________

15. E-mail address: ______________

16. Immigration Details (Please enter the details exactly as they appear on your current GNIB card):

<table>
<thead>
<tr>
<th>GNIB Pin No.</th>
<th>Dept. No.</th>
</tr>
</thead>
</table>

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of the current immigration stamps and visa.

You must now attach the documents outlined in Requirement for Supporting Documentation under “(b) Requirements for Foreign National.”
Part Three  Details of Requirement for Renewal of Contract for Services Employment Permit

1. Please outline, in detail below the reasons for the renewal of the Contract for Services Employment Permit. This should include a description of the Contract, the reasons for renewal and whether the contract with the Relevant Person (Irish Entity) is still in date. Please continue on a separate sheet if required and append it to the application form.

Documentary evidence may be requested.
Part Four  Details of Employment

1. Title of Job:  [Box to be filled]

NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. Regulatory Body:  [Box to be filled]

3. Registration/Pin/Licence No.:  [Box to be filled]

If the application is in respect of Registered Doctors or Nurses listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. Place(s) at which the employment concerned is to be carried out:  [Box to be filled]

5. Proposed Period of Employment

   Permit (maximum period of 3 years):  [Box to be filled]

6. Proposed Start Date:

   [Box to be filled]

   * We recommend all Employment Permit applications be submitted to the Department at least 12 weeks before the proposed start date of employment. It should be noted that Contract for Services Employment Permits can only be issued for a maximum period of 5 years.

7. Calculation of Remuneration:

   * Basic Salary. Payments in respect of Board and Accommodation (or its monetary value) and Health Insurance can be included. If the current basic hourly rate of pay is below the Irish National Minimum Wage hourly rate or an hourly rate of pay fixed slider or pursuant to any other enactment, the additional payment to bring it up to or over the applicable hourly level should be shown separately below. The amount reasonable for this purpose must be an amount that is deemed allowable under Schedule One of the Minimum Wage Act, 2000.

<table>
<thead>
<tr>
<th>Annual Salary (Foreign Currency)</th>
<th>Hourly Rate (Foreign Currency)</th>
<th>Annual Salary (in euro)</th>
<th>Hourly Rate (in euro)</th>
<th>Exchange Rate Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Current Basic Annual Salary</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>(b) Additional payment to bring Basic Annual Salary up to or over the Irish National Minimum Wage or the rate fixed under or pursuant to any other enactment (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>(c) Deductions from either (a) or (b) above (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>(d) Total Basic Annual Salary less deductions at (c) (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Board and Accommodation Payments in respect of (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Monetary Value of (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Payments in respect of Health Insurance (if applicable)</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
<tr>
<td>Total Remuneration</td>
<td>€</td>
<td>€</td>
<td>€</td>
<td>€</td>
</tr>
</tbody>
</table>

All amounts which make up the basic salary, including any additional payments, must appear as payments on the payslip. If payments or the monetary value of Board and Accommodation (or either of them) or Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation in the event of a National Employment Rights Authority (IERA) inspection and at renewal stage.

8. Number of hours of work per week:  [Box to be filled]

   * Please note that for the purposes of Employment Permit applications, the standard working week is 39 hours per week.

9. What are the main functions of this job:  [Box to be filled]

See Requirement for Supporting Documentation "(C) Application Requirements"
Part Five

Requirement for Payment

Is a fee payable for this Employment Permit application?  
Yes [ ]  No [ ]

If No, please indicate on what basis no fee is applicable:

Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national [ ]

If no fee is payable proceed to Part Six.

Details of Payment

Important Note for Business Users - Payment by Electronic Funds Transfer

In accordance with DFine Circular 1/2013, from 19 September 2014 (i-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 5, 6, 7, and 8) - an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payer's Declaration below and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

Contact Details of Payer

1. Please indicate who is making the payment:

Contractor [ ]  Other [ ]

2. Title:  

Mr [ ]  Mrs [ ]  Miss [ ]  Ms [ ]  Other (please state) [ ]

3. Name:


4. Company (if applicable):


5. Telephone Number:


6. Mobile Phone Number:


7. E-mail:


Payment Details

9. Method of Payment:  

Electronic Funds Transfer [ ]  Cheque [ ]  Bank Draft [ ]  Postal Order [ ]

10. Cheque No.


11. Payment enclosed / Amount of payment due:


Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

Payer's Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid.)

Payer's Signature:  


(Original signature required)  

Date:  

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.
Part Six  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to continue or perform the duties with the relevant person on the basis of this application. I hereby solemnly declare that:

- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- I will continue to be employed, salaried and paid under an employment contract outside the State by the Contractor stated on this application form; and
- I will be fully tax compliant in the State.

Furthermore, I understand and accept that in accordance with Section 26 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National:

(Original signature required)

Name (in BLOCK CAPITALS):

Date:

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Contractor as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).

Declaration of Relevant Person

I, the Relevant Person in Ireland, confirm that the Foreign National will continue to be performing duties in the State that arise out of the contract service agreement between the Contractor and me and I understand that the Foreign National will be returning to his/her employment outside the State with the Contractor after the completion of the duties which are part of the contract service agreement.

I understand and accept that:

- In accordance with Section 26 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.
- Neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Relevant Person:

(Original signature required)

Name (in BLOCK CAPITALS):

Date:
Declaration of Contractor

I, the Contractor, give an undertaking that the Foreign National will be fully tax compliant for the duration of the Foreign National’s stay in Ireland. I confirm that the Foreign National will be returning to my overseas place of employment after the completion of the duties as part of the contract service agreement.

I hereby solemnly declare that:

- the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 4 of the application form (if applicable);
- where the foreign salary currently paid by me does not meet the Irish National Minimum Wage hourly rate of pay or an hourly rate of pay fixed under or pursuant to any other enactment that applies to the employment concerned, I undertake to make an additional payment to achieve the National Minimum Wage hourly rate or the hourly rate fixed under or pursuant to any other enactment and that this amount will appear on the Foreign National’s payslip for the duration of their assignment in the State;
- appropriate board and accommodation (or either of them) will be provided for the Foreign National while he or she is in the State to carry out the duties as part of the contract service agreement;
- appropriate Health Insurance will be provided in respect of the Foreign National should he or she require medical treatment for illness or injury during the period for which he or she will be in the State pursuant to the employment permit; and
- where the insurance for medical treatment in respect of the Foreign National is provided by a health insurance provider outside the State, the health insurance has the same, or similar, effect as the health insurance provided by a health insurer entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act 1994;
- the Foreign National named in this application form will continue to be employed, salaried and paid under an employment contract outside the State by me, the Contractor, as stated in Part 1 of this application form.

I understand and accept that:

- in accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of the employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  o the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  o any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State in accordance with Section 25 of the Employment Permits Act 2006, as amended;
- a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence;
- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Contractor: _____________________________
(Original signature required)

Name (in BLOCK CAPITALS): _____________________________

Position Held: _____________________________

Title: _____________________________

Date: DD MMM YY

Certified Copy of Employment Permit

The certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your permit to be posted to your current address. [ ]

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable). [ ]
Authorization of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the Contractor) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. Agents will be copied any correspondence regarding this application.

Agent Name
(in BLOCK CAPITALS):

TITLE:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Agent:
(Original signature required)

Date: D D M Y

Agent's Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Contractor, permit the above named agent to act on my behalf in respect of this application.

Signature of Contractor:
(Original signature required)

Date: D D M Y

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date: D D M Y

I, the Relevant Person, assent to the above named agent acting on behalf of the Contractor in respect of this application.

Signature of Relevant Person:
(Original signature required)

Date: D D M Y
Requirements for Supporting Documentation

(A) Requirements for Contractor

All Contractors who have not been granted an Employment Permit within the 12 months preceding the application are required to submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Additional documentation
The Minister may require such other information as might reasonably assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.
- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current Immigration stamps and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date
In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 3 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

Clarification on Remuneration Paid
All applications for renewal of an employment permit must include the following documentation:

- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months which must comply with the requirements of the Employment Permits Act 2008, as amended.
- Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit. If P60s are not available then copies of P21s are required.
- Documentary evidence of payments in respect of Board and Accommodation and Health Insurance, if applicable.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 22(2) of the Employment Permits Act 2002, as amended. The current fees applicable are available on the Department’s website.

