

STATUTORY INSTRUMENTS.

S.I. No. of 2015

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EMPLOYMENT PERMITS (AMENDMENT) REGULATIONS 2015

S.I. No. of 2015

EMPLOYMENT PERMITS (AMENDMENT) REGULATIONS 2015

I, 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 " \in 13.31," for " \in 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.

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

Profession	Regulatory body responsible for registration of qualifications		
Medical Practitioner	Medical Council of Ireland		
Nurse and Midwife	Nursing and Midwifery Board of Ireland		
Security Officer	Private Security Authority		

Part B

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

Profession	Regulatory body or Minister of Government responsible for registration or recognition of qualifications		
Dentist	Dental Council		
Diagnostic or Therapeutic Radiographer	Radiographers Registration Board, CORU		
Dietician	Dieticians Registration Board, CORU		
Occupational Therapist	Occupational Therapists Registration Board, CORU		
Psychologist	Minister for Health		
Speech and Language Therapist	Speech and Language Therapists Registration Board, CORU		
Biochemist	Minister for Health		
Chiropodist/Podiatrist	Minister for Health		
Environmental Health Officer	Minister for Health		
Social Worker	Social Workers Registration Board, CORU		
Medical Scientist	Academy of Medical Laboratory Sciences		
Physiotherapist	Irish Society of Chartered Physiotherapists		
Emergency Medical Technician, Paramedic & Advanced Paramedic	Pre-Hospital Emergency Care Council		
Pharmacist	Pharmaceutical Society of Ireland		

Profession	Regulatory body or Minister of Government responsible for registration or recognition of qualifications
Optometrist & Dispensing Optician	Opticians Board
Veterinary Practitioner & Veterinary Nurse	Veterinary Council of Ireland

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

Profession	Regulatory body or Minister of Government responsible for registration or recognition of qualifications
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
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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

SOC-3	Employment category	SOC-4	Employments
	Natural and Social Science Professionals	2111	Chemical scientists in manufacturing (including food & beverages, medical devices), product development, clinical covigilance, or biotechnology or related and relevant specialist skills, qualifications or experience
		2112	Medical laboratory scientists Biological scientists and biochemists in manufacturing (including food & beverages, medical devices), product development, clinical co-vigilance, or biotechnology or related and relevant specialist skills, qualifications or experience
		2113	Physical scientists in manufacturing (including food & beverages, medical devices), product development, clinical covigilance, or biotechnology or related and relevant specialist skills, qualifications or experience
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

SOC-3	Employment category	SOC-4	Employments
		2126	Design and development engineers specialising in: • Quality control, or validation and regulation engineering (high tech industry; food and beverages), or • 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
		2127	Production and process engineers specialising in: • Quality control, or validation and regulation engineering (high tech industry; food and beverages), or • Chemical process engineering, or • Process automation engineering, or • Power generation, transmission and distribution, or • Related and relevant specialist skills, qualifications or experience
113	ICT Professionals	1136	Information technology and telecommunications directors
213		2133	IT specialist managers
		2134	IT project and programme managers
		2135	IT business analysts, architects and systems designers
		2136	Programmers and software development professionals
		2137	Web design and development professionals
		2139	All other ICT professionals
221	Health Professionals	2211	Medical practitioners
		2217	Medical radiographersVascular technologistsRadiation therapists
		2219	Audiologists
118	Health and Social Services Managers and Directors	1181	Senior health services and public health managers and directors
223	Nursing and Midwifery Professionals	2231	 Registered Nurses (RGN, MHN, ID and Children's nurses) Clinical Nurse Specialists Clinical Nurse Managers Advanced Nursing Practitioners
		2232	 Registered Midwives Clinical Midwife Specialists Clinical Midwife Managers Advanced Midwife Practitioners
222	Therapy Professionals	2229	Orthoptists
321	Health Associate Professionals	3218	ProsthetistsOrthotists
242	Business, Research and Administrative Professionals	2421	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

SOC-3	Employment category	SOC-4	Employments
		2423	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
		2424	Business and financial project management professionals specialising in finance & investment analytics, risk analytics, credit, fraud analytics or related and relevant specialist skills, qualifications or experience
		2425	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
246	Quality and Regulatory Professionals	2461	Quality control and planning engineers
		2462	Quality assurance and regulatory professionals
		2463	Environmental health professionals
354	Sales, Marketing and Related Associate Professionals	3542	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

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

SOC-3	Categories of employment	SOC-4	Employment
122	Managers in Hospitality and Leisure Services	1221	Hotel and accommodation managers
	Leisure Services	1223	Restaurant and catering establishment managers
		1224	Publicans and managers of licensed premises
		1225	Leisure and sports facilities managers
		1226	Travel agency managers
124	Managers in Health and Care Services	1242	Residential, day and domiciliary care managers
125	Managers in Other Services	1251	Property, housing and estate managers
	Services	1252	Garage managers
		1253	Hairdressing and beauty salon managers
		1254	Shopkeepers — wholesale and retail
		1255	Waste disposal and environmental services managers
		1259	Other managers in other services (includes betting shop manager, graphic design manager, library manager, plant hire manager, production manager)
Therapy Profess	Therapy Professionals	2221	Physiotherapists (with the exception of a physiotherapist affiliated to a particular sporting organisation applying for a Sport and Cultural Employment Permit)
		2222	Occupational therapists
		2223	Speech and language therapists
		2229	Other therapy professionals (with the exception of orthoptists and chiropractors who are members of the Chiropractic Association of Ireland)
244	Welfare Professionals	2442	Social workers
		2443	Probation officers
		2449	Other welfare professionals
311	Science, Engineering and Production Technicians	3114	Building and civil engineering technicians
312	Draughtspersons and Related Architectural Technicians	3121	Architectural and town planning technicians
	Technicians	3122	Draughtspersons
321	Health Associate Professionals	3213	Paramedics
	1 TOTESSIONAIS	3216	Dispensing opticians

SOC-3	Categories of employment	SOC-4	Employment
		3217	Pharmaceutical technicians
		3218	Dental technicians
		3219	Other health associate professionals (includes Acupuncturists, Homeopaths, Hypnotherapists, Massage therapists, Reflexologists, Sports therapists)
323	Welfare and Housing Associate Professionals	3231	Youth and community workers
	Tiolessionais	3233	Child and early years officers
		3234	Housing officers
		3235	Counsellors
		3239	Other welfare and housing associate professionals
331	Protective Service Occupations	3311	NCOs and other ranks
	Occupations	3312	Police officers (sergeant and below)
		3313	Fire service officers (watch manager and below)
		3314	Prison service officers (below principal officer)
		3315	Police community support officers
		3319	Other protective service associate professionals
344	Sports and Fitness Occupations	3443	Fitness instructors
352	Legal Associate Professionals	3520	Legal associate professionals
354	Sales, Marketing and Related Associate Professionals	3544	Estate agents and auctioneers
	Frotessionals	3546	Conference and exhibition managers and organisers
356	Public Services and Other Associate	3561	Public services associate professionals
	Professionals	3563	Vocational and industrial trainers and instructors (with the exception of mobility instructors for the visually impaired)
		3564	Careers advisers and vocational guidance specialists
		3565	Inspectors of standards and regulations
		3567	Health and safety officers
411	Administrative Occupations: Government and Related Organizations	4112	National government administrative occupations
	Organisations	4113	Local government administrative occupations

SOC-3	Categories of employment	SOC-4	Employment
412	Administrative Occupations: Finance	4122	Book-keepers, payroll managers and wages clerks
			(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)
		4123	Bank and post office clerks
		4124	Finance officers
		4129	Other financial administrative occupations
413	Administrative	4131	Records clerks and assistants
	Occupations: Records	4132	Pensions and insurance clerks and assistants
		4135	Library clerks and assistants
		4138	Human resources administrative occupations
415	Other Administrative	4151	Sales administrators
	Occupations	4159	Other administrative occupations
416	Administrative Occupations: Office Managers and Supervisors	4161	Office managers
		4162	Office supervisors
421	Secretarial and	4211	Medical secretaries
	Related Occupations	4213	School secretaries
		4214	Company secretaries
		4215	Personal assistants and other secretaries
		4216	Receptionists
		4217	Typists and related keyboard occupations
511	Agricultural and	5111	Farmers
	Related Trades	5112	Horticultural trades
		5113	Gardeners and landscape gardeners
		5114	Groundsmen and greenkeepers
		5119	Other agricultural and fishing trades
521	Metal Forming, Welding and Related Trades	5211	Smiths and forge workers
	Traues	5212	Moulders, core makers and die casters
		5213	Sheet metal workers
		5214	Metal plate workers, and riveters
		5216	Pipe fitters
522	Metal Machining, Fitting and Instrument Making Trades	5225	Air-conditioning and refrigeration engineers

SOC-3	Categories of employment	SOC-4	Employment
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)
		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
	Electronic Trades	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	5312	Bricklayers and masons
	building trades	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
	Trades	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 boner (meat))
		5432	Bakers and flour confectioners
		5433	Fishmongers and poultry dressers

SOC-3	Categories of employment	SOC-4	Employment
		5434	Chefs
			(with the exception of—
			(a) executive chefs,(b) head chefs,(c) sous chefs, and(d) specialist chefs
			specialising in cuisine originating from a state which is not a Member State of the EEA and working in establishments other than fast food outlets)
		5435	Cooks
		5436	Catering and bar managers
544	Other Skilled Trades	5441	Glass and ceramics makers, decorators and finishers
		5442	Furniture makers and other craft woodworkers
		5443	Florists
		5449	All other skilled trades
612	Childcare and Related Personal Services	6121	Nursery nurses and assistants and playworkers
	Services	6122	Childminders and related occupations
		6125	Teaching assistants
		6126	Educational support assistants
613	Animal Care and Control Services	6131	Veterinary nurses
	Control Services	6132	Pest control officers
		6139	Other animal care services occupations (includes work riders)
614	Caring Personal Services	6141	Nursing auxiliaries and assistants
	Services	6142	Ambulance staff (excluding paramedics)
		6143	Dental nurses
		6144	Houseparents and residential wardens
		6145	Care workers and home carers (with the exception of a carer in a private home)
		6146	Senior care workers
		6147	Care escorts
		6148	Undertakers, mortuary and crematorium assistants
621	Leisure and Travel Services	6211	Sports and leisure assistants
	Sel vices	6212	Travel agents
		6214	Air travel assistants
		6215	Rail travel assistants
		6219	Other leisure and travel service occupations
622	Hairdressers and Related Services	6221	Hairdressers, barbers, and related occupations

SOC-3	Categories of employment	SOC-4	Employment
		6222	Beauticians and related occupations
623	Housekeeping and Related Services	6231	Housekeepers and related occupations
	Trelated Services	6232	Caretakers
624	Cleaning and Housekeeping Managers and Supervisors	6240	Cleaning and housekeeping managers and supervisors
711	Sales Assistants and Retail Cashiers	7111	Sales and retail assistants
	Retail Cashlers	7112	Retail cashiers and check-out operators
		7113	Telephone salespersons
		7114	Pharmacy and other dispensing assistants
		7115	Vehicle and parts salespersons and advisers
712	Sales Related	7121	Collector salespersons and credit agents
	Occupations	7122	Debt, rent and other cash collectors
		7123	Roundspersons and van salespersons
		7124	Market and street traders and assistants
		7125	Merchandisers and window dressers
		7129	Other sales related occupations
713	Sales Supervisors	7130	Sales supervisors
721	Customer Service	7211	Call and contact centre occupations
	Occupations		(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, where the employment is supported by an enterprise development agency and is in—a customer service and sales role with relevant product knowledge, a specialist online digital marketing and sales role, or a specialist language support and technical sales support role)
		7213	Telephonists
		7214	Communication operators
		7215	Market research interviewers
		7219	Other customer service occupations
722	Customer Service Managers and Supervisors	7220	Customer service managers and supervisors
811	Process Operatives	8111	Food, drink and tobacco process operatives
		8112	Glass and ceramics process operatives
		8113	Textile process operatives
		8114	Chemical and related process operatives
		8115	Rubber process operatives
		8116	Plastics process operatives
		8117	Metal making and treating process operatives

SOC-3	Categories of employment	SOC-4	Employment
		8118	Electroplaters
		8119	Other process operatives
812	Plant and Machine	8121	Paper and wood machine operatives
	Operatives	8122	Coal mine operatives
		8123	Quarry workers and related operatives
		8124	Energy plant operatives
		8125	Metal working machine operatives
		8126	Water and sewerage plant operatives
		8127	Printing machine assistants
		8129	Other plant and machine operatives
813	Assemblers and Routine Operatives	8131	Assemblers (electrical and electronic products)
		8132	Assemblers (vehicles and metal goods)
		8133	Routine inspectors and testers
		8134	Weighers, graders and sorters
		8135	Tyre, exhaust and windscreen fitters
		8137	Sewing machinists
		8139	Other assemblers and routine operatives
814	Construction Operatives	8141	Scaffolders, stagers and riggers
	Operatives	8142	Road construction operatives
		8143	Rail construction and maintenance operatives
		8149	Other construction operatives
821	Road Transport Drivers	8211	Large goods vehicle drivers
	Directs	8212	Van drivers
		8213	Bus and coach drivers
		8214	Taxi and cab drivers and chauffeurs
		8215	Driving instructors
822	Mobile Machine Drivers and	8221	Crane drivers
	Operatives	8222	Fork-lift truck drivers
		8223	Agricultural machinery drivers
		8229	Other mobile machine drivers and operatives
823	Other Drivers and	8231	Train and tram drivers
	Transport Operatives	8232	Marine and waterways transport operatives
		8233	Air transport operatives
		8234	Rail transport operatives
		8239	Other drivers and transport operatives
911	Elementary Agricultural Occupations	9111	Farm workers

SOC-3	Categories of employment	SOC-4	Employment
		9112	Forestry workers
		9119	Other fishing and other general agriculture occupations
912	Elementary Construction Occupations	9120	Elementary construction occupations
913	Elementary Process Plant Occupations	9132	Industrial cleaning process occupations
	Tiant Occupations	9134	Packers, bottlers, canners and fillers
		9139	Other elementary process plant occupations
921	Elementary Administration Occupations	9211	Postal workers, mail sorters, messengers and couriers
		9219	Other elementary administration occupations
923	Elementary Cleaning Occupations	9231	Window cleaners
	Occupations	9232	Street cleaners
		9233	Cleaners and domestics
		9234	Launderers, dry cleaners and pressers
		9235	Refuse and salvage occupations
		9236	Vehicle valeters and cleaners
		9239	Other elementary cleaning occupations
924	Elementary Security	9241	Security guards and related occupations
	Occupations	9242	Parking and civil enforcement occupations
		9244	School midday and crossing patrol occupations
		9249	Other elementary security occupations
925	Elementary Sales	9251	Shelf fillers
	Occupations	9259	Other elementary sales occupations
926	Elementary Storage Occupations	9260	Elementary storage occupations
927	Other Elementary	9271	Hospital porters
	Services Occupations	9272	Kitchen and catering assistants
		9273	Waiters and waitresses
		9274	Bar staff
		9275	Leisure and theme park attendants
		9279	Other elementary services occupations
All	Work in the private home	All	Domestic operatives

Note:

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

Regulation 10

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 Roinn Post, Fiontar agus Nuálaíochta Department of Jobs, Enterprise and Innovation

CSEP002/15

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 employments 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.

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).