Refunds
90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by postpayable order. If a refund of fee is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of Payment
In accordance with D/Finance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.
(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 18(1)(d) of the Employment Permits Act 2006, as amended.

C. The Foreign National remains an employee of the Foreign Employer for the period of his/her employment in the State.

D. The Foreign National only performs the duties that arise out of the contract service agreement and in respect of which the Employment Permit is issued.

E. It is recommended that an application for an Employment Permit should be made at least 12 weeks before the expiry of the existing employment permit.

F. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

G. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

H. In line with section 21 of the Employment Permits Act 2006, as amended, should the employer that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permit Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1993, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on the application form. The Contractor, the Relevant Person, the Foreign National and the authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section a share in request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may further note that the data shared will be further processed in accordance with the provisions of Data Protection Directive and the Data Protection Acts 1988 and 2003. The data will be processed in accordance with the provisions of the Data Protection Acts 1988 and 2003 and will be held on file for a period of 6 years. The data will be held for this period to provide for the possible possibility that the data may be required at a later date.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA) and relevant data will be provided to the Inspector as part of this inspection. Under Section 18 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application is false, misleading or misleading in a material respect.

In accordance with Section 21 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 6 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable:

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both, or
(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department's website.)
### (G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

**Attach 1 passport sized photograph, with Foreign National's name printed on the back.**

<table>
<thead>
<tr>
<th>Part One – Details of the Contractor and the Details of the Relevant Person: Complete all questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractors should include copies of:</td>
</tr>
<tr>
<td>• Completed P300/P90 Online Receipt dated within 3 months preceding the application (if applicable)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Two – Details of Foreign National: Complete all questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please supply clear copies (preferably in colour) of the following:</td>
</tr>
<tr>
<td>• Passport pages showing photograph, personal details and expiry date.</td>
</tr>
<tr>
<td>• Immigration stamps (if GNIB personal identification number not available)</td>
</tr>
<tr>
<td>• Visa (if GNIB personal identification number not available)</td>
</tr>
<tr>
<td>Original documents should not be submitted</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Three – Details of Contract Service Agreement: Complete all questions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please complete in relation to the details of the contract service agreement and requirement for renewal of Contract for Services Employment Permit.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Four – Details of Employment: Complete all questions (unless otherwise specified)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please supply copies of the following in the case of health professionals, including registered doctors and registered nurses who have not provided their Registration/PIN number at Part 5, Questions 3 and 4:</td>
</tr>
<tr>
<td>• A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations</td>
</tr>
<tr>
<td>Please supply copies of the following:</td>
</tr>
<tr>
<td>• Copies of 3 recent paystubs issued to the holder of the Employment Permit dated within the last 4 months which must comply with the requirements of the Employment Permits Act, 2006, as amended.</td>
</tr>
<tr>
<td>• Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit. If P60s are not available then copies of P21s are required.</td>
</tr>
<tr>
<td>• Documentary evidence of payments in respect of Board and Accommodation and Health insurance, if applicable.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Five – Details of Payment: Complete all questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Include the appropriate fee if required (see (D) Schedule of Fees for further information.</td>
</tr>
<tr>
<td>• Sign Payer declaration - original signature required.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part Six - Acceptance of Terms &amp; Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sign and date the appropriate declarations - original signatures required.</td>
</tr>
</tbody>
</table>
EMLOYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@eji.ie
Call Centre: 353-1-417-5333
LoCall: 1890 201 616
(from within Ireland only)
Fax: 353-1-631 3286
Address: Davitt House
66a Adelaide Road
Dublin 2
Ireland

Employment Permits Section Web pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation's website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form N
Application form for renewal of Reactivation Employment Permit

An Roinn Post, Forntar agus Nualachta
Department of Jobs, Enterprise and Innovation

RENEWAL Application

This form should be used by either the Employer or the Foreign National, who is the holder of the Employment Permit concerned, who wish to apply for:

- A renewal of an existing Reactivation Employment Permit for the same employer and employment.
- A renewal for a Reactivation Employment Permit should be made within the period of 4 months ending on the date of expiry of the existing Reactivation Employment Permit.

This form should NOT be used where an Employer or a Foreign National wishes to apply for:

- a change in the type of Employment Permit held by the foreign national.
- a change in the type of employment currently specified on the existing Employment Permit, or
- an Employment Permit for a foreign national currently employed by a different employer.

In these cases a new Employment Permit application is required and the New Employment Permit Application Form for the relevant permit type should be used.

Before completing this form, please read the relevant permit information which is available on the Department's website. Complete ALL parts of this form as required in BLOCK CAPITALS. The Employer, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.

(This section MUST be completed for all applications)

Employer

Foreign National (Holder of Employment Permit)

Health Professional

If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One

Registration Details of Employer

1. Employer Registered Number: [ ] Obtained from the Revenue Commissioners

2. Company Name Registered Number (If applicable): [ ] Obtained from the Companies Registration Office

3. Business Name Registered Number (If applicable): [ ] Obtained from the Companies Registration Office

4. If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:

5. If the Employer is a Charity, please supply the Charity Number:

[ ] Obtained from the Revenue Commissioners

Page 1

RREP002/15
If the Employer is not a Limited Company, please complete Questions 6, 7, 8 and 9.
If the Employer is a Limited Company, please proceed to Question 10.

6. If the Employer is not a registered company, please indicate what type of entity it is:
   - Sole Trader
   - Partnership
   - Other (please specify): BLOCK CAPITALS

7. Please state the full name of the Employer: BLOCK CAPITALS

8. Please state the nationality of the Employer: BLOCK CAPITALS

9. If the Employer is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?
   - Yes
   - No
   - Not applicable
   - If Yes, please specify: BLOCK CAPITALS

   If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation)

10. Registered name of Company/Business: BLOCK CAPITALS

11. Trading name of business (if different): BLOCK CAPITALS


13. Company/Business Address:
   - Address 1: BLOCK CAPITALS
   - Address 2: BLOCK CAPITALS
   - Town: BLOCK CAPITALS
   - County: BLOCK CAPITALS
   - Country: BLOCK CAPITALS

14. Telephone Number: BLOCK CAPITALS
15. Fax: BLOCK CAPITALS

16. Mobile Phone Number: BLOCK CAPITALS

17. E-mail: BLOCK CAPITALS

18. Website: BLOCK CAPITALS

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Employer: BLOCK CAPITALS
20. Number of non-EEA nationals currently employed by the Employer: BLOCK CAPITALS

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein

You must now attach the documents outlined in Requirement for Supporting Documentation under "(A) Requirements for Employers."
# Part Two

## Details of Foreign National (Holder of Employment Permit)

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>1. Passport Number:</td>
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<tr>
<td>2. Expiry Date:</td>
<td>D M Y Y</td>
</tr>
<tr>
<td>3. Nationality:</td>
<td>BLOCK CAPITALS</td>
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<tr>
<td>4. First Name:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>5. Middle Name(s):</td>
<td>BLOCK CAPITALS</td>
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<tr>
<td>6. Family Name:</td>
<td>BLOCK CAPITALS</td>
</tr>
<tr>
<td>7. Date of Birth:</td>
<td>D M Y</td>
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<tr>
<td>9. Female:</td>
<td></td>
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<tr>
<td>10. Telephone No.:</td>
<td></td>
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<tr>
<td>11. Mobile Phone No.:</td>
<td></td>
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<tr>
<td>12. Current Address:</td>
<td></td>
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<tr>
<td>13. Please provide the Foreign National’s PPS Number:</td>
<td></td>
</tr>
<tr>
<td>14. Please provide the number of the Employment Permit being renewed:</td>
<td></td>
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<tr>
<td>16. E-mail:</td>
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</tbody>
</table>

### Immigration Details
( Please enter the details exactly as they appear on your current GNIB card* )

<table>
<thead>
<tr>
<th>GNIB</th>
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<tbody>
<tr>
<td>Pin No.</td>
<td></td>
</tr>
<tr>
<td>Dept. No.</td>
<td></td>
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</tbody>
</table>

*If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of their current immigration stamps and visa.

If the proposed Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, she may be eligible to apply for a Stamp 4 permission to remain from the Irish Naturalisation and Immigration Service. However, if the proposed Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

If this is the case, by submitting this application the proposed Foreign National confirms that she has considered the available options and believes that an employment permit is still required.

You must now attach the documents outlined in Requirement for Supporting Documentation under “(R) Foreign National (Holder of Employment Permit) Requirements.”
### Part Three Details of Employment

1. **Title of Job:**
   
2. **Regulatory Body:**
   
3. **Registration/Pin/Licence No.:**
   
   NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

   If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations please provide your registration details above. Documentation evidence will not be required.

   Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. **Place(s) at which the employment concerned is to be carried out:**

5. **Proposed Period of Employment Permit (maximum period of 3 years)**

   * If this is an application for an unlimited permit, please write "Unlimited" in this box. An unlimited Employment Permit may be applied for at the renewal stage if a foreign national has been in continuous employment with the same employer for five years or more. Please note that all Employment Permit renewal applications should be submitted to this Department at least 12 weeks before the expiry date of the existing Employment Permit.

6. **Gross Annual Remuneration**
   
   (Gross remuneration excludes overtime or premium payments)

7. **Gross Annual Salary:**

   (if different from above)

8. **Gross Weekly Salary:**

9. **Hourly Rate of Pay:**

10. **Deductions from Gross Weekly Salary:**

11. **Health Insurance**:

   * All amounts which make up the basic salary must appear as payments on the payslip. If Health Insurance is being included in the Gross Annual Remuneration this must be verifiable by way of supporting documentation at renewal stage, such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.

   * Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.

12. **Number of hours of work per week:**

   * Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

13. **What are the main functions of this job:**

   * You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirements" (if applicable)
Part Four  Requirement for Payment

Is a fee payable for this Employment Permit application?
Yes [ ] No [ ]

If No, please indicate on what basis no fee is applicable:
The Employer is the applicant and has charitable status with the Revenue Commissioners [ ]
Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national [ ]
Dependant/Partner/Spouse Employment Permit [ ]
Unlimited General, Re-activation or Sports and Cultural Employment Permit [ ]

If no fee is payable proceed to Part Five.

Details of Payment

Important Note for Business Users: Payment by Electronic Funds Transfer
In accordance with DFinance Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payee (Questions 1, 2, 3, 4, 5, 6, 7, and 8) – an e-mail address to which payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and pay their application fee and payment will be requested when an application is accepted into the Employment Permits Section as complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants, other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

Contact Details of Payee

1. Please indicate who is making the payment:
   Employer [ ] Foreign National [ ] Other [ ]

2. Title:
   Mr [ ] Mrs [ ] Miss [ ] Ms [ ] Other (please state) [ ]

3. Name:

4. Company (If applicable):

5. Telephone Number: [ ] Fax Number: [ ]

6. Mobile Phone Number:

7. E-mail:

Payment Details

9. Method of Payment:
   Electronic Funds Transfer [ ] Cheque [ ] Bank Draft [ ] Postal Order [ ]

10. Cheque No.:

11. Payment enclosed / Amount of payment due:

Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.

Payer’s Declaration

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2006, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer’s Signature: [ ] (Original signature required) Date: [ ]

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Page 5
RREP002/15
Part Five  Acceptance of Terms & Conditions

Declaration of Foreign National

I, the undersigned, agree to undertake to continue in employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by the Employer, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2008, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Signature of Foreign National: ____________________________
(Original signature required) ____________________________

Name (in BLOCK CAPITALS): ____________________________

Date: ____________________________

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Employer

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will continue to be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
  - the Foreign National, as stated in Part 2 of the application form, will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Employer, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 23 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerned any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.

- In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is false or misleading is guilty of an offence.

- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and

- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Employer: _______________________________
(Original signature required)

Name (In BLOCK CAPITALS): __________________________
Title: __________________________

Position Held: __________________________
Date: ____________

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form:

Tick this box if you want your certified copy of the employment permit to be posted to your current address. [ ]

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable). [ ]
Authorisation of Agent

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

Agent Name
(In BLOCK CAPITALS):

Title:

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

Signature of Agent:
(Original signature required)

Date:

Agent’s Address for Correspondence:

Address 1:

Address 2:

Town:

County:

Country:

E-mail address:

Telephone number:

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

Signature of Employer:
(Original signature required)

Date:

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

Signature of Foreign National:
(Original signature required)

Date:
Requirements for Supporting Documentation

(A) Requirements for the Employer

If the Employer has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the Employer has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals:

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and has or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.
- Please supply your GNIB personal identification number which is shown on your GNIB card. If not available please supply a clear, legible copy (preferably in colour) of your current Immigration stamps and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date:

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

Clarification on Remuneration Paid

All applications for renewal of an employment permit must include the following documentation:

- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months.
- Copies of P26s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit.
- Documentary evidence of payments in respect of Health Insurance, if applicable.

For renewal of an employment in a restaurant or a fast food outlet:

If the application is in respect of such employment the following additional documentation is required:

- An up-to-date tax clearance certificate in respect of the Employer.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment:

In accordance with D/Finansco Circular 1/2013, from 19 September 2014 (e-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro-denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to: Department of Jobs, Enterprise & Innovation.
(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 18(1)(d) of the Employment Permit Act 2008, as amended.

C. It is recommended that an application for a Renewal Employment Permit should be made at least 12 weeks before the expiry of the existing permit.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2008, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2008, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection
The Employment Permits Section may undertake verification of all data submitted on this application form. The Employer, the Foreign National and the Authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary, for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (057) 868 4800 / Lo-Call Number: 1890 252321

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 18(6) of the Employment Permits Act 2008, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 5, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32(1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 21(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding 6,000 or imprisonment for a term not exceeding 12 months or both; or

(b) on conviction on indictment, to a fine not exceeding 65,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department's website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorised agent (if applicable).

Attach 1 passport sized photograph, with Foreign National's name printed on the back.

Indicate the following:
- The applicant (person applying i.e. Employer or the Foreign National (Holder of Employment Permit)).

Part One – Details of Employer: Complete all questions

Employer should include copies of:
- Completed PSDROS Online Receipt dated within 3 months preceding the application (if applicable).
- Evidence of Business Permission (if applicable).

Part Two – Details of Foreign National: Complete all questions

Please supply clear copies (preferably in colour) of the following:
- Passport pages showing photograph, personal details and expiry date.
- Immigration stamps (if GNIB personal identification number not available).
- Visa (if GNIB personal identification number not available).

Original documents should not be submitted.

Part Three – Details of Employment: Complete all questions (unless otherwise specified)

Please provide the following:
- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months.
- Copies of PINs issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit.
- Documentary evidence of payments in respect of Health Insurance, if applicable.

Please supply copies of the following in the case of health professionals, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN number at Part 3, Question 3:
- A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations.

Please supply the following in the case of the renewal of an employment in a restaurant or a fast food outlet:
- An up-to-date tax clearance certificate in respect of the Employer.

Part Four – Details of Payment: Complete all questions

- Include the appropriate fee if required (see (D) Schedule of Fees for further information).
- Sign Payer declaration - original signature required.
- If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status.
- If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partner's current passport showing his or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign national and the EEA national.

Part Five – Acceptance of Terms & Conditions

- Sign and date the appropriate declarations - original signatures required.

EMPLOYMENT PERMITS SECTION

<table>
<thead>
<tr>
<th>Contact Details</th>
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<tbody>
<tr>
<td>E-mail: <a href="mailto:employmentpermits@dei.ie">employmentpermits@dei.ie</a></td>
</tr>
<tr>
<td>Call Centre: 353-1-417 5333</td>
</tr>
<tr>
<td>Local Call: 1890 201 616 (from within Ireland only)</td>
</tr>
<tr>
<td>Fax: 353-1-631 3266</td>
</tr>
<tr>
<td>Address: Davitt House, 66a Adelaide Road, Dublin 2, Ireland</td>
</tr>
</tbody>
</table>

Employment Permits Section Web pages

Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation's website.

PLEASE NOTE: The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form O

Application form for renewal of Sport and Cultural Employment Permit

Sport and Cultural Employment Permit
RENEWAL Application

This form should be used by either the Employer or the Foreign National, who is the holder of the Employment Permit concerned, who wish to apply for:

- A renewal of an existing Sport and Cultural Employment Permit for the same employer and employment.
- A renewal application for a Sport and Cultural Employment Permit should be made within the period of 4 months ending on the date of expiry of the existing Sport and Cultural Employment Permit.

This form should NOT be used where an Employer or a Foreign National wishes to apply for
- a change in the type of Employment Permit held by the foreign national;
- a change in the type of employment currently specified on the existing Employment Permit, or
- an Employment Permit for a foreign national currently employed by a different employer on foot of an Employment Permit.