Recent Passport Photograph X1

Please print
Foreign National's name
on
back of photograph
and staple here

Who is applying for the permit (i.e. Who is the application)	nt)	nt
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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

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

Accessor Design	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
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
	Questions 6, 7, 8 and	t a Limited Company, please complete 9, d Company, please proceed to Question 10.
6. If the Person who has made the offer of e	mployment is not a registered comp	any, please indicate what type of entity it is:
Sole Trader Partnership	Other (please specify)	0.000
Please state the full name of the Person v employment:	who has made the offer of	

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			they hold appropriate permission from the Mini-
	to operate a business in the S	If Yes, please	
Yes No	Not applicable	specify	Justice and Equality confirming your permission to
			ents for Supporting Documentation).
. Registered name of Com	pany/Business:		al chilainta
. Trading name of busines	s (if different):		ALL STATISTICS.
. Nature of business:		81DONE/4	It 46 v
. Company/Business Addi	ress:		
Address 1:		alori oli	TIME
Address 2:		A	164)
Town:		SUPERIOR	THE .
County:		000711001	Hillian
Country:		100	104
. Telephone umber:		15.	Fax:
i. Mobile Phone Number:			
. E-mail:			
. Website:			
MODELE CAPEAN SERVICE	Swiss nationals (including		nber of non-EEA nationals currently
Irish) currently employed made the offer of employ		the	ployed by the Person who has made offer of employment:
Irish) currently employed made the offer of employ the EEA comprises the Mem	yment: ber States of the European Unic cuments outlined in Requiren	the on together with Iceland	ployed by the Person who has made offer of employment: I, Norway & Liechtenstein. accumentation under "(A) Requirements for Person
Irish) currently employed made the offer of employ the EEA comprises the Mem	yment: ber States of the European Unic cuments outlined in Requiren has mad	the on together with Iceland ment for Supporting D le the offer of employi	ployed by the Person who has made offer of employment: I, Norway & Liechtenstein. accumentation under "(A) Requirements for Person
Irish) currently employed made the offer of employ the EEA comprises the Mem ou must now attach the do	yment: ber States of the European Unic cuments outlined in Requiren has mad	the on together with Iceland ment for Supporting D le the offer of employi	ployed by the Person who has made offer of employment: i, Norway & Liechtenstein. ocumentation under "(A) Requirements for Personent."
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Address 2:	month-pt fits	ANT		
Town:	wn: SIDCH TARIFALA			
County:	county:			
Country:	moothigh FF	A A St.		
1. Telephone No.:	12: Mobile Pho	ne No.:		
3. Please provide the Foreign Natio	onal's PPS Number, if available:			
4. E-mail address:	<u> </u>	0		
5. Is the Foreign National currently	in the State?	Yes No		
If 'Yes' on what basis are they complete GNIB card details, as	currently in the State, please describe, and srequested, below:	Security of		
	#Lour publicum			
Enter be	low details exactly as they appear on the Foreig	n 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 nu	umber then please supply a conv of the current		
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3. Has the Foreign National been in the State on a previous occasion without permission?	Yes No
4. Is the Foreign National currently employed in the State?	Yes No
If 'Yes' please describe on what permission they have to be employed:	SOCCEMENTAL TO
FILED SHITHS	
5. Has the Foreign National been employed in the State previously?	Yes No
If 'Yes' please describe on what permission they had to be employed:	0.000 EARITON
() the resulting	
6. 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?	stroy arethe
7. 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 Requirements."	Documentation under "(B) Foreign National

Part	Three	Details of R	edundancy
the meanin	g of section 9 of the Re	no has made the offer of employment in respect	of any dismissals by reason of redundancy within ismissal was attributable wholly or mainly to the
Please con	plete and sign the decl	aration below in full.	
redundant		n who has made the offer of employment been m is the subject of this Employment Permit applica	
last six mo that emplo application	nths please outline the yment that have been m	redundant in the employment that is the subject reason(s) for the redundancies. This should inc nade redundant and explain how the position, wh itions in that employment made redundant. Plea	ude information on the numbers of positions in ich is the subject of this Employment Permit
			,
I hereby so	lemnly declare the above	ve information to be true and accurate.	
made the o			
Name (in B	LOCK CAPITALS):		Title:
Position He	eld:	-4 A F - C - 1 1 1 1 4	Date:

Part Four	Detai	ls of Emplo	yment
. Title of Job:	8.67	DOCAFITALE	
	e completed by Health i and Part B of Schedule		curity Personnel who are liste gulations.
. Regulatory Body:	9	0 (1.9) (1.4)	
. Registration/Pin/ Licence No.:			
If the application is in respect of Regis please provide your registration detail	stered Doctors, Nurses or Secur is above. Documentary evidence	ity Personnel listed in Part A will not be required.	of Schedule 2 in the Principal Regulation
Applications for other Health Profession with the appropriate medical body or i			ns must provide a copy of their registrat lth.
Place(s) at which the employment	concerned is to be carried out	t: 8	51 S (5 10 17 1 to)
	- U	net hirone	
Proposed Period of Employment Permit (2 years)			
6. Proposed Start Date*:	3 0 3 0 1		
We recommend all Employment Permi	t applications be submitted to th	e Department at least 12 wee	eks before the proposed start date of
mployment.			
Gross Annual Remuneration*	E	(Gross remuneration premium payment)	on excludes overtime or ts)
. Gross Annual Salary: (if different from above)	E		
. Gross Weekly Salary:	ē	10. Hourly Rate of Pay:	E
Deductions from Gross Weekly Salary:	€	Please specify purpose of deductions:	α Ι
2. Health Insurance":	€	Please specify name of Health Insurance	SIMPLE WASTING
Annual Remuneration this must be veril			nsurance is being included in the Gross ational Employment Rights Authority
NERA) inspection: Health Insurance can only be consider Undertakings referred to in section 14 o			in the Register of Health Benefits
Number of hours of work per week*:	The Health Insulative Act, 1995		
Please note that for the purposes of E	mployment Permit Applications,	the standard working week is	s 39 hours per week.
4. What are the main functions of th	is job:	- (- (- t	
	1.0	A A TOTAL	
5. Please detail the qualifications, sl experience required for this job:	kills, knowledge and		
	1 8 (10)2-0	160	

lease detail the relevant qualifications, skills, nowledge and experience of the Foreign Nation	nal;	47.60%	West West		
	SECON CHRIT	HC3-			
	stant plat				
id you use an Agent/Recruitment Agency to rec	cruit the Foreign Nationa	1?	Yes	No	
If 'Yes' please provide name and address of Agent/Recruitment Agency:	the	13,650,6,6	A PI M I Lo		
1	- 0 , 20 119	4.0			
	EABC(E48))	A S			
If 'No' please provide details of the recruitment method:		(c) (c)	1010		
	STORE CAR	0.5			-4
must now attach the documents outlined in Re	suitement for Comments		under WOLA	slication De-	W.

Part Five		R	equire	ment	for P	aym	ent		
Is a fee payable for this Empl application?	loyment Permit		Yes				No		
If No, please indicate on wha	t basis no fee i	s applicable?							
The Person who made the of applicant and has charitable Commissioners				n	ion is in res ational mar tnership wit	ried to or	in a civil	9	
Dependant/Partner/Spouse E	imployment Pe	rmit		Exch	ange Agreei	ment Emp	oloyment Permit		
If no fee is payable proceed t	to Part Six.								
		11111111	Deta	Is of	Payn	nent			
Important Note for Business In accordance with D/Finance of postal orders from business us based payments from business Transfer (EFT). Business user applicants for an e-mail address to request	Circular 1/2013, ers in respect of s users and has employment p	from 19 Septe services rend set up a commer ermits should	ember 2014 (e-C dered. To facilita nercial bank acc d complete the	eay) the publite this, the E ount into wh	Employment ich payment tails of Paye	Permits S s can be n er (Questi	ection will nade by E	no longe lectronic	Funds Funds , 7, and 8)
11) and Payers Declaration b Section as complete. An e-m the bank account into which the payment.	elow and paymail will issue to t	ent will be re he applicant a	equested when and their authoris	an applicati ed agent (if	on is accep applicable) g	ted into the	he Emplo	yment Pamount o	ermits f the fee di
Applicants, other than business Contact Details		inue to make	payment by che	que, bank dr	aft or postal	order and	must con	nplete all	details belo
Please indicate who is male payment:	king the		who has made of employment		Foreign N	ational		Other	
2. Title:	Mr	Mrs	Miss	Ms		Other (please state)		- 4
3. Name:			BL	31	F TI US				
4. Company (if applicable):			97	(₁					
5. Telephone Number:				6. Fax N	umber:				
7. Mobile Phone Number:									
8. E-mail:									
Payment Details									
9. Method of Payment:	Electronic F	unds	Cheque		Bank Dra	ft	Pos	stal Orde	r
10. Cheque No.									
11. Payment enclosed / Amount of Payment Due:	€								
Payment must be in the form o Clearing System. Cheques sho							titution op	erating w	ithin the In
Payer's Declarat	ion								
, the undersigned, agree tha (Under the Employment Permi fee paid).									
Payer's Signature: (Original signature required)		18 - 2 - 2		A		Date:	0, 0,	V 6	
Employment Permits Section is forwarded to the applicant for o 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:
- 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.

National: (Original signature required)		Title:	
Name (in BLOCK CAPITALS):	*LECKORISHTELY	Date:	
Your employment permit will	normally be posted to you at you	ur current address as in Part 2 of this Fo	rm.
Tick this box if you want your permit	to be posted to your current address.		
Tick this box if you want your permit stated in Part 1 of this Form.	to be posted to the Person who has made	de the offer of employment as	
Tick this box if you want your permit	to be posted to your Authorised Agent ((if applicable).	

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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 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) \$1000 E 00000-6 Name (in BLOCK CAPITALS): Title: E LINE N OF HILL CO 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).

block CAPITALS): Inderstand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an imployment Permit. Inature of Agent: Iginal signature required) Ent's Address for Correspondence: Address 1: Address 2: Town: Country: Country: E-mail address: Telephone number: Telephone number: Telephone number: Date:	1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	
riginal signature required) gent's Address for Correspondence: Address 2: Town: County: Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: permit the above named agent to act on my behalf in respect of this application and the offer of employment: permit the above named agent to act on my behalf in respect of this application and the offer of employment: permit the above named agent to act on my behalf in respect of this application. Generally a permit the above named agent to act on my behalf in respect of this application. Generally a permit the above named agent to act on my behalf in respect of this application.	gent Name i BLOCK CAPITALS):	Title:
riginal signature required) pent's Address for Correspondence: Address 1: Address 2: Town: County: Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: riginal signature required) the Foreign National, permit the above named agent to act on my behalf in respect of this application. gnature of Foreign National:		on my behalf, shall keep any personal document belonging to a holder of an
Address 2: Town: County: Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this applicationature of Person who has adde the offer of employment: Date: Date	ignature of Agent: riginal signature required)	Date:
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Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: riginal signature required) The Foreign National, permit the above named agent to act on my behalf in respect of this application. The Foreign National:	Address 2:	HEGE CHRITHES
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Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date: Date: the Foreign National, permit the above named agent to act on my behalf in respect of this application.	Country:	411-111-1-1011-L
the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date: Date: the Foreign National, permit the above named agent to act on my behalf in respect of this application.	E-mail address:	
the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this applications ignature of Person who has nade the offer of employment: Driginal signature required) The Foreign National, permit the above named agent to act on my behalf in respect of this application.	Telephone number:	
ignature of Foreign National:	ade the offer of employment:	Date:
	the Foreign National, permit the above named	agent to act on my behalf in respect of this application.
		Date:

Requirements for Supporting Documentation

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

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

 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 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,
- 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 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, 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, 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, and
 (b) a letter from a registered medical practitioner specialising in the area of illness of the person for whom the Foreign National will
 - (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 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 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 16(1)(df) 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.
- Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
- 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 / 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 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 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/Licence 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

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, 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 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.

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail:

employmentpermits@djei.le

Call Centre:

353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

Fax:

353-1-631 3268

Address: Davitt Hou

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.

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Form B

Application form for grant of Dependant/Partner/Spouse Employment Permit



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

DPSEP002/15

Dependant/Partner/Spouse **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:

- 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.
- 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).

Recent Passport Photograph X1

Please print Foreign National's name back of photograph and staple here.

		it (i.e. Who is the applicant)? I, an employer making an Employment Permit application may neable, from the foreign national. Inpleted for all applications)
	who has made of employment	Foreign National
If this is an applicatio	Health Pro n for a Health Professional listed Principal Regulations pleas	I in Part A or Part B of Schedule 2 in the
Part One		etails of Person who has

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

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If the Person who has m	ade the offer of employme	ent is not a registered co	ompany, p	please indicate what type of entity it is:
Sole Trader	Partnership	Other (please specif	y)	BLOCK-CARITALS
. Please state the full name employment:	ne of the Person who has r	made the offer of		BLOCK CARITALE
Please state the national employment:	lity of the Person who has	made the offer of		BLOCK CAPITALS
	ade the offer of employme y to operate a business in		, do they	hold appropriate permission from the Minis
Yes No	Not applicable	If Yes, plea		BLOCK CAPITALS
		entation from the Minister	for Justic	ee and Equality confirming your permission to or Supporting Documentation).
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Address 1:		6LOCK C	APITA	15
Address 2:		BLOCK C	AFITA	L8
Town:		BIECH C	Allie	13
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4. Telephone Number:			15. Fax:	
6. Mobile Phone Number:				
17. E-mail:				
18. Website:				
	r Swiss nationals (includin ed by the Person who has ovment:		employe	of non-EEA nationals currently d by the Person who has made of employment:

		f Foreign National
1. Passport Number:		
2. Expiry Date:	[E W W Y Y	Enter these details
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4. First Name:	BLOCK-CAPITALS	the Foreign National's passport.
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6. Family Name:	BUDDU CAPITALS	
7. Date of Birth:	D M M Y Y	8. Male: 9. Female:
Current Address (foreign a	address required if residing outside the State	a):
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Address 2:	(81,0)	18 VAPITALS
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Telephone No.:	10	2: Mobile Phone No.:
Please provide the Foreign	gn National's PPS Number if available:	
E-mail address:		
E-mail address:	urrently in the State?	Yes No
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0. Result Achieved: e.g. 2.1		
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2. Has the Foreign National sou previous occasion?	ght permission to land in the State on a	Yes No
If 'Yes' please describe on indicate whether or not per	what basis the permission was sought and mission was granted:	BLOCK CAPITALS
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3. Has the Foreign National bee permission?	n in the State on a previous occasion without	Yes No
4. Is the Foreign National currer	ntly employed in the State?	Yes No
If 'Yes' please describe on	what permission they have to be employed:	BLOCK CAPITALS
	BLOCK CAPITALS	
	n employed in the State previously?	Yes No
If 'Yes' please describe on	what permission they had to be employed:	BLOCK CAPITALS
le the Earniga National marrie	ed to, or in a civil partnership with, an Irish or	
EA national?	ed to, or in a civil partnership with, an insh or	Yes No
If 'Yes' what nationality is t	heir spouse/partner?	BLOCK CAPITALS
	ouse, civil partner or the dependant of, the or to the holder of any other type of	Yes No
You must now attach the	documents outlined in Requirement for Supporting	Documentation under "(B) Foreign National
	Requirements."	