In these cases a new Employment Permit application is required and the New Employment Permit Application Form for the relevant permit type should be used.

Before completing this form, please read the relevant permit information which is available on the Department’s website. Complete ALL parts of this form as required in BLOCK CAPITALS. The Employer, the Foreign National and the Agent (if applicable), must sign the declarations at the end of the form.

INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICANT OR THE AUTHORISED AGENT (IF APPLICABLE).

Who is applying for the permit (i.e. Who is the applicant)?

In accordance with the Employment Permits Act 2006, as amended, an employer making an Employment Permit application may not seek to recover the fee, if applicable, from the foreign national.
(This section MUST be completed for all applications)

<table>
<thead>
<tr>
<th>Employer</th>
<th>Foreign National (Holder of Employment Permit)</th>
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Health Professional
If this is an application for a Health Professional listed in Part A or Part B of Schedule 2 in the Principal Regulations please tick this box

Part One

<table>
<thead>
<tr>
<th>Registration Details of Employer</th>
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<tbody>
<tr>
<td>1. Employer Registered Number:</td>
</tr>
<tr>
<td>2. Company Name Registered Number (if applicable):</td>
</tr>
<tr>
<td>3. Business Name Registered Number (if applicable):</td>
</tr>
<tr>
<td>4. If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:</td>
</tr>
<tr>
<td>5. If the Employer is a Charity, please supply the Charity Number:</td>
</tr>
</tbody>
</table>

Obtained from the Revenue Commissioners
Obtained from the Companies Registration Office
Obtained from the Companies Registration Office
Obtained from the Registry of Friendly Societies
Obtained from the Revenue Commissioners
If the Employer is not a Limited Company, please complete Questions 6, 7, 8 and 9.
If the Employer is a Limited Company, please proceed to Question 10.

6. If the Employer is not a registered company, please indicate what type of entity it is:

- Sole Trader
- Partnership
- Other (please specify):

7. Please state the full name of the Employer:

8. Please state the nationality of the Employer:

9. If the Employer is not an EEA citizen, do they hold appropriate permission from the Minister for Justice and Equality to operate a business in the State?

- Yes
- No
- Not applicable

If Yes, please specify:

If yes, you must enclose copies of supporting documentation from the Minister for Justice and Equality confirming your permission to operate a business in the State or your application will be returned (see Requirements for Supporting Documentation).

10. Registered name of Company/Business:

11. Trading name of business (if different):

12. Nature of business:

13. Company/Business Address:

- Address 1:
- Address 2:
- Town:
- County:
- Country:

14. Telephone Number:

15. Fax:

16. Mobile Phone Number:

17. E-mail:

18. Website:

19. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Employer:

20. Number of non-EEA nationals currently employed by the Employer:

*The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.

You must now attach the documents outlined in Requirement for Supporting Documentation under 'A) Requirements for Employer.'
### Part Two

**Details of Foreign National (Holder of Employment Permit)**

1. **Passport Number:**
   
2. **Expiry Date:**
   
3. **Nationality:**
   
4. **First Name:**
   
5. **Middle Name(s):**
   
6. **Family Name:**
   
7. **Date of Birth:**
   
8. **Male:**
   
9. **Female:**

10. **Telephone No.:**
   
11. **Mobile Phone No.:**

12. **Current Address:**
   
13. **Please provide the Foreign National’s PP8 Number:**

14. **Please provide the number of the Employment Permit being renewed:**

15. **E-mail:**

16. **Immigration Details (Please enter the details exactly as they appear on your current GNIB card)*

   **GNIB Pin No.**

   **Dept. No.**

   *If the Foreign National is in the State but does not have a GNIB personal identification number then please supply a copy of their current immigration stamps and visa.

   If the proposed Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has been working lawfully during this time, he/she may be eligible to apply for a Stamp 4 permission to remain in the Irish Naturalisation and Immigration Service. However, if the proposed Foreign National is unable to obtain a Stamp 4, an employment permit will be required.

   If this is the case, by submitting this application the proposed Foreign National confirms that he/she has considered the available options and believes that an employment permit is still required.

---

*You must now attach the documents outlined in Requirement for Supporting Documentation under "(b) Foreign National (Holder of Employment Permit) Requirements."*
Part Three
Details of Employment

1. Title of Job: 

NOTE: Questions 2 and 3 to be completed by Health Professionals and Security Personnel who are listed in Part A and Part B of Schedule 2 in the Principal Regulations.

2. Regulatory Body: 

3. Registration/PE/TV Licence No.: 

If the application is in respect of Registered Doctors, Nurses or Security Personnel listed in Part A of Schedule 2 in the Principal Regulations, please provide your registration details above. Documentary evidence will not be required.

Applications for other Health Professionals listed in Part B of Schedule 2 in the Principal Regulations must provide a copy of their registration with the appropriate medical body or recognition of their qualifications from the Department of Health.

4. Place(s) at which the employment concerned is to be carried out: 

5. Proposed Period of Employment Permit (maximum period of 3 years)*

* If this is an application for an unlimited permit, please write "Unlimited" in this box. An unlimited Employment Permit may be applied for at the renewal stage if a foreign national has been in continuous employment with the same employer for five years or more. Please note that all Employment Permit renewal applications should be submitted to this Department at least 12 weeks before the expiry date of the existing Employment Permit.

6. Gross Annual Remuneration* (Gross remuneration excludes overtime or premium payments)

7. Gross Annual Salary: (if different from above)

8. Gross Weekly Salary:

9. Hourly Rate of Pay:

10. Deductions from Gross Weekly Salary:

11. Health Insurance*: 

* All amounts which make up the basic salary must appear as payments on the payslips. If Health Insurance is being included in the Gross Annual Remuneration, this must be verifiable by way of supporting documentation at renewal stage, such documentation may also be required in the event of a National Employment Rights Authority (NERA) inspection.

* Health Insurance can only be considered if the provider of the health insurance is a person entered in the Register of Health Benefits Undertakings referred to in section 14 of the Health Insurance Act, 1994.

12. Number of hours of work per week*:

* Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.

13. What are the main functions of this job:

You must now attach the documents outlined in Requirement for Supporting Documentation under "C) Application Requirements" (if applicable)
**Part Four**

**Requirement for Payment**

<table>
<thead>
<tr>
<th>Is a fee payable for this Employment Permit application?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

If No, please indicate on what basis no fee is applicable?

- The Employer is the applicant and has charitable status with the Revenue Commissioners
- Application is in respect of a non-EEA national married to or in a civil partnership with an EEA national
- Dependant/Partner/Spouse Employment Permit
- Unlimited General, Reactivation or Sport and Cultural Employment Permit

If no fee is payable proceed to Part Five.

**Details of Payment**

**Important Note for Business Users - Payment by Electronic Funds Transfer**

In accordance with DfIne Circular 1/2013, from 19 September 2014 (e-Dej) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section will no longer accept paper based payments from business users and has set up a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT).

Business user applicants for employment permits should complete the Contact Details of Payer (Questions 1, 2, 3, 4, 6, 7, and 8) – an e-mail address to request payment must be provided at Question 8. They should also complete Payment Details (Question 9 and 11) and Payers Declaration below and payment will be requested when an application is accepted into the Employment Permits Sections is complete. An e-mail will issue to the applicant and their authorised agent (if applicable) giving details of the amount of the fee due the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

Applicants other than business users can continue to make payment by cheque, bank draft or postal order and must complete all details below.

**Contact Details of Payer**

1. Please Indicate who is making the payment:
   - Employer
   - Foreign National
   - Other

2. Title:
   - Mr
   - Mrs
   - Miss
   - Ms
   - Other (please state)

3. Name:

4. Company (if applicable):

5. Telephone Number:

6. Fax Number:

7. Mobile Phone Number:

8. E-mail:

**Payment Details**

9. Method of Payment:
   - Electronic Funds Transfer
   - Cheque
   - Bank Draft
   - Postal Order

10. Cheque No.

11. Payment enclosed:
    - Amount of payment due: €

**Payment must be in the form of a Euro denominated cheque, bank draft or postal order drawn on a financial institution operating within the Irish Clearing System. Cheques should be made payable to the Department of Jobs, Enterprise and Innovation.**

**Payer's Declaration**

I, the undersigned, agree that in the case of a refund of fees, the payment will be made payable to the Applicant specified on Page 1. (Under the Employment Permits Act 2005, as amended, a refund in the case of a refused or withdrawn application will consist of 90% of the total fee paid)

Payer's Signature: ___________________________ Date: ____________

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant's bank account, as per details provided on the mandate form.