DPSEP002/15

Part	Three	Details of	Redundancy
the meaning	of section 9 of the Redu	has made the offer of employment in rendancy Payments Act 1967 and where a), (b), (c), (d) or (e) of section 7(2) or to	espect of any dismissals by reason of redundancy within such dismissal was attributable wholly or mainly to the o section 21 of that Act.
Please com	plete and sign the declar	ation below in full.	
redundant i		ho has made the offer of employment the subject of this Employment Permi	
last six mor that employ application,	oths please outline the re- ment that have been made	ason(s) for the redundancies. This shall redundant and explain how the pos	subject of this Employment Permit application over the ould include information on the numbers of positions in tion, which is the subject of this Employment Permit int. Please continue on a separate sheet if required and
I hereby sol	emnly declare the above	information to be true and accurate.	
made the of employmen			
Name (in Bl	LOCK CAPITALS):	SINDWINEPITALS	Title:
Position He	ld:	BLOCKCAPITALS	Date: D O M M M

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Part Four	Details	of Emplo	oyment
. Title of Job:	-E100	CARTNES	
	be completed by Health Pro A and Part B of Schedule 2 i		curity Personnel who are liste gulations.
. Regulatory Body:	8.0	S SUPITOLE	
Registration/Pin/ Licence No.:			
If the application is in respect of Regi			of Schedule 2 in the Principal Regulatio
Applications for other Health Professi with the appropriate medical body or	ionals listed in Part B of Schedule 2 i. recognition of their qualifications fron	n the Principal Regulation the Department of Hea	ns must provide a copy of their registrati
Place(s) at which the employment	concerned is to be carried out:	9) (008-0000000000
	E (a c)	CAS(TA)(S	
Proposed Period of Employment Permit (maximum period of 2			
years) . Proposed Start Date*:	S D W M O I		
We recommend all Employment Perm	nit applications he submitted to the D	enartment at least 12 we	eks before the proposed start date of
mployment.	in applications be submitted to the D	spariment at least 12 we	ens before the proposed start date of
Gross Annual Remuneration*	€	(Gross remuneration premium payment	on excludes overtime or ts)
Gross Annual Salary: (if different from above)	ϵ		
Gross Weekly Salary:	€	10. Hourly Rate of Pay:	€
1. Deductions from Gross Weekly	€	Please specify purpose of deductions:	MI OCH CAPITALE
Salary:			
	€	Please specify name of Health Insurance Provider	BLOCK PARITALS
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Part Five		Require	ment	for Payr	ment		
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If No, please indicate on wh	at basis no fee is applic	cable?					1
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Commissioners				rtnership with an E			1
Dependant/Partner/Spouse	Employment Permit		Excl	nange Agreement E	mployme Perm		
If no fee is payable proceed	to Part Six.						
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Please indicate who is ma payment:		erson who has mad offer of employmen		Foreign Nationa	1	Othe	ır 🔃
2. Title:	Mr N	Mrs Miss		Ms Oth	er (please state)		
3. Name		В	DOSK OF	PUTAL6			
4. Company (if applicable):		9	DDF DF	Politik X (R)			
5. Telephone Number:			6. Fax	Number:			
7. Mobile Phone Number:							
8, E-mail:							
Payment Details							
9. Method of Payment:	Electronic Funds Transfer	Chequ	ie	Bank Draft	Р	ostal Orde	er
10. Cheque No.							
11. Payment enclosed / Amount of payment due:	€						
Payment must be in the form of Clearing System. Cheques sh						operating v	vithin the Iris
Payer's Declara	tion						
I, the undersigned, agree tha (Under the Employment Perm fee paid).							
Payer's Signature: (Original signature required)				Date:	n n	in a	8 (6)
Employment Permits Section forwarded to the applicant for the mandate form							

DPSEP002/15

Part Six

Signature of Foreign

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:
- 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.

National: Original signature required)		Title:
Name (in BLOCK CAPITALS):	BLOCK EAPITALS	Date: D M M N
our employment permit will	normally be posted to you at your	current address as in Part 2 of this Form.
ick this box if you want your permit	to be posted to your current address.	
Tick this box if you want your permit stated in Part 1 of this Form.	to be posted to the Person who has made t	the offer of employment as
Fick this box if you want your permit	to be posted to your Authorised Agent (if a	applicable).

Page 9

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 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

nade the offer of employment: Original signature required)		
lame (in BLOCK CAPITALS):	BENCHMARKE	Title:
Position Held:	A PROPERTY ALL	Date:
Your certified copy of the em		posted to you at your current address as
The Research of Street or	ployment permit will normally be Part 1 of this Form. d copy of the employment permit to be po	
ick this box if you want your certifie	Part 1 of this Form.	sted to your current address.
Tick this box if you want your certifie	Part 1 of this Form.	sted to your current address.

Authorisation of Agent	If no agent is represe	nting the applicant th	en this sed	ction to	be left b	lank.
If you (the applicant) wish a third party (ag privacy of data is respected, all parties m be copied any correspondence regarding	ust be in agreement with the nomination					
Agent Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Title:				
I understand that neither I, nor a person a Employment Permit.	cting on my behalf, shall keep any pers	onal document belo	nging to	a holde	er of an	
Signature of Agent: (Original signature required)		Date:	D E	M	M 8	Y
Agent's Address for Correspondence:						
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E-mail address:						
Telephone number:						
Signature of Person who has made the offer of employment: (Original signature required)		Date:	D : D	M	M	4
, the Foreign National, permit the above n	named agent to act on my behalf in resp	ect of this applicati	on.			
Signature of Foreign National: Original signature required)		Date:	0.0	M	M N	Ty

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,

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 3months 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

(C) Application Requirements

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

- 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 dependant, 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, or
- 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, or 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" 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, 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, 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, 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 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 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

- 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
- 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)(df) of the Employment Permits Act 2006, as amended. 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.
- Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
- 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.
- 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 / 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 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 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

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/Licence 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 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, 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 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

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@djei.ie

Call Centre: 353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

Fax: 353-1-631 3268

Address: Davitt House

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 C

Application form for grant of General Employment Permit



3. Business Name Registered Number

 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

If the Person who has made the offer of employment is a Charity, please

supply the Charity Number:

(if applicable):

Registration Number:

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

GEP002/15

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 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.

Recent Passport Photograph X1

Please print
Foreign National's name
on
back of photograph
and staple here.

Obtained from the Companies Registration Office

Obtained from the Registry of Friendly Societies

Obtained from the Revenue Commissioners

INCOMPLETE FORMS WILL BE RET	URNED TO THE APPLICANT	OR THE AUTHORISED AGENT (IF
APPLICABLE).		
Who is appl In accordance with Employment Pen	ying for the perm nits Act 2006, as amended, an to recover the fee, if applicab (This section MUST be con	
Person who hat the offer of em	F 12 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Foreign National
	Health Pro	ofessional
		d in Part A or Part B of Schedule 2 in the
Part One R		Details of Person who has offer of employment
1. Employer Registered Number:		Obtained from the Revenue Commissioners
Company Name Registered Numbe (if applicable):	r	Obtained from the Companies Registration Office

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.

Page 1

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Please state the full name or	Partnership	Other (please specify):	BLOCK CAPITALS		
1200031905110	of the Person who has ma	ade the offer of	BLOCK CAPITALS		
Please state the nationality employment:	of the Person who has n	nade the offer of	BLOCK CAPITALS		
If the Person who has mad for Justice and Equality to			they hold appropriate permission from the Mir		
Yes No	Not applicable	If Yes, please specify:	BLOCK DAPITALS		
			lustice and Equality confirming your permission to nts for Supporting Documentation).		
). Registered name of Comp	pany/Business:		BLOCK CAPITALS		
. Trading name of business	s (if different):		BLOOK CAPITALS		
2. Nature of business:		BLOCK CAP	ITALS		
3. Company/Business Addre	ess:				
Address 1:		BLOCK CAP	ITALE		
Address 2:		BLOCK CAP	BLOOK CAPITALS		
Town:					
County:		BLOCK CAP			
Country:		BLOCK CAP			
4. Telephone Number: 6. Mobile Phone		15. F	ax:		
Number:					
7. E-mail:					
B. Website:					
9. Number of EEA* and/or St	by the Person who has	emp	ber of non-EEA nationals currently sloyed by the Person who has made offer of employment:		
made the offer of employe					

Part Two	Details o	f Foreign National			
1. Passport Number:					
2. Expiry Date:	D 0 0 W V V	Enter these details			
3. Nationality:	BDGCR CARITALS	exactly as they appear on the Foreign National's			
4. First Name:	BUSEN DARITALE	passport.			
5. Middle Name(s):	BLOCK-CHRITALD				
6. Family Name:	BEGCK CABILOTE				
7. Date of Birth:	D D M W T T	8. Male: 9. Female:			
10. Current Address (fore Address 1:	ign address required if residing outside the State):	CCAPITALS			
Address 2:	BLOOM CAPITALS				
Town:	BLOOK CARCALS				
County:	OLDOW CAPITALS				
Country:	al acv	C-GAFITALS			
11. Telephone No.:	12:	Mobile Phone No.:			
13. Please provide the Fo	oreign National's PPS Number if available:				
14. E-mail address:					
15. Is the Foreign Nation	al currently in the State?	Yes No			
	sis are they currently in the State, please descri	be, and BLOCK CAFIFALS			
complete GNIB car	d details, as requested, below:				
	Enter below details exactly as they appear or	n the Foreign National's GNIB card*.			
GNIB Pin No.	D	ept. No.			
Lif the Foreign National is i Inmigration stamps and vi		ntification number then please supply a copy of the current			
If the Foreign Nation working lawfully du	nal has held consecutive employment permits f ring this time, s/he may be eligible to apply for a mmigration Service. However, if the Foreign Na	or an uninterrupted period of 5 years and has been a Stamp 4 permission to remain from the Irish ational is unable to obtain a Stamp 4, an employment			
	y submitting this application the Foreign Nation s that an employment permit is still required.	al confirms that s/he has considered the available			
Enter education details	of the Foreign National below, which are releva	ant to the Job Offer as stated in Part 4 of the application form			

18. Title of Course:	BLOCK CAPITALS	17. Date of Completion:
6. Title of Course.	BLOCK CAP	ITALS
9. Final Subjects Taken:	BLOCK CAPITALS	BLOCK CARITALS
	REDCK CARITALS	BLOCK CAPITALS
	BLOCK CAPITALS	BLOCK CAPITALS
	BLOCK CAPITALS	BLOCK CAPITALS
0. Result Achieved: e.g. 2.1		
Has the Foreign National previously State?	made an application for asylum in the	Yes No
2. Has the Foreign National sought per previous occasion?	mission to land in the State on a	Yes No
If 'Yes' please describe on what be indicate whether or not permission	asis the permission was sought and n was granted:	BLOCK CAPITALS
	BLOCK CAPITALS	
5. Has the Foreign National been emplo	DLOOK CAPITALS	Yes No
If 'Yes' please describe on what pe	ermission they had to be employed:	BLOCK CARITALS
	BLOCK CAPITALS	
6. Is the Foreign National married to or EA national?	in a civil partnership with an Irish or	Yes No
If 'Yes' what nationality is their spo	ouse/partner?	BLOCK CAPITALS
	civil partner or dependant of, the holder of any other type of permission to work	Yes No
	ents outlined in Requirement for Supporting D Requirements."	Occumentation under "(B) Foreign National

art inree	Details of i	Redundand	y
meaning of section 9 of the Redu	has made the offer of employment in respec undancy Payments Act 1967 and where such (a), (b), (c), (d) or (e) of section 7(2) or to secti	dismissal was attributable	
ase complete and sign the declar	ration below in full.		
	who has made the offer of employment been		
fundant in the employment that is er the last six months?	the subject of this Employment Permit appli	ication Yes	No
t six months please outline the re it employment that have been ma	edundant in the employment that is the subje cason(s) for the redundancies. This should in de redundant and explain how the position, v ions in that employment made redundant. Pl	nclude information on the n which is the subject of this	umbers of positions in Employment Permit
nature of Person who has de the offer of	information to be true and accurate.	7	
ployment: iginal signature required) me (in BLOCK CAPITALS):	(ECH) o CHENTHIS		
III DECON CAPTIALS).	- Settle Feedball	1),(0,1)	
osition Held:	FARES EAFSTALS	Date:	80 0 V

Part Four	Ī	etail	s of Emplo	oyment
1. Title of Job:		-0.00	CE CAPTIALS	
			rofessionals and Se 2 in the Principal Re	ecurity Personnel who are listed egulations.
2. Regulatory Body:		H1)	DECEMBITALS	
3. Registration/Pin/ Licence No.:				
If the application is in respect of Regi- please provide your registration detail				of Schedule 2 in the Principal Regulation
Applications for other Health Professi with the appropriate medical body or				ons must provide a copy of their registrationalth.
4. Place(s) at which the employment	concerned is to be	carried out;	31.	OEK EXPITALS:
		810	CH CAPITALS	
5. Proposed Period of Employment Permit (maximum of 2 years)				
6. Proposed Start Date*:	0 0 0	W V		
*We recommend all Employment Permi employment.	it applications be sub	mitted to the	Department at least 12 we	eks before the proposed start date of
7. Gross Annual Remuneration*	€		(Gross remunerati premium paymer	ion excludes overtime or nts)
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:	81008-0-0-113
12. Health Insurance*:	€		Please specify name of Health Insurance Provider:	BLOCK CAPITALS
	fiable by way of supp	orting docum	on the payslips. If Health I entation at renewal stage;	nsurance is being included in the Gross such documentation may also be required
* Health Insurance can only be consider Undertakings referred to in section 14 of			urance is a person entered	d in the Register of Health Benefits
13. Number of hours of work per week*:				
* Please note that for the purposes of E	mployment Permit A	oplications, th	ne standard working week i	is 39 hours per week.
14. What are the main functions of th	is job:		91009	CAPITALS
		DIOLES	EARN ALD	
15. Please detail the qualifications, s experience required for this job:	kills, knowledge and	d	01000	CAPATAN E
		14854	SAPRYALE	
	-	# L O'O et 2	TOP (TOLD	

lease detail the relevant qualifications, skills, nowledge and experience of the Foreign Nationa	d:
	ALOLD MAPATALS
	PLOTE CEPTIALS
	SLOTE CAPITALS
id you use an Agent/Recruitment Agency to recr	ruit the Foreign National?
If 'Yes' please provide name and address of the Agent/Recruitment Agency:	ne relocation de Fatalica
	action (periodical)
	elock-b/FfbN/s
If 'No' please provide details of the recruitment method:	0.000.0490.00
	WENCE CHANGE
erson who has made the offer of employment in the ne exemptions provided below, to offer the employn attizen by way of a Labour Market Needs Test. The	ment that is the subject of the General Employment Permit application to an Irish Labour Market Needs Test must be conducted within the 90 day period preced
Person who has made the offer of employment in the exemptions provided below, to offer the employn citizen by way of a Labour Market Needs Test. The ate of the application. Applications should not be sul	he case of a General Employment Permit application is required in all cases, other ment that is the subject of the General Employment Permit application to an Irish Labour Market Needs Test must be conducted within the 90 day period precedub inhitted unless this Labour Market Needs Test has been completed.
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See Requirement for Supporting Documentation "(C) Application Requirements" for further information on advertising the job vacancy and further documentary requirements.

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Part Five		Require	ment i	for Pay	ment	3	
Is a fee payable for this Emp application? If No, please indicate on wha		Yes able?			N	0	
The Person who made the of applicant and has charitable Commissioners			nat	is in respect of ional married to ership with an El	or in a civ	il	
Dependant/Partner/Spouse E	Employment Permit		Exchan	ge Agreement E	mploymer Perm		
If no fee is payable proceed	to Part Six.						
		Deta	ils of l	Paymer	nt		
. Important Note for Busines In accordance with D/Finance postal orders from business us based payments from business Transfer (EFT). Business user applicants for an e-mail address to request 11) and Payers Declaration b Section as complete. An e-m the bank account into which the payment.	Circular 1/2013, from 19 s ters in respect of services s users and has set up a of r employment permits s t payment must be provi telow and payment will i thail will issue to the applic	September 2014 (e-Dispendent of aciditate commercial bank accommercial baccommercial bank accommercial bank accommercial bank accommercial	ay) the public sethis, the Em- bunt into which Contact Detai They should a in application ad agent (if ap	ployment Permits payments can be also of Payer (Que also complete Pa is accepted into plicable) giving de	Section we made by stions 1, 2 syment De the Empletails of the	ill no longe Electronic 2, 3, 4, 5, 6, etails (Ques loyment Pe e amount of	r accept paper Funds , 7, and 8) – stion 9 and ermits f the fee due,
Applicants, other than business	THE RESERVE AND ADDRESS OF THE PARTY OF THE	ake payment by chec	ue, bank draft	or postal order a	nd must co	mplete all	details below.
Please indicate who is ma payment:	king the Per	rson who has made offer of employment		Foreign National		Other	
2. Title:	Mr M	rs Miss	Ms	Othe	er (please state)		
3. Name:		#B = 0	or in pane	TILE			
4. Company (if applicable):		9.10	(ch (c) 8	TILS			
5. Telephone Number:			6. Fax Nur	nber:			
7. Mobile Phone Number:							
8. E-mail:							
Payment Details							
9. Method of Payment:	Electronic Funds Transfer	Cheque		Bank Draft	Po	ostal Order	
10. Cheque No.		41-1-1					
11. Payment enclosed / Amount of payment due:	€						
Payment must be in the form of Clearing System. Cheques sho						perating w	ithin the Irish
Payer's Declarat I, the undersigned, agree tha (Under the Employment Permi	ION It in the case of a refund	of fees, the paymen	t will be mad	e payable to the	Applicant		
fee paid) Payer's Signature: (Original signature required)				Date:	0 0	p p.	8. C
Employment Permits Section is forwarded to the applicant for of 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 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.

lational: Original signature required)		Title:
lame (in BLOCK CAPITALS):	SLDSK BAR() ALS	Date: D D M M
our employment permit will	normally be posted to you at your	current address as in Part 2 of this Form.
ck this box if you want your permit	to be posted to your current address.	
ck this box if you want your permit s stated in Part 1 of this Form.	to be posted to the Person who has made t	the offer of employment
ick this box if you want your permit	to be posted to your Authorised Agent (if a	pplicable).