Page 5

R8CEP002/015
### Part Five

**Acceptance of Terms & Conditions**

#### Declaration of Foreign National

I, the undersigned, agree to undertake to continue in employment on the above basis and I understand that, while in employment in the State, I will be entitled to the full benefit of all the relevant Irish Employment Rights Legislation.

I hereby solemnly declare that:

- I am a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 in the Principal Regulations for the position on offer, as stated in Part 3 of the application form (if applicable);
- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employer should the need arise; and
- I will be fully tax compliant;

and that to the best of my knowledge and belief:

- I will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by the Employer, as stated in Part 1 of the application form;

Furthermore, I understand and accept that in accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

<table>
<thead>
<tr>
<th>Signature of Foreign National:</th>
<th>Title:</th>
</tr>
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<tbody>
<tr>
<td>(Original signature required)</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name (In BLOCK CAPITALS):</th>
<th>Date:</th>
</tr>
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<tbody>
<tr>
<td>BLOCK CAPITALS</td>
<td>D M Y</td>
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</tbody>
</table>

Your employment permit will normally be posted to you at your current address as in Part 2 of this Form.

Tick this box if you want your permit to be posted to your current address.

Tick this box if you want your permit to be posted to the Person who has made the offer of employment as stated in Part 1 of this Form.

Tick this box if you want your permit to be posted to your Authorised Agent (if applicable).
Declaration of Employer

I, hereby solemnly declare that the particulars given in this application are true to the best of my knowledge and belief. I further declare that the full benefit of all the relevant Irish Employment Rights Legislation will continue to be applied to this Foreign National.

I hereby solemnly declare that:

- I have taken reasonable steps to satisfy myself that:
  - the Foreign National is a fully accredited member of the relevant professional body pursuant to Part C of Schedule 2 to the Principal Regulations for the position offered, as stated in Part 3 of the application form (if applicable);
  - the Foreign National, as stated in Part 2 of the application form, will continue to be employed, salaried and paid under an employment contract governed by the laws of the State by me, the Employer, as stated in Part 1 of the application form.

I further understand, declare and accept that:

- In accordance with Section 22 of the Employment Permits Act 2006, as amended, I may not make any deductions from the remuneration of, or seek to recover from, the holder of an employment permit concerning any charge, fee or expense arising out of or concerning one or more of the following:
  - the application for the employment permit or any matter relating to or concerning such an application or the grant of the permit;
  - the recruitment of the holder for the employment in respect of which the application was made; or
  - any amount previously paid to the holder in respect of travelling expenses incurred by the holder in connection with taking up the employment in the State.

- In accordance with Section 29 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 20, information that is false or misleading in a material respect knowing that it is false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

- If this application is for an employment in respect of a Carer in a private home and an employment permit is granted, I will have no objection to an Inspector from the National Employment Rights Authority (NERA) visiting the premises where employment is being carried out and to speak to me and the employee should the need arise; and

- I have full responsibility for guaranteeing that the appropriate deductions under the PAYE system will be made from all payments (including benefits-in-kind) made to the Foreign National and that all such deductions will be paid to the Revenue Commissioners.

I further understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

Signature of Employer:
(Original signature required)

Name (in BLOCK CAPITALS):

Position Held:

Your certified copy of the employment permit will normally be posted to you at your current address as in Part 1 of this Form.

Tick this box if you want your certified copy of the employment permit to be posted to your current address.

Tick this box if you want your certified copy of the employment permit to be posted to your Authorised Agent (if applicable).
**Authorisation of Agent**

If no agent is representing the applicant then this section to be left blank.

If you (the applicant) wish a third party (agent) to act on your behalf please ensure the following details are completed. To ensure privacy of data is respected, all parties must be in agreement with the nomination of an agent. All parties must sign below. Agents will be copied any correspondence regarding this application.

<table>
<thead>
<tr>
<th>Agent Name</th>
</tr>
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<tbody>
<tr>
<td>(In BLOCK CAPITALS):</td>
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</table>

I understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an Employment Permit.

<table>
<thead>
<tr>
<th>Signature of Agent:</th>
</tr>
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<tr>
<td>(Original signature required)</td>
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</tbody>
</table>

**Agent’s Address for Correspondence:**

<table>
<thead>
<tr>
<th>Address 1:</th>
</tr>
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<table>
<thead>
<tr>
<th>Address 2:</th>
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<table>
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<tr>
<th>Town:</th>
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<th>County:</th>
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<table>
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<tr>
<th>Country:</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>E-mail address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone number:</th>
</tr>
</thead>
</table>

I, the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Employer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Original signature required)</td>
</tr>
</tbody>
</table>

I, the Foreign National, permit the above named agent to act on my behalf in respect of this application.

<table>
<thead>
<tr>
<th>Signature of Foreign National:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Original signature required)</td>
</tr>
</tbody>
</table>
Requirements for Supporting Documentation

(A) Requirements for the Employer

If the Employer has not been granted an Employment Permit within the 12 months preceding the application, they MUST submit clear copies of the following documentation:

- Copy of P30 returned to the Revenue Commissioners within the 3 months preceding this application or a receipt for such return whether issued through ROS (Revenue Online Service) or otherwise.

Business Permission

If the Employer has indicated that they are a foreign national operating a business in the State, they are required to submit copies of documentary evidence from the Minister for Justice and Equality clearly demonstrating their status within the State and their entitlement to operate a business in the State.

Additional documentation

The Minister may request such other information as might materially assist in making a decision on an application.

(B) Requirements for Foreign National

For all Foreign Nationals

- Clear, legible copy (preferably in colour) of the personal details pages of the Foreign National’s passport, showing his or her picture, personal details and his or her signature.
- In the case of health professionals listed in Part B of Schedule 2 in the Principal Regulations, a copy of the registration with the appropriate medical body or recognition of qualifications from the relevant Minister of the Government.
- Please supply your GNB personal identification number which is shown on your GNB card. If not available please supply a clear, legible copy (preferably in colour) of your current immigration stamps and visa.

Please Note: Original documents should not be submitted.

Important Note concerning the passport expiry date

In the case of all applications for employment permits, the Foreign National must hold a passport which is in date and valid for at least 12 months or more after the date of the application. Employment Permits cannot be considered for Foreign Nationals who do not fulfil this requirement.

(C) Application Requirements

Clarification on Remuneration Paid

All applications for renewal of an employment permit must include the following documentation:

- Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months.
- Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit.
- Documentary evidence of payments in respect of Health Insurance, if applicable.

For renewal of an employment in a restaurant or a fast food outlet

If the application is in respect of such employment the following additional documentation is required:

- An up-to-date tax clearance certificate in respect of the Employer.

(D) Schedule of Fees

An application for a new employment permit shall be accompanied by the fee prescribed in the Principal Regulations for the purposes of section 5(2) of the Employment Permits Act 2006, as amended. The current fees applicable are available on the Department’s website.

Refunds

90% of the fee will be refunded to the Applicant if the application is refused or withdrawn prior to the issuing of the permit.

No fees will be refunded if the Employment Permit holder ceases employment after the permit has been issued.

Employment Permits Section is unable to refund fees by payable order. If a refund of fees is due for any reason, a mandate form will be forwarded to the applicant for completion. The refund will be paid by EFT directly into the applicant’s bank account, as per details provided on the mandate form.

Acceptable Forms of payment

In accordance with Diffinance Circular 1/2013, from 19 September 2014 (a-Day) the public sector will no longer accept cheques, bank drafts or postal orders from business users in respect of services rendered. To facilitate this, the Employment Permits Section now has a commercial bank account into which payments can be made by Electronic Funds Transfer (EFT). When an application is accepted as complete an email will issue to the applicant giving details of the amount of the fee due, the bank account into which the payment should be made and an Application ID number which must be used as the reference when making the payment.

For all other users, payment can continue to be made in the form of a Euro denominated cheque, bank draft or postal order, drawn on a financial institution operating within the Irish clearing system. Please note that all foreign drafts and cheques will be returned. Cheques should be made payable to Department of Jobs, Enterprise & Innovation.
(E) Conditions of Issue of an Employment Permit

A. Issue of an Employment Permit in respect of a foreign national does not in itself authorise such a person to enter or reside within the State. Admission to the State and authorised duration of stay is subject to the control of the Immigration Authorities.