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
 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
 - 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
- 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:
 - 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):	OCCUPATION TO A PARTY OF THE PA	Title:
Position Held:	10 H = 178(1714)	Date:
Your certified copy of the en	nployment permit will normally be p Part 1 of this Form.	oosted to you at your current address as i
Tick this box if you want your certified	ed copy of the employment permit to be pos	eted to your current address.
Tick this box if you want your certific (if applicable).	ed copy of the employment permit to be pos	tted to your Authorised Agent
	Page 10	GEP002/

Agent Name in BLOCK CAPITALS):	BLOCK CAPITALS	Title:	
understand that neither I, nor a person	acting on my behalf, shall keep any perso	nal document belo	onging to a holder of an
mployment Permit.			
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Town:	BLOCK	CAPITALS	
County:	BLOOK	SAPITALS	
Country:	BLOCK	CAPITALS	
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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,

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 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,
- 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 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, and
 - 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, 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, and 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

(D) Schedule of Fees

An application for an 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.

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 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

- 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.
- 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)(df) 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.
- Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
- 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.
- 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 / 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 2006, 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 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.

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/Licence 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,
- 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, 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 (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 Six - Acceptance of Terms & Conditions

Sign and date the appropriate declarations - original signatures required.

EMPLOYMENT PERMITS SECTION

Contact Details

Website: www.djei.ie/labour/workpermits/

E-mail: employmentpermits@djei.ie

353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only) 353-1-631 3268

Fax: Davitt House 65a Adelaide Road Address:

Call Centre:

Dublin 2 Ireland

Employment Permits Section Web Pages

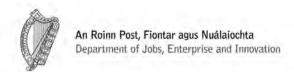
Information and application forms may be downloaded from the Employment Permits Section web pages on the Department of Jobs,

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 D

Application form for grant of Intra-Company Transfer Employment Permit



ICTEP002/15

Intra-Company Transfer **Employment Permit NEW Application**

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
 - 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 programme.

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).

Passport Photograph

X1

Please print Foreign National's name on the back of photograph and staple here.

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.

Pagistration Datails of the Connected

Part One	Person
1. Employer Registered Number:	Obtained from the Revenue Commissioners
2. Company Name Registered Number:	Obtained from the Companies Registration Office
3. Business Name Registered Number (if applicable):	Obtained from the Companies Registration Office
4. If the Connected Person 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 Connected Person is a Charity, please supply their Charity Number:	Obtained from the Revenue Commissioners
6. Registered name of Company/Business:	SLOOK CROWNED
7. Trading name of business (if different):	SEGS TANIFES
	1CTEP002/15

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Enter helow details exactly as they annear on the Foreign National's GNIR card*		BLOCK	CARITALS
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		Page	ge 3

nmigration stamps and visa.		
	Foreign National below, which are relevant to the Job	Offer as stated in Part 5 of the applica
 Highest level of Qualification elevant to the employment: e.g. Certificate, Diploma, Degree, etc. 	BLOCK CAPITALS	17. Date of Completion:
. Title of Course:	BLOCK CAP	ITALS
. Final Subjects Taken:	BLOCK CAPITALS	BLOCK CAPITALS
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0. Result Achieved: e.g. 2.1		
1. Has the Foreign National prev	viously made an application for asylum in the	Yes No
2. Has the Foreign National sou previous occasion?	ght permission to land in the State on a	Yes No
	what basis the permission was sought and mission was granted:	BLOCK CAPITALS
P	BLOCK CAPITALS	
3 Has the Foreign National hee	n in the State on a previous occasion without	
permission?	in in the state on a previous occasion without	Yes No
I. Is the Foreign National currer	ntly employed in the State?	Yes No
If 'Yes' please describe on	what permission they have to be employed:	BLOCK CAPITALS
	BLOCK CAPITALS	
5. Has the Foreign National bee	n employed in the State previously?	Yes No
If 'Yes' please describe on	what permission they had to be employed:	BLOCK CAPITALS
	BLOCK CAPITALS	
6. Is the Foreign National marrie	ed to, or in a civil partnership with an Irish or	Yes No
i. Is the Foreign National marrie	ed to, or in a civil partnership with an Irish or	Yes No BLOCK CAPITALS
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If any employees have been made redundant in the employment that is the subject of this Employment Permit application over the last six months? If any employees have been made redundant in the employment that is the subject of this Employment Permit application is the subject of this Employment Permit application. This should include information on the numbers of post employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application.	
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? If any employees have been made redundant in the employment that is the subject of this Employment Permit application on the numbers of post employment that have been made redundant and explain how the position, which is the subject of this Employment Permit application.	
that is the subject of this Employment Permit application over the last six months? If any employees have been made redundant in the employment that is the subject of this Employment Permit applica six months please outline the reason(s) for the redundancies. This should include information on the numbers of pos employment that have been made redundant and explain how the position, which is the subject of this Employment P	
six months please outline the reason(s) for the redundancies. This should include information on the numbers of pos employment that have been made redundant and explain how the position, which is the subject of this Employment P	No
differs from those positions in that employment made redundant. Please continue on a separate sheet if required and application form.	sitions in that ermit application,
I hereby solemnly declare the above information to be true and accurate.	
Signature of Connected	
Person: (Original signature required)	
Name (in BLOCK CAPITALS): BLOCK CAPITALS Title:	
Position Held: BLOCK CAPITALS Date: D D M M	√- y

Part Four	Details of Intra-Company Transfer	
1. Current Position of Foreign Nationa	BŁOCK CAPITALS	
1. Current Position of Foreign National 2. Length of time that Foreign National transfer: (The proposed Foreign National must *Documentary evidence in the form of pay. 3. Please outline, in detail, the reason	had been with Foreign Employer prior to be with Foreign Employer for 6 months or more*)	

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ntra-Company Transfer Employ application is in respect of:	employment this yment Permit	Senio Managemen		y Personnel	Т	rainee
Proposed Position of Foreign N with Connected Person:	lational		SCOCAC	gerrass.		
NOTE: Q	uestions 3 and 4 to	be complete	ed by Health	Profession	als only.	
Regulatory Body:		BLOCK CAPITALS				
Registration/Pin No.:		- 1				
ne application is in respect of Reg istration details above. Documen			of Schedule 2 in	l the Principal R	egulations please	provide you
plications for other Health Profess h the appropriate medical body or	sionals listed in Part B of S	chedule 2 in the				eir registration
Ouration of Transfer (definite st and end dates to a maximum of ars)*:	art	No X				W 9 9
/e recommend all Employment Pe e to take up duties for or undergo			—i his Department a	at least 12 week	ks before the Fore	eign National
Place(s) at which the duties/trai		41, 20,2500	BLCC	CAPITA	LS	
	âs	OOK OAPT	TALS			
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must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requirem	BLOCK CA	PITALS
	must now attach the documents outlined in Requirement for Support	orting Documentation under "(C) Application Requireme

Part Six		Rec	quirem	ent fo	r Payr	ment				
Is a fee payable for this Emp application?	loyment Permit	Yes	s			1	No			
If No, please indicate on wha	it basis no fee is	applicable?								
The Connected Person has o Revenue Commissioners	:haritable status	with the		nation	in respect of al married to hip with an E	or in a ci	vil			
f no fee is payable proceed	to Part Seven.									
			Details	of Pa	aymer	nt				
mportant Note for Business n accordance with D/Finance postal orders from business us pased payments from business fransfer (EFT).	Circular 1/2013, f sers in respect of	from 19 Septembe services rendered	er 2014 (e-Day) I. To facilitate t	the public senis, the Emplo	yment Permit	s Section	will no	longe	er acc	ept pa
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Applicants, other than business Contact Details		nue to make paym	nent by cheque	bank draft or	postal order a	and must o	omple	te all	detai	ls belo
. Please indicate who is ma payment:	king the	Connect	ed Person			o	ther			
. Title:	Mr	Mrs	Miss	Ms	Othe	er (please state)				
. Name:			BLOC	K DAPIT	h LS					
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0. Cheque No.				1						
1. Payment enclosed / Amount of payment due:	€									
Payment must be in the form of Clearing System. Cheques sho							opera	ting v	vithin	the Iris
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the undersigned, agree that Under the Employment Permi otal fee paid).										
Payer's Signature: Original signature equired)					Date:	D B	bit	M	Ŋ.	Y
Employment Permits Section is orwarded to the applicant for one 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, 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 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)		Title:	
Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Date: D D M	M Y Y
Your employment permit will	normally be posted to you at your	current address as in Part 2	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 s	tated in Part 1 of this Form.	
Tick this box if you want your permit	to be posted to your Authorised Agent (if a	applicable).	

ICTEP002/15

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 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 or training with

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 5 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
- 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 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 Health4 Insurance Act 1994.

I understand and accept that:

Signature of Connected

- 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 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.

Person: (Original signature required)									
Name (in BLOCK CAPITALS):	BLOCK CAPITA	ALS	Title:						
Position Held:	BLOCK GAPITA	\LS	Date:	b	B	66	M	Ý	Ÿ
Your certified copy of the er		ormally be poster	ed to you	u at	your	cur	rent	ado	lress as in
Fick this box if you want your certifie			your curre	ent ac	dres	s.			
			2,000						
Fick this box if you want your certifie Agent (if applicable).	d copy of the employment pe	ermit to be posted to	your Auth	iorise	a				

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 5 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
 - 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
- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment

Employer: Original signature required)		
Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Title:
Position Held:	BLOCK CAPITALS	Date:

n BLOCK CAPITALS):	BLOCK CAPITALS	Title:	
understand that neither I, nor a persor mployment permit.	n acting on my behalf, shall keep any person	al document belon	nging to a holder of an
ignature of Agent: Original signature required)		Date:	D D M M Y
gent's Address for Correspondence:			
Address 1:	BLOCK (CAPITALS	
Address 2:	BLOCK O	CAPITALS	
Town:	BLOCK C	APITALS	
County:	BLOCK (CAPITALS	
Country:	BLOCK	CAPITALS	
E-mail address:			
Telephone number:]	
the Connected Person, permit the abo	ove named agent to act on my behalf in respo	ect of this applicat	ion.
the Connected Person, permit the abo ignature of Connected Person: Driginal signature required)	ove named agent to act on my behalf in respo	ect of this applicat	ion.
ignature of Connected Person: Original signature required)	ove named agent to act on my behalf in respo e named agent to act on my behalf in respec	Date:	D D M M Y
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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 the ERN (Employers Registered 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 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 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,
- 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 Employments Permits Act 2006, as amended. The current fees applicable are available on the Department's

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 acillitate 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

- 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.
- 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)(df) of the Employment Permits Act 2006, as amended.
- The Foreign National remains an employee of the Foreign Employer for the duration of the transfer.
- The Foreign National only performs the duties or undergoes the training in respect of which the Employment Permit is issued.
- 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.
- Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
- 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.
 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 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 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 <u>all</u> questions

Connected Persons 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 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

Contact Details

E-mail:

employmentpermits@djei.ie

Call Centre:

353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

Fax:

353-1-631 3268

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 E

Application form for grant of Contract for Services Employment Permit



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

CFSEP002/15

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 6 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 Atypical 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).

Passport Photograph

X

Please print the Foreign National's name on the back of photograph and staple here.

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

In accordance with the Employment Permits Act 2006, as amended, the Contractor (foreign employer) must be the applicant in respect of all Contract for Services Employment Permit applications.

Part One	Registration	on Detai	ls of Contractor
1. Employer Registered Number			Obtained from the Revenue Commissioners
2. Company Name Registered Number (if applicable)			Obtained from the Companies Registration Office
Business Name Registered Number (if applicable):			Obtained from the Companies Registration Office
4. If the Contractor 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. Registered name of Company/Busin	ess:	BL	DCK CAPITALS
6. Trading name of business (if differen	nt):	ßĹ	OCK CAPITALS
7. Nature of business:		BL	OCA CAPITALS
	Page	1	CFSEP002/15

Address (outside the State)	BLOCK CAPITALS						
	BLOCK CAPITALS						
	BLOCK CAPITALS						
	BLOCK CAPITALS						
Telephone Number:	10. Fax Number:						
1. Mobile Phone Number:							
2. E-mail address:							
3. Website:							
4. Number of EEA* and/or Swiss nationals (including Irish) currently employed by the Contractor:	15. Number of non EEA nationals currently employed by the Contractor:						
The EEA comprises the Member States of the European Ur							
ou must now attach the documents outlined in Require	ement for Supporting Documentation under "(A) Requirements for Contra						
Part One A De	etails of Relevant Person						
	etails of Relevant Person						
Name of Relevant Person (Irish Entity): Address of Relevant Person (Irish Entity):	BLOCK CAPITALS BLOCK CAPITALS						
. Name of Relevant Person (Irish Entity):	BLOCK CAPITALS BLOCK CAPITALS						
. Name of Relevant Person (Irish Entity): . Address of Relevant Person (Irish Entity): (Place at which the employment concerned, in respector of the Contract Service Agreement, is to be carried	BLOCK CAPITALS BLOCK CAPITALS						
. Name of Relevant Person (Irish Entity): . Address of Relevant Person (Irish Entity): (Place at which the employment concerned, in respector of the Contract Service Agreement, is to be carried	BLOCK CAPITALS BLOCK CAPITALS BLOCK CAPITALS						
. Name of Relevant Person (Irish Entity): . Address of Relevant Person (Irish Entity): (Place at which the employment concerned, in respector of the Contract Service Agreement, is to be carried	BLOCK CAPITALS BLOCK CAPITALS BLOCK CAPITALS BLOCK CAPITALS						

Part Two	Details o	f Foreig	gn National	
Job title of Foreign National:		вгаск с	APITALS	
application:	National has been employed by the Co		this	
Documentary evidence may be requ	uested in the form of relevant payslips.			
3. Passport Number:				
4. Expiry Date:	9 M M Y Y	— Ente	er these details exa	actly
5. Nationality:	BLOCK CAPITALS	as	they appear on th	ne
6. First Name:	BLOCK CAPITALS	Forei	gn National's pass	port.
7. Middle Name(s):	BLOCK CAPITALS			
8. Family Name:	BLOCK CAPITALS			
9. Date of Birth:	D M M Y	10. Male:	11. Female:	
2. Current Address of Foreign Nat	tional:		BLOCK CAPITA	LS
	BLOCK CA	BITALS		
	BLOCK CA	PITALS		
	BLOCK CA	PITALS		
3. Is the Foreign National currentl	y in the State?	Yes	No	
If 'Vec' on what hacis are t	hey currently in the State, please desc	cribe:	BLOCK CAPIT	A.I. S
Tes on what basis are a	BLOCK CA		BENGH SHITT	16.0
Enter these d	letails exactly as they appear o		National's GNIR card	*
GNIB Pin No.	letans exactly as they appear of	Dept. No.	Tradional 3 GMB card	
	e but does not have a GNIB personal ide		then please supply a copy of	the current
nmigration stamps and visa. Enter education	n details below relevant to the Job Ofi	fer as stated in Pa	art 5 of the application form	
4. Highest level of Qualification elevant to the employment: e.g. Certificate, Diploma, Degree, etc.	BLOCK CAPITA	Ls	15. Date of Completion:	
6. Title of Course:	В	LOCK CAPI	TALS	
7. Final Subjects Taken:	BLOCK CAPITALS		BLOCK CAPIT	ALS
	BLOCK CAPITALS		BLOCK CAPIT	ALS
	BLOCK CAPITALS		BLOCK CAPIT	ALS
	BLOCK CAPITALS		BLOCK CAPIT	ALS
	Page 3			CFSEP