B. All Employment Permits are issued on the proviso that the named foreign national is paid, as a minimum, the remuneration specified on the Employment Permit. The only allowable deductions are those which appear on that Employment Permit. The remuneration being paid must be verifiable in the event of a National Employment Rights Authority (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 16(1)(d) of the Employment Permits Act 2006, as amended.

C. It is recommended that an application for a Renewal Employment Permit should be made at least 12 weeks before the expiry of the existing permit.

D. Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.

E. A fee, as determined by the Minister for Jobs, Enterprise and Innovation is payable by the applicant or the authorised agent (if applicable) for each Employment Permit granted.

F. In line with section 24 of the Employment Permits Act 2006, as amended, should the employment that is the subject of the Employment Permit cease, for whatever reason, the original and the certified copy of the Employment Permit must be returned to the Employment Permits Section within 4 weeks from the date of cessation. Failure to comply with this requirement is an offence.

Non-compliance with any provision of the Aliens Act 1935, the Immigration Acts, the Employment Permits Acts 2003 and 2006, as amended, or any Order made under these Acts is an offence punishable by Law.

(F) Declaration

Data Sharing and Data Protection

The Employment Permits Section may undertake verification of all data submitted on this application form. The Employer, the Foreign National and the Authorised Agent (if applicable) are advised that in signing this application form they consent to allow the Employment Permits Section to share and request data as necessary for the sole purpose of verifying the information submitted, between relevant Government Departments and Agencies.

The signatories to this application may find further information concerning data sharing and the obligations of Data Controllers on the Data Protection Commissioner’s website at www.dataprotection.ie. Alternatively, they may call (01) 868 4800 / Lo-Call Number: 1890 252231.

Please note that a percentage of all applications will be chosen at random for inspection by the National Employment Rights Authority (NERA). Relevant documents will have to be provided as part of this inspection. Under Section 16 (d) of the Employment Permits Act 2006, as amended, the Minister may revoke an employment permit if, in the opinion of the Minister, any information provided in respect of the application for it was false or misleading in a material respect.

In accordance with Section 25 of the Employment Permits Act 2006, as amended, a person who furnishes to the Minister, on an application under section 4 or 20, information that is false or misleading in a material respect knowing that it is so false or misleading or being reckless as to whether it is so false or misleading is guilty of an offence.

Furthermore, in accordance with Section 32 (1) of the Employment Permits Act 2006, as amended, a person guilty of an offence under section 18(2), 19(3), 23(4) or 25 is liable—

(a) on summary conviction, to a fine not exceeding €5,000 or imprisonment for a term not exceeding 12 months or both; or

(b) on conviction on indictment, to a fine not exceeding €50,000 or imprisonment for a term not exceeding 5 years or both.

Please note: With effect from 2003, the names of all employers who employ employment permit holders, as well as the number of permits issued to that employer, are made publicly available on the Department’s website.
(G) Application Form Checklist

Please ensure that the application form is completed correctly. The following checklist should be used to ensure that all required information/documentation is provided. Incomplete application forms will be returned to the applicant or authorized agent (if applicable).

| Attach 1 passport sized photograph, with Foreign National’s name printed on the back |
| Indicate the following: |
| • The applicant (person applying i.e. Employer or the Foreign National (Holder of Employment Permit)). |

| Part One – Details of Employer: Complete all questions |
| Employer should include copies of: |
| • Completed P30ROS Online Receipt dated within 3 months preceding the application (if applicable). |
| • Evidence of Business Permission (if applicable). |

| Part Two – Details of Foreign National: Complete all questions |
| Please supply clear copies (preferably in colour) of the following: |
| • Passport pages showing photograph, personal details and expiry date. |
| • Immigration stamps (if GNIB personal identification number not available). |
| • Visa (if GNIB personal identification number not available). |
| Original documents should not be submitted. |

| Part Three – Details of Employment: Complete all questions (unless otherwise specified) |
| Please provide the following: |
| • Copies of 3 recent payslips issued to the holder of the Employment Permit within the last 4 months. |
| • Copies of P60s issued to the holder of the Employment Permit for each year of employment covering the duration of the existing Employment Permit. |
| • Documentary evidence of payments in respect of Health Insurance, if applicable. |
| Please supply copies of the following in the case of health professions, including registered doctors, registered nurses and security personnel who have not provided their Registration/PIN number at Part 3, Question 3: |
| • A copy of registration with the appropriate regulatory body or recognition of qualifications pursuant to Schedule 2 in the Principal Regulations. |
| Please supply the following in the case of the renewal of an employment in a restaurant or a fast food outlet: |
| • an up-to-date tax clearance certificate in respect of the Employer. |

| Part Four – Details of Payment: Complete all questions |
| • Include the appropriate fee if required (see (D) Schedule of Fees for further information. |
| • Sign Payer declaration - original signature required. |
| • If applicable, a copy of an official letter from the Revenue Commissioners confirming charitable status. |
| • If applicable, clear photocopies of the relevant pages of the EEA Spouse/Civil Partners’ current passport showing is or her picture, personal details, passport expiry date and his or her signature, and a copy of the marriage certificate or the civil partnership registration evidencing the relationship of the Foreign National and the EEA national. |

| Part Five - Acceptance of Terms & Conditions |
| • Sign and date the appropriate declarations - original signatures required. |
### EMPLOYMENT PERMITS SECTION

- **E-mail:** employmentpermits@dja.ie
- **Call Centre:** 333-1-417 5333
- **LeCall:** 1890 201616
  (from within Ireland only)
- **Fax:** 333-1-881 3268
- **Address:**
  Strait Hall House
  16A Adelaide Road
  Dublin 2
  Ireland

### Contact Details

- **Employment Permits Section Web pages**

  Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs, Enterprise and Innovation website.

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**PLEASE NOTE:** The pages giving details on Requirement for Supporting Documentation and Application Form Checklist – parts A, B, C, D, E, F and G are for instruction purposes only. It is not necessary to include these pages when submitting the completed application form.
Form P

Notification of dismissal by reason of redundancy under section 20A or 20B of the Principal Act

An Roinn Poist, Fíontar agus Nualalocha
Department of Jobs, Enterprise and Innovation

NOR001/14

Notification of dismissal by reason of redundancy under Sections 20A & 20B of the Employment Permits Act 2006 (as amended)

This form is to be used by current holders of Green Cards/Critical Skills Employment Permits and Work Permits/General Employment Permits who are dismissed by reason of redundancy within the meaning of Sections 7(2) and 21 of the Redundancy Payments Act 1967.

1. PART 1 must be competed in full by the foreign national who is the holder of the Employment Permit.

2. You must attach the following document/s to this notification when submitting it to the Employment Permits Section:
   (i) Letter from the employer specified on the Employment Permit confirming that you have been dismissed within the last 4 weeks by reason of redundancy as specified in paragraph (a), (b), (c), (d) or (e) of section 7(2) or in section 21 of the Redundancy Payments Act 1967,
   (ii) Copy of the P45 issued by the employer specified on the Employment Permit, where available, and
   (iii) The original of your employment permit, where it has not already been surrendered in accordance with section 24 of the Employment Permits Act 2006, as amended.

3. In line with the Employment Permits Act 2006 (as amended) the notification of dismissal by reason of redundancy must be made within 28 days from the date of dismissal. Failure to notify the Minister within this timeframe could lead to the refusal of a new Employment Permit as it may not fall within the criteria applying at time of application for a new Employment Permit.

4. This form, together with the documents specified above, should be sent to the Employment Permits Section, Department of Jobs, Enterprise and Innovation, Davitt House, 65A Adelaide Road, Dublin 2.

PART 1

PLEASE COMPLETE IN BLOCK CAPITALS

Application ID or Employment Permit Number: ________________________________

Permit Holder’s Name: ______________________________________________________

Permit Holder’s Address: ____________________________________________________

__________________________________________________________________________

__________________________________________________________________________

I hereby notify the Minister for Jobs, Enterprise and Innovation of my dismissal by reason of redundancy with effect from ______________________. I confirm that, in line with section 24 of the Employment Permits Act 2006, as amended, I have returned the original of my Employment Permit.