18. Result Achieved: e.g. 2.1	
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:	BLOCK CAPITALS
BLOCK CAPITALS	
Has the Foreign National been in the State on a previous occasion without permission?	Yes No
2. Is the Foreign National currently employed in the State?	Yes No
If 'Yes' please describe on what basis they are employed:	BLOCK CAPITALS
BLOCK CAPITALS	
If 'Yes' please provide the Foreign National's PPS Number:	
3. Has the Foreign National been employed in the State previously?	Yes No
If 'Yes' please describe on what basis they were employed:	BLOCK CAPITALS
BLOCK CAPITALS	
If 'Yes' what nationality is their spouse/partner?	BLOCK CAPITALS
	BLOCK CAPITALS
5. 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 Docum National."	nentation under "(B) Requirements for Foreign
Page 4	CFSEP002/15

Part Ihree	Details of	Redunda	ncy
	rson in respect of any dismissals by reason I where such dismissal was attributable wh	of redundancy within	the meaning of section 9 of the
Please complete and sign the declar	ation below in full.		
	Person been made redundant in the emplo nt Permit application over the last six mont		No
six months please outline the reasor employment that have been made re	dundant in the employment that is the sub n(s) for the redundancies. This should incl dundant and explain how the position, whi mployment made redundant. Please conti	ude information on the ch is the subject of this	numbers of positions in that Employment Permit application,
hereby solemnly declare the above Signature of Relevant Person: Original signature required)	information to be true and accurate.		
Name (in BLOCK CAPITALS):	BLOCK DAPITALS	Title:	
Position Held:	BLOCK CAPITALS	Date:	D- W M Y-Y

Part	Four	Detail	s of	Cont	ract	Servic	e Aç	green	nent
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						and the state of	23 - 10 4 - 10 - 10 - 10 - 10 - 10 - 10 -				
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				Pag	e 7				CFSEP00		

Please detail the qualifications, skills, knowledge or experience required for this job:	BLOCK CAPITALS
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. Please detail the relevant qualifications, skills, knowledge and experience of the Foreign National:	BLOCK CAPITALS
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Part Five A Details of	of Advertisement
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Applications in respect of employments where there is a shortage in respections in respect of employments where there is a shortage in respective for the proper functioning of the economy and which employme applications in respect of all other employments with an annual remuner which an employment permit shall not be granted and which employment applications that are supported by a State Enterprise Agency. It is application that are supported by a State Enterprise Agency. It is application that are supported by a State Enterprise Agency.	spect of the relevant qualifications, skills or experience which are ents are listed in Schedule 3 in the Principal Regulations, ration of €60,000 or more, other than those employments for ints are listed in Schedule 4 in the Principal Regulations, and
advertised with the Department of Social Protection Employment Servi weeks, and advertised for three days in a national newspaper, and advertised in either a local newspaper or a job website (separate to DSF	
ore information about the Department of Social Protection Employment Services	s/EURES employment network can be found on:
Contract for Services Employment Permit applications must, if applicable, provise Department of Social Protection Employment Services/EURES Employment Newtisements with the application.	
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".
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Part Six		Red	quiren	ent	for Pa	ayr	nent				
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no fee is payable proceed t	o Part Seven.										
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Employment Permits Section is prwarded to the applicant for co 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 have been employed by the I will continue to be employ this application form; and I will be fully tax compliant Furthermore, I understand and accept who furnishes to the Minister, on an	stated in Part 5 of the application form (if ap e Contractor named in this application form red, salaried and paid under an employment of in the State. In the state, of that in accordance with Section 25 of the E application under section 4, information that eckless as to whether it is so false or mislead	for a minimum contract outsid imployment Per is false or misl	e the S rmits A leading	tate b	y the C	ontra mend	ctor s	tated on
Signature of Foreign National: (Original signature required)		Title:						
Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Date:	D	0	VI M	Y	Y	
	normally be posted to you at your c							
Tick this box if you want your permit	to be posted to the Contractor as stated in P	Part 1 of this Fo	rm.				L	
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Declaration of Releva	int Person							
service agreement between the Cont	firm that the Foreign National will be perforn ractor and me and I understand that the Fore after the completion of the duties which are	eign National wi	II be re	turnir	ng to his	s/her		

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.

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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 5 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.
- 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.

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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,
- 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 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.

(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 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 <u>must</u> 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)(df) 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
- 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: 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 authorised agent (if applicable).

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

Part One - Details of the Contractor and the Details of the Relevant Person: Complete all questions

Contractors 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 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 Payer declaration original signature required.
- 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

Contact Details

E-mail:

employmentpermits@djei.ie

353-1-417 5333 Call Centre:

> LoCall: 1890 201 616 (from within Ireland only)

Fax: 353-1-631 3268

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 F

Application form for grant of Reactivation Employment Permit



REP002/15

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.

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:

If i

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

Recent Passport Photograph X1

Please print Foreign National's name back of photograph and staple here.

Obtained from the Registry of Friendly Societies

Obtained from the Revenue Commissioners

the end of the form. INCOMPLETE FORMS WILL BE RETURNED TO THE APPLICABLE).	CANT OR THE AUTHORISED AGENT (IF
In accordance with the Employment Permits Act 2006, as an seek to recover the fee, i	Dermit (i.e. Who is the applicant)? mended, an employer making an Employment Permit application may not of applicable, from the foreign national. the 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 Principal Regulations	
	n Details of Person who has 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	Obtained from the Companies Registration Office

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

	employment to not a registered compar	ny, please indicate what type of entity it i
e Trader Partnership	Other (please specify)	GENERAL S.

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	The EEA comprises the Member States of the European Union together with Iceland, Norway & Liechtenstein.	
who has made the offer of employment."		

Part Two		Details of	of Fore	ign	Na	tional	
1. Passport Number:							
2. Expiry Date:	P D W 0			En	tor th	ese detail	le.
3. Nationality:	El o cic	CAPITALS	е	xactl	y as t	hey appear	ar on
4. First Name:	81,00%	CARITALS.		tile i		sport.	ai s
5. Middle Name(s):	BLOCK	CARITALS					
6. Family Name:	81.00%	LAPITALS					
7. Date of Birth:	0 0 0	W. V	8. M	ale:		9. Female:	:
10. Current Address (for	reign address required if	residing outside the S	tate):				
Address 1:		BL	OCK BAPIT	LS			
Address 2:		8)	OCK CAPITA	618			
Town:		8 (OUR BARIT	A1,8			
County:		R L	OOK CAFCE	118			
Country:		91	ORS CVALL	110			
11. Telephone No.:			12: Mobile Phon	e No.:			
13. Please provide the F	oreign National's PPS	Number if available:					
14. E-mail address:							
15. Is the Foreign Nation	nal currently in the Sta	te?		Yes		No No	
	asis are they currently i		escribe, and	4	Hind	V-SAPST	11/2
		BLOCK C	PITALS				
	Enter below details	exactly as they app	ear on the Foreig	n Nation	nal's GN	IB card*.	
GNIB Pin No.			Dept. No.				
*If the Foreign National is immigration stamps and v		t have a GNIB person	al identification nu	mber the	en pleas	e supply a copy	of the current
If the Foreign Natio	onal has held consecut uring this time, s/he ma Immigration Service.	y be eligible to apply	for a Stamp 4 pe	ermissi	on to rei	main from the	Irish
	by submitting this appl es that an employment			that s/h	e has c	onsidered the	available
Enter education detail	ls of the Foreign Nation	nal below, which are	relevant to the Jo	b Offer	as state	ed in Part 4 of	the application for
16. Highest level of Qua relevant to the employn e.g. Certificate, Diplo Degree, etc.	nent:	вьоск саг	18ALS		17. Dat	e of Completic	on:
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Title of Course:	BLOOK CAF	HTALS
. Final Subjects Taken:	BLOCK CAPITALS	BLOCK CAPITALS
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11	BLOCK CARITALS	BLOCK CAPITALS
. Result Achieved: e.g. 2.1		
. Has the Foreign National pre State?	viously made an application for asylum in the	Yes No
2. Has the Foreign National sou previous occasion?	ight permission to land in the State on a	Yes No
If 'Yes' please describe on indicate whether or not per	what basis the permission was sought and mission was granted:	BLOCK CAPITALS
	BLOOK CAPITALS	
I. Is the Foreign National curre	what permission they have to be employed:	BLDCK CAPITALS
i. Has the Foreign National bee	en employed in the State previously?	Yes No
If 'Yes' please describe on	what permission they had to be employed:	BLOCK CAPITALS
	BLOCK CAPITALS	
Is the Foreign National marrie EEA national?	ed to, or in a civil partnership with an Irish or	Yes No
If 'Yes' what nationality is t	their spouse/partner?	BLOCK CAPITALS
	oouse, civil partner or dependant of, the holder the holder of any other type of permission to	Yes No

Part Three	Details o	f Redundanc	y
the meaning of section 9 of the Redu	has made the offer of employment in re undancy Payments Act 1967 and where (a), (b), (c), (d) or (e) of section 7(2) or to	such dismissal was attributable	son of redundancy within wholly or mainly to the
Please complete and sign the declar	ration below in full.		
	who has made the offer of employment s the subject of this Employment Permit		No
ast six months please outline the re that employment that have been ma	edundant in the employment that is the eason(s) for the redundancies. This sho de redundant and explain how the posit ions in that employment made redunda	ould include information on the tion, which is the subject of this	numbers of positions in Employment Permit
hereby solemnly declare the above	e information to be true and accurate.		
Signature of Person who has made the offer of employment:			
Original signature required)			_
lame (in BLOCK CAPITALS):	(RESER SEPTEAL)	Title:	
Position Held:	Amin's Office	Date:	8 8 7 9
-			

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Part Four	700	Deta	ails c	f Emplo	yment
I. Title of Job:		E	1008	0117618	
NOTE: Questions 2 and 3 to in Part				ssionals and Se the Principal Re	
2. Regulatory Body:			BIOCH	CARITALS:	
3. Registration/Pin/ Licence No.:					
If the application is in respect of Regi- please provide your registration detail					of Schedule 2 in the Principal Regula
Applications for other Health Professi with the appropriate medical body or					
I. Place(s) at which the employment	concerned is to	o be carried	out:	810	0 0 0
		F	i par	A FITAN 8	
5. Proposed Period of Employment Permit (maximum of 2 years)					
3. Proposed Start Date*:	0 0	W. W.	a Y		
We recommend all Employment Perm employment.	it applications be	submitted t	o the Depar	tment at least 12 wee	eks before the proposed start date of
. Gross Annual Remuneration*	€			(Gross remuneration premium payment	on excludes overtime or ts)
6. Gross Annual Salary: (if different from above)	€				
). Gross Weekly Salary:	€			10. Hourly Rate of Pay:	€
Deductions from Gross Weekly Salary:	€			Please specify purpose of deductions:	Budén ekerthie
12. Health Insurance*:	ϵ			Please specify name of Health Insurance Provider:	BLUCK-CARITALS
All amounts which make up the basic Annual Remuneration this must be veri In the event of a National Employment Health Insurance can only be conside	fiable by way of Rights Authority	supporting of (NERA) insp	locumentation pection.	payslips. If Health In on at renewal stage; s	such documentation may also be requ
3. Number of hours of work per week*: 3. Value of hours of work per week*:	of the Health Insi	urance Act,	1994.		
Please note that for the purposes of E	mployment Pern	nit Applicatio	ns, the stan	dard working week is	39 hours per week.
4. What are the main functions of th	nis job:			ILAC .	Tub. Lyr.
		8100	K-CAP	1 A L 3	
5. Please detail the qualifications, s experience required for this job:	kills, knowledg	e and		-BLNGS-	DAP(TA) S
		86.00	xK-₫λ₽I	TALS	

se detail the relevant qualifications, skills, vledge and experience of the Foreign Nationa	al: BLOCK CAPITALS
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ou use an Agent/Recruitment Agency to recr	
'Yes' please provide name and address of the gent/Recruitment Agency:	BLOCK CAPITALS
	BLOCK CAPITALS
	BLOCK CAPITALS
'No' please provide details of the	BLOCK CAPITALS
continuent metrod.	BLOCK CAPITALS
st now attach the documents outlined in Req	quirement for Supporting Documentation under "(C) Application Requ
st now attach the documents outlined in Req	quirement for Supporting Documentation under "(C) Application Requ (if applicable)
st now attach the documents outlined in Req	
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st now attach the documents outlined in Req	
	(if applicable)

Part Five		R	equire	men	t for l	Payn	nent			
s a fee payable for this Emp application?	loyment Permit		Yes					No		
f No, please indicate on wha The Person who made the of applicant and has charitable commissioners	fer of employm	ent is the			ation is in re d to or in a c					
Dependant/Partner/Spouse E	Employment Pe	rmit		E	change Ag	reement E	mploymer	nt Permit	Г	
no fee is payable proceed t	to Part Six.								-	- 10
			Deta	ils o	f Pay	men	t			
Important Note for Business in accordance with D/Finance loostal orders from business usuased payments from business Transfer (EFT). Business user applicants for in e-mail address to request 1) and Payers Declaration be section as complete. An e-mail address to the the bank account into which the ayment.	Circular 1/2013, ers in respect of s users and has employment p payment must elow and paym ail will issue to t	from 19 Septe services rende set up a comme ermits should be provided a ent will be reche applicant an	mber 2014 (e-I ered. To facilit ercial bank acc I complete the at Question 8. quested when and their authori	Day) the pate this, the count into Contact They she an applicated agent	Details of Pould also co eation is acc (if applicable	ayer (Que implete Pa epted into	stions 1, 2 syment Details of the	Electronic s, 3, 4, 5, 6 tails (Que oyment F amount of	Fund 5, 7, a estion ermit	ept p is ind 8 i 9 ar ts fee d
applicants, other than business	s users can cont	inue to make p	payment by che	que, bank	draft or pos	tal order a	nd must co	mplete all	detai	ls be
Contact Details				1000000						
. Please indicate who is mal ayment:	king the	TO A SECTION ASSESSMENT OF THE PARTY OF THE	o has made employment		Foreign	National		Othe	r	
. Title:	Mr	Mrs	Miss		Ms	Othe	r (please state)			
. Name:			ō.u	0 C ii m	ADOTAL:	ş				
. Company (if applicable):			9.0	000	A.E.(中角)。	1				
. Telephone Number:				6. Fa	x Number:					
. Mobile Phone Number:										
. E-mail:						Ĩ				
Payment Details						4				
. Method of Payment:	Electronic F Tra	unds nsfer	Cheque		Bank D)raft	Po	stal Orde	r	
0. Cheque No.										
Payment enclosed / mount of payment due:	€									
Payment must be in the form of Blearing System. Cheques sho Payer's Declarat	ould be made pa	nated cheque, yable to the D o	bank draft or p epartment of J	ostal orde obs, Ente	er drawn on a erprise and	financial i Innovation	nstitution o	perating v	vithin	the I
the undersigned, agree tha under the Employment Permit se paid).	t in the case of									
ee paid). Payer's Signature: Original signature equired)						Date:	7 7	W B	9.	
Employment Permits Section is orwarded to the applicant for a he 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: (Original signature required)		Title:
Name (in BLOCK CAPITALS):	SLUCK CARITALS	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 as stated in Part 1 of this Form.	to be posted to the Person who has made	the offer of employment
Tick this box if you want your permit	to be posted to your Authorised Agent (if a	pplicable).
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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
 - 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;
- 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):	A PRINT	Title:
Position Held:	success with third	Date:
Your certified copy of the en	nployment permit will normally be p Part 1 of this Form.	oosted to you at your current address as in
Your certified copy of the en		osted to you at your current address as in
Tick this box if you want your certifie	ed copy of the employment permit to be pos	ted to your current address.
Tick this box if you want your certifie (if applicable).	ed copy of the employment permit to be pos	ted to your Authorised Agent
	Page 10	REP002/15

gent Name e copied any correspondence regarding this application. gent Name BLOCK CAPITALS: BLOCK CAPITALS Title: gent Name BLOCK CAPITALS: Title: gent Name BLOCK CAPITALS: Title: gent Name BLOCK CAPITALS: Title: gent Name Title: Title: gent Name Title: Title: gent Name Title: Title: gent Name Title: Title: gent Name Title:	gent Name in BLOCK CAPITALS): BLOCK CAPITALS Title: Inderstand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an imployment Permit. Independent of Agent: Independe	Authorisation of Agent	
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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.
- 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

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, 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, 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, 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 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 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 <u>must</u> 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 cleaning 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

Permi

- 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)(df) 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.
- Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
- 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 / 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 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 a copy of the Reactivation 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/Licence 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 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, 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, 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 Six - Acceptance of Terms & Conditions

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

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail:

employmentpermits@djei.ie

Call Centre:

353-1-417 5333 LoCall: 1890 201 616 (from within Ireland only)

Fax:

353-1-631 3268

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

REP002/15

Form G

Application form for grant of Exchange Agreement Employment Permit



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

EAEP002/15

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 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).

Recent Passport Photograph X1

Please print
Foreign National's name
on
back of photograph
and staple here.

	ho has made of employment	Foreign National
	Health Pro	ofessional
If this is an application	for a Health Professional listed Principal Regulations please	in Part A or Part B of Schedule 2 in the etick this box
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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

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Please state the nationality of the Person who has made the offer of employment: If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Min 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). Registered name of Company/Business: Registered name of Company/Business: I Trading name of business (if different): Address 1: Address 1: Address 2: Town: Company/Business Address: Address 2: BLOCK CAPITALS BLOCK CAPITALS LOCK CAPITALS L	Please state the full name of the Person who has made the offer of employment: Please state the nationality of the Person who has made the offer of employment: If the Person who has made the offer of employment is not an EEA citizen, do they hold appropriate permission from the Ministro or 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 Ministro Fusion of Coperate a business in the State or your application will be returned (see Requirements for Supporting Documentation). Registered name of Company/Business: Trading name of business (if different): Nature of business: Address 1: Address 2: Town: Company/Business Address: Address 2: Town: Country: BLOCK CAPITALS BLOCK CAPITALS LOCK	If the Person who has mad	e the offer of employment is	not a registered company,	please indicate what type of entity it is:
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		Irish) currently employed made the offer of employed The EEA comprises the Memb	by the Person who has ment: per States of the European Uni	employe the offer ion together with Iceland, Non	d by the Person who has made of employment: way & Liechtenstein.

Part Two	Detai	Is of For	eign	Nat	ional	
1. Passport Number:						
2. Expiry Date:	0.0-0.0-0		Ent	er the	se details	•
3. Nationality:	BLOCK CAPITAL	S	exactly	as the	ey appea Nationa	r on
4. First Name:	80000 000/741	s		pass	port.	
5. Middle Name(s):	BLOCK CAPITAL	.5				
6. Family Name:	BLOCK CARITAL	.\$				
7. Date of Birth:	D D W # +: *	8.	Male:		9. Female:	
0. Current Address (for	reign address required if residing outsid	le the State):				
Address 1:		uloun dist	tils			
Address 2:		BEDDIE CYPI	Mis			
Town:		BLOCK CAPI	TWIS			
County:		BLDC(CAP)	TALS			
Country:		SLOCK CAPI	14F8			
1. Telephone No.:		12: Mobile Ph	one No.:			
3. Please provide the F	oreign National's PPS Number if ava	ailable:				
4. E-mail address:						
5. Is the Foreign Nation	nal currently in the State?		Yes	No	,	
If 'Yes' on what ba	isis are they currently in the State, pl	lease describe, and		FOCK	DARITA	ıś
Somples of the same		R. CAPITALIS				
	Enter below details exactly as the	ey appear on the Fore	ign Nation	al's GNIB	card*.	
GNIB Pin No.		Dept. No.				
If the Foreign National is mmigration stamps and v	in the State but does not have a GNIB	personal identification	number the	n please s	upply a copy	of the current
If the Foreign Nation	onal has held consecutive employme uring this time, s/he may be eligible t Immigration Service. However, if the	to apply for a Stamp 4	permissio	n to rema	in from the li	rish
	his authoritation this confication the Fa	reign National confirm	ns that s/h	has con	sidered the a	vailable
	by submitting this application the Fo es that an employment permit is still		no mat om	1022 4 50		

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:	BLOCK CAP	ITALS
19. Final Subjects Taken:	BLOCK CAP)TALS	BLOCK CARITALS
	SEOCK CAPITALS	BLOCK CAPITALS
	BLOCK CAPITALS	BLOCK CAPITALS
	BLOCK CAPITALS	BLOCK CAPITALS
20. Result Achieved: e.g. 2.1		
21. Has the Foreign National previou State?	usly made an application for asylum in the	Yes No
22. Has the Foreign National sought previous occasion?	permission to land in the State on a	Yes No
If 'Yes' please describe on what indicate whether or not permis	at basis the permission was sought and ssion was granted:	BLOCK CAPITALS
	BLOCK CAPITALS	
If 'Yes' please describe on wha	BLOOK CAPITALS mployed in the State previously?	Yes No
If 'Yes' please describe on wha	at permission they had to be employed:	BLOCK CAPITALS
	BLOCK CAPITALS	
6. Is the Foreign National married to EA national?	o or in a civil partnership with an Irish or	Yes No
If 'Yes' what nationality is their	r spouse/partner?	BLOCK CARITAIS
	se, civil partner or dependant of, the holder der of any other type of permission to work	Yes No
You must now attach the doc	cuments outlined in Requirement for Supporting D Requirements."	Oocumentation under "(B) Foreign National
	Page 4	EAEP00

be completed by the Person who	has made the offer of employment in respec			ncy within
ne meaning of section 9 of the Redu	indancy Payments Act 1967 and where such a), (b), (c), (d) or (e) of section 7(2) or to sect	dismissal was attri		
ease complete and sign the declar	ation below in full.			
	tho has made the offer of employment been the subject of this Employment Permit appl		s No	
any employees have been made re st six months please outline the re at employment that have been mad	dundant in the employment that is the subje ason(s) for the redundancies. This should i de redundant and explain how the position, ons in that employment made redundant. P	nclude information which is the subject	on the numbers of pos of this Employment P	itions in ermit
ereby solemnly declare the above	information to be true and accurate.			
gnature of Person who has ade the offer of aployment: riginal signature required)				
ame (in BLOCK CAPITALS):	(ANAL) CIENTA'S	Title:		
osition Held:	30000000000	Date:	0 0 0 0 0	1
	Page 5			EAEP002
	Page 5			-ALFUUZ

Part Four	Detail	s of Emplo	yment
1. Title of Job:	-913	POS CAFILALS	
	be completed by Health A and Part B of Schedule		curity Personnel who are liste gulations.
2. Regulatory Body:	(4)	DERLANDITALS	
3. Registration/Pin/ Licence No.:			
If the application is in respect of Registration details			of Schedule 2 in the Principal Regulation
Applications for other Health Professi with the appropriate medical body or			ns must provide a copy of their registrat th.
4. Place(s) at which the employment	concerned is to be carried out	E SLO	EK EMPITALE)
	als	OCH CAPITALS	
5. Proposed Period of Employment Permit (maximum of 1 year)			
6. Proposed Start Date*:	0 0 4 4 7		
* We recommend all Employment Perm employment.	it applications be submitted to the	ne Department at least 12 we	eks before the proposed start date of
7. Gross Annual Remuneration*	€	(Gross remuneration premium payment	on excludes overtime or ts)
8. Gross Annual Salary: (if different from above)	E		
9. Gross Weekly Salary:	ϵ	10. Hourly Rate of Pay:	€
11. Deductions from Gross Weekly Salary:	€	Please specify purpose of deductions:	BUSCK-CAFIFALS
12. Health Insurance*;	€	Please specify name of Health Insurance Provider:	Brock-cyattlyth
* All amounts which make up the basic Annual Remuneration this must be veril (NERA) inspection.			
* Health Insurance can only be conside Undertakings referred to in section 14 o			in the Register of Health Benefits
13. Number of hours of work per week*:			
*Please note that for the purposes of Er	mployment Permit Applications, t	the standard working week is	39 hours per week.
14. What are the main functions of th	is job:	- 2 (I)(I)(y-)	IAPILKA3
	41,000	A DEPTAL	
15. Please detail the qualifications, s experience required for this job:	kills, knowledge and	14.0(0)	TARITRIS
	BLOCK	COFFIALS	
	34864	CAFITALS	

se detail the relevant qualifications, skills, vledge and experience of the Foreign Nationa	al: BLOCK CAPITALS
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	BLOCK CAPITALS
	BLOCK CAPITALS
ou use an Agent/Recruitment Agency to recr	ruit the Foreign National?
f 'Yes' please provide name and address of t	he BLOCK CABITALS
Agent/Recruitment Agency:	BLOCK CAPITALS
	BLOCK CAPITALS
'No' please provide details of the	BLOCK CAPITALS
ecruitment method:	BLOCK CAPITALS
	BLOCK CAPITALS
st now attach the documents outlined in Rec	
st now attach the documents outlined in Req	uirement for Supporting Documentation under "(C) Application Requir
st now attach the documents outlined in Req	uirement for Supporting Documentation under "(C) Application Requir
	uirement for Supporting Documentation under "(C) Application Requir
	guirement for Supporting Documentation under "(C) Application Require (if applicable)
	guirement for Supporting Documentation under "(C) Application Require (if applicable)

Part Five		Re	quiren	nent	for P	ayn	nent				
Is a fee payable for this Empl application? If No, please indicate on wha The Person who made the of applicant and has charitable Commissioners	t basis no fee is fer of employmer	applicable?	Yes		pplication is al married to	or in a		on-EE	ip]
Dependant/Partner/Spouse E	mployment Pern	nit		Exch	ange Agreen	ent Em	ployment	Pem	nit		
If no fee is payable proceed t	o Part Six.					=					_
			Detail	s of	Payr	nen	ŧ				
Important Note for Business In accordance with D/Finance of postal orders from business us based payments from business Transfer (EFT). Business user applicants for an e-mail address to request	Circular 1/2013, for ers in respect of s susers and has se employment per payment must b	om 19 Septen ervices rende et up a comme mits should e provided at	ic Funds Trans ther 2014 (e-Da red. To facilitate recial bank accor complete the C t Question 8. T	fer y) the pul e this, the unt into w contact D hey shou	olic sector wil Employment hich payment etails of Pay ald also com	Permits s can be er (Que plete Pa	ger accept Section we made by stions 1, 2 syment De	ill no Elect 2, 3, 4 tails	longe ronic I, 5, 6 (Que	Fund , 7, ar	ept paper is nd 8) – 9 and
 and Payers Declaration b Section as complete. An e-m the bank account into which the payment. 	ail will issue to the	applicant and	d their authorise	d agent (i	f applicable)	giving de	etails of the	e amo	ount o	f the t	fee due,
Applicants, other than business Contact Details	of Payer			ue, bank o	Iraft or postal	order a	nd must co	mple	te all	detail	s below
Please indicate who is male payment;	king the		ho has made employment		Foreign N	lational			Othe	r	
2. Title:	Mr	Mrs	Miss		Ms	Othe	er (please state)				
3. Name:			6.50	6 y (c)	althus						
4. Company (if applicable):			E EAT	01 P	FITTES						
5. Telephone Number:				6. Fax	Number:						
7. Mobile Phone Number:											
8. E-mail:											
Payment Details	<u> </u>										
9. Method of Payment:	Electronic Fu Trans		Cheque		Bank Dra	ift	Po	ostal	Orde	r _	
10. Cheque No.											
11. Payment enclosed / Amount of payment due:	€										
Payment must be in the form of Clearing System. Cheques sho Payer's Declarate. I, the undersigned, agree that (Under the Employment Permit	ould be made paya ION t in the case of a	refund of fee	partment of Joi	bs, Enter	prise and Ini nade payabl	ovation	n. Applican	t spe	cified	on P	age 1.
fee paid).	1										
Payer's Signature: (Original signature required)		Y-12-2				Date:	9 9	M	1/	TO Y	
Employment Permits Section is forwarded to the applicant for co 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: (Original signature required)		Title:
Name (in BLOCK CAPITALS):	BLDCK CHRITALS	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 as stated in Part 1 of this Form.	to be posted to the Person who has made	the offer of employment
Tick this box if you want your permit	to be posted to your Authorised Agent (if a	applicable).
	Page 9	ΕΔΕΡ002/1

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;
- 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.

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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,

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

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 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 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 16(1)(df) 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.
- 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 / 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 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 organisation operating the Exchange Agreement confirming that the Exchange Agreement applies to the Foreign National 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 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 Six - Acceptance of Terms & Conditions

Sign and date the appropriate declarations - original signatures required.

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@djei.ie

353-1-417 5333 Call Centre:

> LoCall: 1890 201 616 (from within Ireland only)

Fax: Address: 353-1-631 3268 Davitt House

65a Adelaide Road Dublin 2

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 H

Application form for grant of Sport and Cultural Employment Permit



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

SCEP002/15

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 employments in sport and cultural activities other than those employments for which an employment permit shall not be granted pursuant to Schedule 4 in the Principal

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

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

Recent Passport Photograph

Please print Foreign National's name on back of photograph and staple here.

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 Par

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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
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
If the Person who has made the offer of employment is a Charity, please supply the Charity Number:		Obtained from the Revenue Commissioners
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Page 1

SCEP002/15

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Documentation under "(B) Foreign National

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 Yes No over the last six months? 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: 8000 0 to 0 to 0 to 0

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Position Held:

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If no fee is payable proceed t	o Part Six.						
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Important Note for Business In accordance with D/Finance of postal orders from business us based payments from business Transfer (EFT).	Circular 1/2013, from 19 Sep ers in respect of services re	ptember 2014 (e-Da endered, To facilitat	y) the public sec e this, the Emplo	yment Permits	Section wil	I no longer	accept pa
Business user applicants for an e-mail address to request 11) and Payers Declaration b Section as complete. An e-m the bank account into which the payment.	payment must be provide elow and payment will be all will issue to the applican	ed at Question 8. To requested when a it and their authorise	hey should also n application is d agent (if applic	o complete Pa accepted into able) giving de	ayment Det the Emplo etails of the	ails (Quest syment Per amount of t	ion 9 and mits the fee du
Applicants, other than business Contact Details	NAME AND ADDRESS OF THE OWNER, WHEN PERSON O	e payment by cheq	ue, bank draft or	postal order a	nd must cor	nplete all de	etails belo
Please indicate who is male		who has made		And the same		2000	
payment:		of employment	For	eign National		Other	
2. Title:	Mr Mrs	Miss	Ms	Othe	er (please state)		
3. Name:		8 1.0	CK EARIT	0 1 5			
4. Company (if applicable):		-0 ex	ck signif	0.07			
5. Telephone Number:			6. Fax Numb	er:			
7. Mobile Phone Number:							
8. E-mail:							
Payment Details	CT IX						
9. Method of Payment:	Electronic Funds Transfer	Cheque	Ва	nk Draft	Ро	stal Order	
10. Cheque No.							
11. Payment enclosed / Amount of payment due:	€	1					
Payment must be in the form o Clearing System. Cheques sho						perating with	hin the Iris
Payer's Declarat	ion						
I, the undersigned, agree tha (Under the Employment Permit	t in the case of a refund o						
fee paid). Payer's Signature: (Original signature required)				Date:	0 0	- 1/-	6 6
Employment Permits Section is forwarded to the applicant for of 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 areas 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: (Original signature required)		Title:	
Name (in BLOCK CAPITALS):	SUBSE CAPITALS	Date:	y' 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 as stated in Part 1 of this Form.	to be posted to the Person who has made t	he offer of employment	
Tick this box if you want your permit	to be posted to your Authorised Agent (if a	pplicable).	
	Page 9		SCEP002/15

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:

 o 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, 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 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):	BELLOW DEFITALS	Title:
Position Held:	BIUCH CHEFTINS	Date:
Your certified copy of the en	nployment permit will normally be Part 1 of this Form.	posted to you at your current address as i
Fick this box if you want your certifie	ed copy of the employment permit to be po-	
	ed copy of the employment permit to be po	sted to your Authorised Agent
Tick this box if you want your certifie (if applicable).	ed copy of the employment permit to be po	sted to your Authorised Agent