Signed (Permit Holder): ___________________________ Date: ____________________
Form Q

Submission of decision for review under section 13 or 17 of the Principal Act

1. PARTS 1 and 2 must be completed in full by:
   (i) In the case of a review under section 13, where an Employment Permit application has been refused – the applicant who made the employment permit application, or
   (ii) in the case of a review under section 17, where a decision to revoke an employment permit has been made – the holder of the employment permit, the employer or the connected person.

2. In PART 3 you should outline the detail of your Review – i.e. grounds upon which the application for the review under section 13 or 17 is made.

3. You must attach the following document to this submission when submitting it to the Employment Permits Section:
   (i) The letter which issued to you from the Employment Permits Section advising you of the decision to refuse your Employment Permit application under section 12 of the Act, or
   (ii) The letter which issued to you from the Employment Permits Section advising you of the decision to revoke the Employment Permit under section 16 of the Act.

In line with the Employment Permits Act 2006 (as amended) the submission of a decision for review must be made within 28 days from the date of the letters specified at (i) and (ii) above.

4. This form, together with the relevant document at 3. above and any other documents you wish to have considered in your Review, should be sent to the Reviewing Officer, Employment Permits Section, Department of Jobs, Enterprise and Innovation, Davitt House, 65A Adelaide Road, Dublin 2.

---

PART 1

PLEASE COMPLETE PART I AND II IN BLOCK CAPITALS

Application ID or Employment Permit Number: ________________________________

Applicant Name: ___________________________________________________________
(Please see 1. above)

Applicant Address: _________________________________________________________

---

PART 2

I wish to request a review of the decision to:

(Tick whichever is appropriate)

[ ] refuse my application for an employment permit under section 12 of the Employment Permits Act 2006 (as amended), or

[ ] revoke the employment permit under section 16 of the Employment Permits Act 2006 (as amended).

The reasons for my review are set out in PART 3 of this form.

Signed: ___________________________ Date: ___________________________
PART 3
Please set out below the grounds for your review which should address all of the grounds for refusal or revocation. All details that you wish to have considered should be included. [If you do not have sufficient space below to set out all the details you wish to have included in the review or wish to submit in supporting documentation please attach another page, or supporting documentation, securely to this form.]

Signed: ___________________________ Date: ______________________

Note: This form may be completed by an Authorised Legal Representative (Agent) who was nominated by all parties on the original employment permit application form. In the event that there has been a change in Agent, or an Agent has been engaged to assist in the review process, then a letter of authorisation signed by all parties to the employment permit application or employment permit will be required.
Form R

Notification of change of name of connected person or foreign employer under section 8(8) of Principal Act

An Roinn Post, Fiontar agus Nualalaicthe
Department of Jobs, Enterprise and Innovation

Notification of Change of Name of a Connected Person or a Foreign Employer under the Employment Permits Act 2006 (as amended)

This form is to be used by a Connected Person/Foreign Employer, where a foreign national is carrying out duties or undergoing training with a Connected Person on foot of a valid Intra-Company Transfer Employment Permit, and where there is a change in the name of the Connected Person or the Foreign Employer under the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003).

In line with section 8(8) of the Employment Permits Act 2006 (as amended) the notification of change of name of a Connected Person or a Foreign Employer on an Employment Permit shall be made immediately following the transfer of the business. Failure to notify the Minister may lead to the refusal of any future renewals of that Employment Permit applied for under section 20 of the Employment Permits Act 2006 (as amended).

1. The completion of this form is to be arranged by:

(i) in the case of a change of the name of the Connected Person currently specified on the Employment Permit, the Connected Person, or
(ii) in the case of the change of a name of the Foreign Employer currently specified on the Employment Permit, the Foreign Employer,

and to be signed by:

(i) the Connected Person/Foreign Employer specified on the Employment Permit,
(ii) the New Connected Person/New Foreign Employer taking over the business under the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and
(iii) the Foreign National, who is the holder of the Employment Permit.

2. You must attach the following document/s to this notification when submitting it to the Employment Permits Section:

(i) Letter from your Solicitor or Accountant confirming:
   • that the transfer comes within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and
   • the date of the transfer,

(ii) Registration details for the New Connected Person’s name, if applicable:
   • A form P30 which was returned to the Revenue Commissioners within the last 3 months or a receipt for such return, whether issued through the Revenue Online Service (ROS) or otherwise or in the case of a new Connected Person who has not made returns to the Revenue Commissioners an official letter from the Revenue Commissioners confirming registration as an employer, and

(iii) The Original and the Certified Copy of the Employment Permit.

3. This form, together with the documents specified, should be sent to the Employment Permits Section, Department of Jobs, Enterprise and Innovation, Davitt House, 65A Adelaide Road, Dublin 2.

4. Once the Employment Permits Section are satisfied, following examination of this notification and the supporting documentation, that the change of name arises from a Transfer of Undertaking, within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and the new Connected Person is registered with Revenue Commissioners and the Companies Registration Office/Registry of Friendly Societies if applicable, the relevant Employment Permit will be re-issued with the new Connected Person’s/Foreign Employer’s name as applicable.
To be completed in respect of a change of name of a Connected Person/Foreign Employer on an Intra-Company Transfer Employment Permit.

PLEASE COMPLETE IN BLOCK CAPITALS

Application ID or Employment Permit Number: __________________________

Foreign National/Employment Permit Holder’s Name: __________________________

(Please circle whichever is applicable – Connected Person or Foreign Employer) Name of Connected Person/Foreign Employer Specified on Employment Permit:

_____________________________________________________________________

_____________________________________________________________________

Name of New Connected Person/New Foreign Employer:

_____________________________________________________________________

_____________________________________________________________________

Address of New Connected Person/New Foreign Employer:

_____________________________________________________________________

_____________________________________________________________________

Registration Number of new Connected Person under the Companies Acts, Limited Partnerships Act 1907, Industrial and Provident Societies Acts 1893 to 1978, Friendly Societies Acts 1896 to 1977 or the Trade Union Acts 1871 to 1990, if relevant or applicable: __________________________

I, Connected Person/Foreign Employer, hereby notify the Minister for Jobs, Enterprise and Innovation of a Change of Name of Connected Person/Foreign Employer under section 8(8) of the Employment Permits Act 2006 (as amended). I confirm that there remains a connection as defined in the Employment Permits Act 2006 (as amended), between the New Foreign Employer/Foreign Employer specified on the Employment Permit and the new Connected Person/Connected Person specified on the Employment Permit as applicable,

Signed: __________________________ Date: __________________________
Connected Person/Foreign Employer currently specified on Employment Permit

We hereby confirm that:

(i) the employment of the foreign national who is the holder of this Employment Permit has been transferred to this New Foreign Employer, or

(ii) the foreign national is carrying out duties for, or undergo training provided by a New Connected Person

and that the terms, conditions, description and location of employment as specified on this Employment Permit remain the same.

Signed: __________________________ Date: __________________________
New Connected Person/New Foreign Employer

Signed: __________________________ Date: __________________________
Foreign National/Holder of Employment Permit

TOUICT002/15
Form S

Notification of change of name of contractor or relevant person under section 8(8) of Principal Act

An Roimh Post, Fiontar agus Nualalaicthe
Department of Jobs, Enterprise and Innovation

TOUCFS002/15

Notification of Change of Name of a Contractor or a Relevant Person under the Employment Permits Act 2006 (as amended)

This form is to be used by a Contractor, where a foreign national is providing a service to a Relevant Person as part of a contract services agreement on foot of a valid Contract for Services Employment Permit, and where there is a change in the name of the Contractor or the Relevant Person under the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003).

In line with section 8(8) of the Employment Permits Act 2006 (as amended) the notification of change of name of a Contractor or a Relevant Person on an Employment Permit shall be made immediately following the transfer of the business/contract. Failure to notify the Minister may lead to the refusal of any future renewals of that Employment Permit applied for under section 20 of the Employment Permits Act 2006 (as amended).

1. The completion of this form is to be arranged by the Contractor currently specified on the Employment Permit and to be signed by:
   (i) the Contractor specified on the Employment Permit,
   (ii) the New Contractor/New Relevant Person taking over the business/contract under the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and
   (iii) the Foreign National, who is the holder of the Employment Permit.