Inderstand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an imployment Permit. Date:	Inderstand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an imployment Permit. Date:	gent Name BLOCK CAPITALS):	BLOCK CAPITALS	Title:		
gent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Town: BLOCK CAPITALS County: BLOCK CAPITALS Country: BLOCK CAPITALS Country: BLOCK CAPITALS Telephone number: Telephone number: Telephone number: Telephone number: Date: Da	gent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Town: BLOCK CAPITALS County: BLOCK CAPITALS County: BLOCK CAPITALS Town: BLOCK CAPITALS LOCK CAPITALS County: BLOCK CAPITALS LOCK CAPITALS LOCK CAPITALS Date: Date:	understand that neither I, nor a person a	acting on my behalf, shall keep any person	nal document belo	onging to a	holder of an
gent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Town: BLOCK CAPITALS County: BLOCK CAPITALS Country: BLOCK CAPITALS Le-mail address: Telephone number: Telephone number: The Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application ignature of Person who has nade the offer of employment: Date: Da	gent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Address 2: County: County: E-mail address: Telephone number: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application ignature of Person who has nade the offer of employment: One of Person who has nade the offer of employment ignature required) The Foreign National, permit the above named agent to act on my behalf in respect of this application. Ignature of Foreign National:					
Address 2: Town: BLOCK CAPITALS County: BLOCK CAPITALS Country: E-mail address: Telephone number: Telephone number: The Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date: Date:	Address 1: Address 2: BLOCK CAPITALS Town: BLOCK CAPITALS County: BLOCK CAPITALS Country: BLOCK CAPITALS E-mail address: Telephone number: Telephone number: The Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application original signature required) The Foreign National: Date: D	ignature of Agent: Driginal signature required)		Date:	D D	M. M. Y. Y
Address 2: Town: BLOCK CAPITALS County: BLOCK CAPITALS Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date: Dat	Address 2: Town: BLOCK CAPITALS County: BLOCK CAPITALS Country: BLOCK CAPITALS Country: E-mail address: Telephone number: Telephone number: The Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date:	gent's Address for Correspondence:				
Town: County: BLOCK GAPITALS Country: BLOCK GAPITALS E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application are foreign National; permit the above named agent to act on my behalf in respect of this application. Ignature of Foreign National: Date: D	Town: County: BLOCK CAPITALS Country: BLOCK CAPITALS Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application are application of Person who has lade the offer of employment: Date: Date:	Address 1:	BLOCK C	APITALS		
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Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application are foreign National, permit the above named agent to act on my behalf in respect of this application.	Country: E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this applic ignature of Person who has lade the offer of employment: Date:	Town:	BLOCK C	APITALS		
E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date: Dat	E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date: Dat	County:	BLOCK 6	APITALS		
Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date:	Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this application and the offer of employment: Date:	Country:	BLOCK C	APITALS		
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the Foreign National, permit the above named agent to act on my behalf in respect of this application.	the Foreign National, permit the above named agent to act on my behalf in respect of this application.	ignature of Person who has	inployment, permit the above named agen	_	nan in resp	
ignature of Foreign National:	ignature of Foreign National:			Date.	The Late	INC. INC. I
		the Foreign National, permit the above	named agent to act on my behalf in respec	ct of this applicati	on.	
				Date:	D D	M M Y - Y
		riginal signature required)				

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 the3 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 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,
- 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 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 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 <u>must</u> 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)(df) 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.
- 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 / 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 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 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:

- 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 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.

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@djei.ie

Call Centre: 353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

Fax: 353-1-631 3268

Davitt House 65a Adelaide Road Dublin 2 Ireland Address:

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.

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Form I

Application form for grant of Internship Employment Permit



An Roinn Post, Fiontar agus Nuálaíochta 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 employments 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 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).

Recent Passport Photograph X1

Please print Foreign National's name on back of photograph and staple here.

In accordance with the Employment Permits Act 2006, as amende seek to recover the fee, if appl	nit (i.e. Who is the applicant)? Id, an employer making an Employment Permit application may not icable, from the foreign national. In the property of the
Person who has made the offer of employment	Foreign National
Health Pr If this is an application for a Health Professional list Principal Regulations plea	
	Details of Person who has offer of employment

	maac	THE SE	11121	or 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
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
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

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the Person who h	as made the offer of e	Questions 6, 7, 8 and employment is a Limite	ed Company, please proceed to Questio
If the Person who has	made the offer of employm	ent is not a registered com	pany, please indicate what type of entity it is:
Sole Trader	Partnership	Other (please specify):	PROUK SEPTEM
Please state the full na employment:	me of the Person who has	made the offer of	A L D C HOCA B IT A US
Please state the nation employment:	nality of the Person who ha	s made the offer of	SLOCK CAPITALS
If the Person who has for Justice and Equa	made the offer of employm	nent is not an EEA citizen, d n the State?	o they hold appropriate permission from the Minis
Yes No	Not applicable	If Yes, please specify:	
		mentation from the Minister for	r Justice and Equality confirming your permission to ments for Supporting Documentation).
). Registered name of 0	company/Business:		BLOCK CAPITALS
1. Trading name of busi	ness (if different):	-	BLOCK CAPITALS
2. Nature of business:		BTDCC C	777 777 7877
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		1 00	
I. Telephone Number:		15.	Fax:
6. Mobile Phone Number:			
7. E-mail:			
8. Website:			
		en of	imber of non-EEA nationals currently inployed by the Person who has made the fer of employment:
	somner States of the Europe	an Union together with Icelan	d, Norway & Liecntenstein.

art Two	Details of	f Foreign	National		
1. Passport Number:					
2. Expiry Date:	0 0 6 4 4	Ente	er these details		
3. Nationality:	BLOOK CAPITALS		as they appear on preign National's		
4. First Name:	BIDDA DARITALS	and 1 c	passport.		
5. Middle Name(s):	BUOCK CAPITALS				
6. Family Name:	SUDON DARITALS				
7. Date of Birth:	0 M W Y Y	8. Male:	9. Female:		
Current Address (foreign a	address required if residing outside the State)):			
Address 1:		CE CAPITALS			
Address 2:	BLOCK CAPITALS				
Town:	810	CE CAPITALS			
County:	8 \ 0	THE GAPITALE			
Country:	0.0	THE CAPTIALS			
Telephone No.:	12:	: Mobile Phone No.:			
Please provide the Foreig	n National's PPS Number if available:				
E-mail address:					
Is the Foreign National cu	rrently in the State?	Yes	No No		
	re they currently in the State, please descr	ribe and			
	tails, as requested, below:	0	LOCK DARTIALS		
			factories and the same of the		
Er	nter below details exactly as they appear o	on the Foreign National	's GNIB card*.		
GNIB Pin No.		Dept. No.			
	State but does not have a GNIB personal id	lentification number then	please supply a copy of the current		
f the Foreign National is in the imigration stamps and visa. If the Foreign National h working lawfully during Naturalisation and Immig		for an uninterrupted per a Stamp 4 permission	eriod of 5 years and has been to remain from the Irish		
	bmitting this application the Foreign Natio at an employment permit is still required.	onal confirms that s/he	has considered the available		
	Page 3		IE		

e.g. Certificate, Diploma, Degree, etc.	BLOCK CAPITALS	17. Date of Completion:
. Title of Course:	BLOCK CAF	TTALS
. Final Subjects Taken:	BLOCK CAPITALS	BLOCK CAPITAL
	BLOOK CAPITALS	BLOOK CAPITALS
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. Result Achieved: e.g. 2.1		
Has the Foreign National previo	ously made an application for asylum in the	Yes No
. Has the Foreign National sough	nt permission to land in the State on a	Yes No
previous occasion?	hat basis the permission was sought and	
indicate whether or not permi		BLOOK CARITALE
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Has the Foreign National been i permission?	in the State on a previous occasion without	HH
Has the Foreign National been i permission?	in the State on a previous occasion without	Yes No
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Part Three	Details of F	Redundancy	
the meaning of section 9 of the Redu	has made the offer of employment in respect undancy Payments Act 1967 and where such a), (b), (c), (d) or (e) of section 7(2) or to sect	t of any dismissals by reason dismissal was attributable wi	of redundancy within
Please complete and sign the declar	ation below in full.		
	who has made the offer of employment been the subject of this Employment Permit appl		No
last six months please outline the re that employment that have been made	edundant in the employment that is the subje ason(s) for the redundancies. This should in de redundant and explain how the position, v ions in that employment made redundant. P	nclude information on the num which is the subject of this Em	nbers of positions in ployment Permit
			4
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):	\$100 + \$100 m h	Title:	
Position Held:	EAFTTALS	Date:	3.0 9 9
			4-4-4-4
	Page 5		IEP002/15

Part Four	Det	tails of Emplo	oyment
1. Title of Job;		SLOCK CAPITALS	
NOTE: Questions 2 and 3 to Part	be completed by Hea A and Part B of Sche	alth Professionals and Se dule 2 in the Principal Re	curity Personnel who are listed agulations.
2. Regulatory Body:		SLDCK DEPITALS	
3. Registration/Pin/ Licence No.:			
If the application is in respect of Re please provide your registration de			of Schedule 2 in the Principal Regulations
Applications for other Health Profes with the appropriate medical body			ons must provide a copy of their registration alth.
4. Place(s) at which the employme	nt concerned is to be carrie	ed out:	OOK CAPITALE
		BLOCK CAPITALS	
5. Proposed Period of Employmen Permit (maximum of 1 year)			
6. Proposed Start Date*:	D: 20 W W	W 0.	
*We recommend all Employment Per employment.	mit applications be submitted	I to the Department at least 12 we	eks before the proposed start date of
7. Gross Annual Remuneration*	€	(Gross remunerati	ion excludes overtime or nts)
8. Gross Annual Salary: (if different from above)	€		
9. Gross Weekly Salary:	€	10. Hourly Rate of Pay:	€
11. Deductions from Gross Weekly Salary:	E	Please specify purpose of deductions:	GUNTE-CAPITAL
12. Health Insurance [†] :	E	Please specify name of Health Insurance Provider:	OUNTA DESTANDA
			National Employment Rights Authority
* Health Insurance can only be consi Undertakings referred to in section 1-			d in the Register of Health Benefits
13. Number of hours of work per week*:			
*Please note that for the purposes of	Employment Permit Applicat	ions, the standard working week is	s 39 hours per week.
14. What are the main functions of	this job:	(aliack	CARITALS
	- P E U	CR MARITALS	
15. Please detail the qualifications experience required for this job	skills, knowledge and	8.0CR	0.40/TA45
	(34.0	DE CKEIT HAS	

se detail the relevant qualifications, skills vledge and experience of the Foreign Nat	ional:	BLO	CK CAPITALS	3
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	BLOCK	K CAPITALS		
	BLOCK	K CAPITALS		
ou use an Agent/Recruitment Agency to	recruit the Fore	ion National?	Yes	No
f 'Yes' please provide name and address		ign National:	16.	
Agent/Recruitment Agency:	of the	BLO	CK CAPITALS	5
	BLOCK	K CAPITALS		
	BLOCK	K CAPITALS		
'No' please provide details of the ecruitment method:		BLOCK	CAPITALS	
	BLOCK	CAPITALS		
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Part Five		F	Requi	reme	ent	for l	Payn	nent				
s a fee payable for this Emplo application?	oyment Permi	it	Yes					N	lo			
f No, please indicate on what The Person who made the offe applicant and has charitable s Commissioners	er of employn	nent is the	17		nationa	al marrie	spect of a d to or in an EEA n	a civil				
Dependant/Partner/Spouse En	nployment Pe	ermit			Excha	nge Agr	eement Er	nploymer Perm				
f no fee is payable proceed to	Part Six.		_						_			
			De	etails	of	Pay	men	t				
Important Note for Business in accordance with D/Finance C postal orders from business use passed payments from business Transfer (EFT).	circular 1/2013, ers in respect of	from 19 Sep of services ren	tember 201 ndered. To	4 (e-Day) the facilitate this	is, the E	mployme	nt Permits	Section v	ill no	longer	acc	ept p
Business user applicants for ean e-mail address to request p (11) and Payers Declaration be Section as complete. An e-ma he bank account into which the payment. Applicants, other than business	payment must slow and paym all will issue to payment shou users can con	t be provided ment will be a the applicant ald be made a atinue to make	d at Questi requested of and their and and an Appl	on 8. They when an ap uthorised ag ication ID n	should oplication gent (if a umber w	also co n is acc pplicable hich <u>mu</u>	mplete Pa epted into e) giving de st be used	yment De the Emp tails of the as the re	etails loym e amo feren	(Ques ent Pe ount of ce whe	tion rmit the f n ma	9 an s ee d aking
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 Please indicate who is maki payment: 	ing the		n who has r of employ			Foreign	National			Other		
. Title:	Mr	Mrs		Miss	Ms		Othe	r (please state)				
. Name:		1		BLOCK	CA.	17.5	3					
. Company (if applicable):				8.000) SAP	11641	8					
. Telephone Number:				6	. Fax Nu	ımber:						
7. Mobile Phone Number:												
s. E-mail:							1					
Payment Details		- 11										
. Method of Payment:	Electro	nic Funds Transfer		Cheque		Bank D	raft	P	ostal	Order		
0. Cheque No.					T							
1. Payment enclosed / Amount of payment due:	€											
Payment must be in the form of clearing System. Cheques show Payer's Declaration the undersigned, agree that under the Employment Permits see paid).	uld be made pa On In the case o	ayable to the	Department fees, the p	t of Jobs, a	Enterpri	se and i	nnovation	Applican	t spe	cified	on P	age
Payer's Signature: Original signature required)							Date:	p D	M	W.	ů.	
Employment Permits Section is forwarded to the applicant for co 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: (Original signature required)		Title:
Name (in BLOCK CAPITALS):	BLOCK CARITALS	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 as stated in Part 1 of this Form.	to be posted to the Person who has made t	he offer of employment
Tick this box if you want your permit	to be posted to your Authorised Agent (if a	pplicable).
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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, 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

signature of Person who has nade the offer of imployment: Original signature required)		
lame (in BLOCK CAPITALS):	SIDCH-DARITHLE-	Title:
Position Held:	REDER DARKTALET	Date:
Volumnieru.	55500 94011120	
		posted to you at your current address a
Your certified copy of the em	ployment permit will normally be p	posted to you at your current address a

Page 10

gent Name	BLOCK CAPITALS	Title:	
in BLOCK CAPITALS):	DEGEN CAPITALS	mue.	
understand that neither I, nor a person mployment Permit.	acting on my behalf, shall keep any persor	nal document bel	onging to a holder of an
gnature of Agent: priginal signature required)		Date:	D D M M Y Y
gent's Address for Correspondence:			
Address 1:	EL DCK. C	APITALS.	
Address 2:	BLOCK	APITALS	
Town:	BLOCK C	APITALS	
County:	BLOCK C	APITALS	
Country:	BLOCK C	ADITALS	
	drook c	METHORES!	
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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,

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

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, and
- . 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 Employments Permits Act 2006, as amended. The current fees applicable are available on the Department's website

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 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

- 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.

 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)(df) 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.
- 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 / 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 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:

- confirmation 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

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 (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 Six - Acceptance of Terms & Conditions

Sign and date the appropriate declarations - original signatures required

EMPLOYMENT PERMITS SECTION

Contact Details

E-mail: employmentpermits@djei.ie

Call Centre: 353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

Fax: 353-1-631 3268

Address: Davitt House

Davitt House 65a Adelaide Road Dublin 2

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.

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Form J

Application form for renewal of Dependant/Partner/Spouse Employment Permit



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

RDPSEP002/15

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 Dependent/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,

5. If the Employer is a Charity, please

supply the Charity Number;

- 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).

Recent Passport Photograph X1

Please print
Foreign National's name
on
back of photograph
and staple here.