2. You must attach the following document/s to this notification when submitting it to the Employment Permits Section:
   (i) Letter from the Contractor's Solicitor/Accountant confirming:
      • that the transfer comes within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and
      • the date of the transfer.
   (ii) Registration Details for the New Contractor's name, if applicable:
      • A form P30 which was returned to the Revenue Commissioners within the last 3 months or a receipt for such return, whether issued through the Revenue Online Service (ROS) or otherwise or in the case of a new Contractor who has not made returns to the Revenue Commissioners an official letter from the Revenue Commissioners confirming registration as an employer, and
   (iii) The Original and the Certified Copy of the Employment Permit.

3. This form, together with the documents specified, should be sent to the Employment Permits Section,
   Department of Jobs, Enterprise and Innovation,á Uávite House, 65A Adelaide Road, Dublin 2.

4. Once the Employment Permits Section are satisfied, following examination of this notification and the supporting documentation, that the change of name arises from a Transfer of Undertaking, within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and the new Contractor is registered with the Revenue Commissioners and the Companies Registration Office/Registry of Friendly Societies, If applicable, the relevant Employment Permit will be re-issued with the new Contractor’s or Relevant Person's name, as applicable.
To be completed in respect of a change of name of a Contractor/Relevant Person on a Contract for Services Employment Permit.

PLEASE COMPLETE IN BLOCK CAPITALS

Application ID or Employment Permit Number: ____________________________

Foreign National/Employment Permit Holder's Name: ____________________________

(Please circle whichever is applicable – Contractor or Relevant Person)
Name of Contractor/Relevant Person Specified on Employment Permit:

Name of New Contractor/New Relevant Person:

Address of New Contractor/New Relevant Person:

Registration Number of new Contractor under the Companies Acts, Limited Partnerships Act 1907, Industrial and Provident Societies Acts 1893 to 1978, Friendly Societies Acts 1896 to 1977 or the Trade Union Acts 1871 to 1990, if relevant or applicable:

I, Contractor, hereby notify the Minister for Jobs, Enterprise and Innovation of a Change of Name of Contractor/Relevant Person under section 8(8) of the Employment Permits Act 2006 (as amended). I confirm that the contract services agreement, the subject of the Employment Permit, is still in force.

Signed: ____________________________ Date: ____________________________
Contractor currently specified on Employment Permit

We hereby confirm that:
(i) the employment of the foreign national who is the holder of this Employment Permit has been transferred to this New Contractor, or
(ii) the foreign national continues to provide a service as part of the contract service agreement to this new Relevant Person

and that the terms, conditions, description and location of employment as specified on this employment permit remain the same.

Signed: ____________________________ Date: ____________________________
New Contractor/New Relevant Person

Signed: ____________________________ Date: ____________________________
Foreign National/Holder of Employment Permit
Form T

Notification of change of name of employer under section 8(8) of Principal Act

An Roinn Post, Fiontar agus Náilalocha
Department of Jobs, Enterprise and Innovation

Notification of Change of Name of Employer under the Employment Permits Act 2006 (as amended)

This form is to be used by Employers who currently employ a foreign national on foot of a valid Green Card or Critical Skills Employment Permit, Work Permit or General Employment Permit, Spousal/Dependant or Dependant/Partner/Spouse Employment Permit, Reactivation Employment Permit, Sport and Cultural Employment Permit, Internship Employment Permit or an Exchange Agreement Employment Permit Employment Permit, in the case of a transfer of the business within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003).

In line with section 8(8) of the Employment Permits Act 2006 (as amended) the notification of change of name of an Employer on an Employment Permit shall be made immediately following the transfer of the business. Failure to notify the Minister may lead to the refusal of any future renewals of that Employment Permit applied for under section 20 of the Employment Permits Act 2006 (as amended).

1. The completion of this form is to be arranged by the Employer currently specified on the Employment Permit and to be signed by:
   (i) the Employer specified on the Employment Permit,
   (ii) the New Employer taking over the business under the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and
   (iii) the Foreign National, who is the holder of the Employment Permit.

2. You must attach the following documents to this notification when submitting it to the Employment Permits Section:
   (i) Letter from your Solicitor/Accountant confirming:
       • that the transfer comes within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and
       • the date of the transfer,
   (ii) Registration Details for the New Employer name:
       • A form P30 which was returned to the Revenue Commissioners within the last 3 months or a receipt for such return, whether issued through the Revenue Online Service (ROS) or otherwise or in the case of a new employer who has not made returns to the Revenue Commissioners an official letter from the Revenue Commissioners confirming registration as an employer, and
   (iii) The Original and the Certified Copy of the Employment Permit.

3. This form, together with the documents specified, should be sent to the Employment Permits Section, Department of Jobs, Enterprise and Innovation, Davitt House, 65A Adelaide Road, Dublin 2.

4. Once the Employment Permits Section are satisfied, following examination of this notification and the supporting documentation, that the change of name arises from a Transfer of Undertaking, within the meaning of the European Communities (Protection of Employees on Transfer of Undertakings) Regulations 2003 (S.I. No. 131 of 2003), and the new Employer is registered with the Revenue Commissioners and the Companies Registration Office/Registry of Friendly Societies if applicable, the relevant Employment Permit will be re-issued with the new Employer's name.
To be completed in respect of a change of name of an Employer on a Green Card or Critical Skills Employment Permit, Work Permit or General Employment Permit, Spousal/Dependant or Dependant/Partner/Spouse Employment Permit, Reactivation Employment Permit, Sport and Cultural Employment Permit, Internship Employment Permit or an Exchange Agreement Employment Permit.

PLEASE COMPLETE IN BLOCK CAPITALS

Application ID or Employment Permit Number: ________________________________

Foreign National/Employment Permit Holder's Name: ________________________________

Name of Employer Specified on Employment Permit:

_________________________________________________________________________

Name of New Employer:

_________________________________________________________________________

Address of New Employer:

_________________________________________________________________________

Registration Number of new Employer under the Companies Acts, Limited Partnerships Act 1907, Industrial and Provident Societies Acts 1893 to 1978, Friendly Societies Acts 1896 to 1977 or the Trade Union Acts 1871 to 1990, if relevant or applicable:

_________________________________________________________________________

I, Employer, hereby notify the Minister for Jobs, Enterprise and Innovation of a Change of Name of Employer under section 8(8) of the Employment Permits Act 2006 (as amended).

Signed: ___________________________ Date: ___________________________
Employer Currently Specified on Employment Permit

We hereby confirm that the employment of the foreign national who is the holder of this Employment Permit has been transferred to this new employer and that the terms, conditions, description and location of employment as specified on this Employment Permit remain the same.

Signed: ___________________________ Date: ___________________________
New Employer

Signed: ___________________________ Date: ___________________________
Foreign National/Holder of Employment Permit

TDUEP002/15
GIVEN under my Official Seal,


Richard Bruton

RICHARD BRUTON,
Minister for Jobs, Enterprise and Innovation.
EXPLANATORY NOTE

(This note is not part of the Instrument and does not purport to be a legal interpretation.)

These Regulations amend the Employment Permits Regulations 2014 to provide for the following:

Where a copy of a P30 is required to be submitted with an application for the grant or renewal of an employment permit, or notification of change of name following transfer of undertakings, the preceding period within which that P30 was returned to the Revenue Commissioners is increased from 2 months to 3 months.

The expiry date contained on the photocopy of the permit holder’s passport required for renewal of an employment permit is reduced from 12 months or more to 3 months or more after the date of application for renewal.

The types of employment permit which may be considered for employments as executive chefs, head chefs, sous chefs and specialist chefs, specialising in a cuisine originating in a state which is not a Member State of the EEA.

The maximum number of General Employment Permits that may be granted in respect of employment as a boner (meat), and the minimum remuneration applying.

Schedule 2 — changes to Part B to provide for the opening of registers for occupational therapists, speech and language therapists, and dieticians.

Schedule 3 — changes to the list of employments in respect of which there is a shortage in respect of qualifications, experience or skills which are required for the proper functioning of the economy.

Schedule 4 — changes to the list of employments in respect of which an employment permit shall not be granted.

Schedule 6 — amendments made to application forms for the grant and renewal of employment permits, forms notifying dismissal by reason of redundancy and change of name, and form submitting decision for review.

These Regulations also revoke the Employment Permits (Amendment) Regulations 2014.

These Regulations may be cited as the Employment Permits (Amendment) Regulations 2015.

These Regulations come into operation on 1 September 2015.