Obtained from the Revenue Commissioners

RDPSEP002/15

In accordance with the Employment Pe	rmits Act i	2006, as am or the fee, if	ended, an applicable,	employer ma	o is the applicant)? nking an Employment Permit application may not reign national. lications)
Employer					National (Holder byment Permit)
If this is an application for a Heart One	alth Prof pal Regu	essional ulations p	listed in please tic	k this box	
Employer Registered Number:	I C G	Journal		Deta	Obtained from the Revenue Commissioners
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
If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Pagistration Number:					Obtained from the Registry of Friendly Societies

Page 1

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): SLCCK CAPITALS 7. Please state the full name of the Employer: SLOCK CAPITALS 8. Please state the nationality of the Employer: SLUCK 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? If Yes, please specify: Yes No Not applicable BLOCK EAPITALS 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: BLOOK CAMITALS 11. Trading name of business (if different): REDCK CAPITALS 12. Nature of business: BLOCK-GAPITALS 13. Company/Business Address: Address 1: BLOCK CAPITALS Address 2: BUDGER, CAPITALS Town: BLOCK CAPITALE County: ELOCK GAPITALS Country: 14. Telephone Number: 15. Fax: 16. Mobile Phone Number: 17. E-mail: 18. Website: 19. Number of EEA* and/or Swiss nationals (including 20. Number of non-EEA nationals currently Irish) currently employed by the Employer: 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." RDPSEP002/15

Details of Foreign National Part Two (Holder of Employment Permit) 1. Passport Number: 2. Expiry Date: Enter these details exactly BUDDE CAPITAL O 3. Nationality: as they appear on the Foreign National's passport. 4. First Name: BLODIC CARITALS 5. Middle Name(s): BLOCK CAFITALS 6. Family Name: BLODE CAPITALS 7. Date of Birth: 8. Male: 9. Female: 10. Telephone No.: 11: Mobile Phone No.: BLOCK CAPITALE 12. Current Address: BLOCK CAPITALS BLOCKICARITALS 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** 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 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 Emplo	yment
1. Title of Job:	SLOC8	CHARITALE	
	o be completed by Health Pro rt A and Part B of Schedule 2 i		curity Personnel who are listed egulations.
2. Regulatory Body:	-31.00	s continue	
3. Registration/Pin/ Licence No.:			
Regulations please provide your re	egistered Doctors, Nurses or Security Pe egistration details above. Documentary e	vidence will not be requ	iired.
	ssionals listed in Part B of Schedule 2 in or recognition of their qualifications from		ons must provide a copy of their registration of their registration
4. Place(s) at which the employme	ent concerned is to be carried out:	Bu	DES CAFITALS
	BLDCS	ChP)Toks	
5. Proposed Period of Employmer Permit (maximum period of 3 years)*	ıt.		
the renewal stage if a foreign national	ited permit, please write "Unlimited" in th al has been in continuous employment w tions should be submitted to this Departr	ith the same employer	for five years or more. Please note that a
6. Gross Annual Remuneration*	€	(Gross remunerati	on excludes overtime or ats)
7. Gross Annual Salary: (if different from above)	€		
8. Gross Weekly Salary:	€	9. Hourly Rate of Pay:	€
10. Deductions from Gross Weekl Salary:	Ϋ́	Please specify purpose of deductions:	SEREX VANITAGE
11. Health Insurance [*] :	€	Please specify name of Health Insurance Provider:	STOCK EVELLANTS
	sic salary must appear as payments on t		nsurance is being included in the Gross such documentation may also be require
Annual Remuneration this must be v	erifiable by way of supporting document nt Rights Authority (NERA) inspection.	ation at renewal stage;	2000 0000000000000000000000000000000000
Annual Remuneration this must be v in the event of a National Employme † Health Insurance can only be cons			
Annual Remuneration this must be vin the event of a National Employme Health Insurance can only be consulted to in section 1	nt Rights Authority (NERA) inspection. idered if the provider of the health insura		
Annual Remuneration this must be v n the event of a National Employme Health Insurance can only be cons Undertakings referred to in section 1 12. Number of hours of work per week*:	nt Rights Authority (NERA) inspection. idered if the provider of the health insura	nce is a person entered	d in the Register of Health Benefits
Annual Remuneration this must be vin the event of a National Employme Health Insurance can only be cons Undertakings referred to in section 1 Number of hours of work per week*:	nt Rights Authority (NERA) inspection. idered if the provider of the health insura 4 of the Health Insurance Act, 1994. of Employment Permit Applications, the s	nce is a person entered	d in the Register of Health Benefits

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Details of Primary Permit Holder/ Researcher 1. Passport Number: 2. Expiry Date: Enter these details exactly as they appear on 3. Nationality: BLOCK CAPITALS the Primary Permit Holder's or Researcher's 4. First Name: BLOCK CAPITALS passport. 5. Middle Name(s): BLOCK CAPITALS 6. Family Name: BLOCK CAPITALS 7. Date of Birth: 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)

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Part Three A

Part Four		Requir	emen	t for F	ayr	nent		
ls a fee payable for this Emp application?	loyment Permit	Yes				No		
f No, please indicate on wha	at basis no fee is applica	able?						
he Employer is the applicar he Revenue Commissioners		atus with		cation is in re national ma partnership w	arried to	or in a civi	1	
Dependant/Partner/Spouse E	Employment Permit			nlimited Gene and Cultural				
no fee is payable proceed t	to Part Five.							
		Det	ails c	of Payı	men	t		
mportant Note for Business n accordance with D/Finance oostal orders from business us pased payments from business fransfer (EFT). Business user applicants for an e-mail address to request 11) and Payers Declaration b	Circular 1/2013, from 19 s ers in respect of services s users and has set up a d r employment permits sit payment must be provi	September 2014 (rendered. To fac commercial bank a hould complete t ided at Question	e-Day) the p dilitate this, the account into the Contact 8. They sho	ne Employmen which paymen Details of Pa ould also con	t Permits its can be yer (Que iplete Pa	Section will e made by E stions 1, 2, syment Det	Il no longer Electronic f , 3, 4, 5, 6, ails (Ques	accept pa Funds 7, and 8)
Section as complete. An e-me the bank account into which the payment.	nail will issue to the applic	ant and their auth	orised agent	(if applicable)	giving de	etails of the	amount of	the fee du
Applicants, other than business	s users can continue to m	nake payment by o	heque, bank	draft or posta	l order a	nd must cor	nplete all o	letails belo
Contact Details	of Payer							
. Please indicate who is ma	king the payment:	Emplo	yer	Foreign	National		Other	
. Title:	Mr M	rs Mis	ss	Ms	Othe	r (please state)		
. Name:		- i	EDEK I	(Birota				
. Company (if applicable):		E	(FICE ((BXT)(S				
. Telephone Number:		= 1	6. Fa	x Number:				
. Mobile Phone Number:								
S. E-mail:								
Payment Details	U - 0							
. Method of Payment;	Electronic Funds Transfer	Chec	lue	Bank Dr	aft	Po	stal Order	
0. Cheque No.								
Payment enclosed / mount of payment due:	•							
Payment must be in the form of Clearing System, Cheques sho							perating w	thin the In:
Payer's Declarat	ion							
the undersigned, agree that Under the Employment Permit see paid).								
Payer's Signature; Original signature required)	the same of the sa				Date:	o' b'	M 7/4	
Employment Permits Section is forwarded to the applicant for 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;

Signature of Foreign National:		Title:					
Original signature required)				4		-	
Name (in BLOCK CAPITALS):	SLOCK CAPITALS	Date:	0 1	М	À	Y Y	
our employment permit will i	normally be posted to you at your	current addre	ss as i	n Par	t 2 of	this F	orm.
ick this box if you want your permit	to be posted to your current address.						
lick this box if you want your permit	to be posted to the Employer as stated in I	Part 1 of this Forn	1.				
Fick this box if you want your permit	to be posted to your Authorised Agent (if a	applicable).				Ė	
and soon it you main your permit	es heared to long transcripts Whell (ii.e.	-FFdamel					
	Page 7					RDPSI	ED002/

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 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 is 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):	BLOOD CAMPAL	Title:	
Position Held:	REOCK EPHILIPER	Date:	A M. W. W.
Your certified copy of the em	ployment permit will normally be		irrent address as in
Tick this box if you want your certifie	Part 1 of this Form.	The state of the s	
Tick this box if you want your certifie (if applicable).	ed copy of the employment permit to be po	sted to your Authorised Agent	

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ent Name	
BLOCK CAPITALS):	BLOCK CAPITALS Title:
nderstand that neither I, nor a person aployment Permit.	n acting on my behalf, shall keep any personal document belonging to a holder of an
nature of Agent: riginal signature required)	Date: D D M M Y Y
ent's Address for Correspondence:	
Address 1:	BLUCK CAPITALS
Address 2:	BLOCK CAPITALS
Town:	BEOCK CAPITALS
County:	BLOCK CAPITALS
Country:	BLOCK CAPITALS
E-mail address:	
Telephone number:	
nature of Employer:	Date: D D M M Y Y
riginal signature required)	
	e named agent to act on my behalf in respect of this application.
gnature of Foreign National:	
ne Foreign National, permit the above	e named agent to act on my behalf in respect of this application.
ne Foreign National, permit the above	e named agent to act on my behalf in respect of this application.
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ne Foreign National, permit the above	e named agent to act on my behalf in respect of this application.

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 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

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 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, or
- · 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, or
 - 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.

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 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 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 Return (NERA) inspection. Failure to comply could lead to the revocation of the Employment Permit under section 16(1)(df) 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.
- 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(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. 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 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 supply clear copies (preferably in colour) of the following in respect of 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.

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 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

Contact Details

E-mail:

employmentpermits@djei.ie

Call Centre:

353-1-417 5333 LoCall: 1890 201 616 (from within Ireland only)

Fax: Address: 353-1-631 3268 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 K

Application form for renewal of General Employment Permit



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

RGEP002/15

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 renewal 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, 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

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

Recent Passport Photograph

Please print Foreign National's name on back of photograph and staple here.

RGEP002/15

Employer					National (Holder byment Permit)
If this is an application for a H Prin Part One	cipal Reg	fessiona gulations	please tic	Part A or F k this box	
art One	Ver	jisu	ation	Deta	ils of Employer
. Employer Registered Number:					Obtained from the Revenue Commissioners
Company Name Registered Number (if applicable):					Obtained from the Companies Registration Office
Business Name Registered Number (if applicable):					Obtained from the Companies Registration Office
I. If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply thei Registration Number:		ĬĬ	TI		Obtained from the Registry of Friendly Societies
Provident Society, a Friendly Society or a Trade Union, please supply their		ĬĬ			Obtained from the Registry of Friendly Soci

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: BLOCK CARITALS 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? If Yes, please Not applicable Yes No BLOCK DAPITALS 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: BLOCK CAPITALS 11. Trading name of business (if different): BLOCK CAPITALS 12. Nature of business: BLOOK CAPITALS 13. Company/Business Address: Address 1: BEDOX CAPTURES Address 2: BLOCK CAPITALS Town: BLUUX CAPITALS County: BLOOK CAPITALS Country: BLOCK CAPITULE 14. Telephone Number: 15. Fax: 16. Mobile Phone Number: 17. E-mail: 18. Website: 20. Number of non-EEA nationals currently employed by the Employer: Number of EEA* and/or Swiss nationals (including Irish) 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."

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1. Passport	Number:								
2. Expiry Da	ate:	D M M X X							
3. Nationali	ty:	вгорж су	P) T 4.5, 6 =		hese d				
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5. Middle Na	ame(s):	BLOCK CAT	PITALS						
6. Family Na	ame:	BIDOK CAI	PITALS						
7. Date of B	irth:	0 0 N N Y Y		8. Male:	9,	Female:			
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6. Immigration I	Details (Plea:	se enter the details exactly	as they appear on	your current GNIB car	d*)				
GNIB Pin No.				ept. No.					
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deductions: Please specify	art Three	Details	s of Emplo	yment
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week*:	ealth Insurance can only be consid	dered if the provider of the health ins		d in the Register of Health Benefits
Please note that for the purposes of Employment Permit Applications, the standard working week is 39 hours per week.	Number of hours of work per week*:			
	ease note that for the purposes of	Employment Permit Applications, the	he standard working week	is 39 hours per week.
13. What are the main functions of this job:	What are the main functions of	this job:	0.000	CATO 313
ALONS CARITAY		01 ons /	DATE A	
You must now attach the documents outlined in Requirement for Supporting Documentation under "(C) Application Requi	u must now attach the docume	nts outlined in Requirement for S	upporting Documentation	n under "(C) Application Requiremen
(if applicable)		(if applic	eable)	

Part Four		Requir	emen	t for l	Payn	nent				
ls a fee payable for this Empl application?	loyment Permit	Yes				N	0			
f No, please indicate on wha	t basis no fee is applic	able?					-			
The Employer is the applicant the Revenue Commissioners		atus with	- A. W. C. L.	cation is in r national n partnership	narried to	or in a civ	il			
Dependant/Partner/Spouse E	mployment Permit			nlimited Ger and Cultura						
no fee is payable proceed t	to Part Five.									
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Important Note for Business In accordance with D/Finance (postal orders from business us based payments from business Transfer (EFT).	Circular 1/2013, from 19 ers in respect of services	September 2014 s rendered. To face	(e-Day) the p cilitate this, th	ne Employme	ent Permits	Section w	ill no	longer	ассер	
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Applicants, other than business		nake payment by	cheque, bank	draft or pos	tal order a	nd must co	mple	te all d	etails l	belo
Contact Details	of Payer	1								
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the undersigned, agree tha Under the Employment Permit	t in the case of a refun									
					Date:	0 0	1	11		Ç
(Original signature required) Employment Permits Section is forwarded to the applicant for othe mandate form.					or any reas			orm wi		1

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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 quilty of an offence.

nature of Foreign tional:		Title:					
riginal signature required)							
me (in BLOCK CAPITALS):	SLOCK CAPITALS	Date:	D D	М	ÀF	Y	8
our employment permit will i	normally be posted to you at your	current addres	ss as ir	Part	2 of	this	Forn
k this box if you want your permit	to be posted to your current address.						
k this box if you want your permit stated in Part 1 of this Form.	to be posted to the Person who has made	the offer of emplo	yment				
k this box if you want your permit	to be posted to your Authorised Agent (if	applicable).					

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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 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):	BINDS CAMPLE	Title:
Position Held:	BIANTHE MODE	Date:
Your certified copy of the en	nployment permit will normally be Part 1 of this Form.	posted to you at your current address as in
Tick this box if you want your certific	ed copy of the employment permit to be po	
Tick this box if you want your certific (if applicable).	ed copy of the employment permit to be po	osted to your Authorised Agent

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

Understand that neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of Employment Permit. Signature of Agent: (Original signature required) Agent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Address 2: BLOCK CAPITALS County: BLOCK CAPITALS County: BLOCK CAPITALS 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 Signature required) I, the Foreign National, permit the above named agent to act on my behalf in respect of this signature required) Date: Dat	Agent Name	10 0 0 V V V V V			
Employment Permit. Signature of Agent: (Original signature required) Agent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Address 2: Town: BLOCK CAPITALS Country: BLOCK CAPITALS Country: BLOCK CAPITALS 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 Signature required) Date: Dat	(in BLOCK CAPITALS):	BLOCK CAPITALS	Title:		
Agent's Address for Correspondence: Address 1: Address 2: BLOCK CAPITALS Town: County: BLOCK CAPITALS B		acting on my behalf, shall keep any person	nal document belo	nging to a ho	lder of an
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Address 2: Town: BLOCK CAPITALS County: BLOCK CAPITALS E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this signature of Employer: Original signature required) Date: Da	Agent's Address for Correspondence:				
Town: County: BLOCK CAPITALS E-mail address: Telephone number: the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this signature of Employer: Original signature required) Date: D	Address 1:	BLOCK	CAPITALS		
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the Person who has made the offer of employment, permit the above named agent to act on my behalf in respect of this ignature of Employer: Date: Da	Telephone number:				
Signature of Foreign National: Original signature required) Date: Date	Original signature required)				MYY
Original signature required)	the Foreign National, permit the above	named agent to act on my behalf in respec	ct of this application	on.	
			Date:	D D N	C M Y Y
D					
Page 8		Page 8			RGEP00

Authorisation of Agent

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 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 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 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)(df) 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.
- 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(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. Employer or the Foreign National (Holder of Employment Permit)).

Part One - Details of Employer: Complete all questions

- Employer should include <u>copies</u> 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 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 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

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 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@djei.ie

353-1-417 5333 Call Centre:

LoCall: 1890 201 616

(from within Ireland only)

Fax: 353-1-631 3268 Davitt House Address:

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

LEASE 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



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

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Passport Photograph

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
- 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 applicant or the

X1

Please print Foreign National's name on the back of photograph and staple here.

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.

Part One I	Registr	ation l	Details	of Connected Person
Employer Registered Number:				Obtained from the Revenue Commissioners
2. Company Name Registered Number:				Obtained from the Companies Registration Office
Business Name Registered Number (if applicable):				Obtained from the Companies Registration Office
4. If the Connected Person is an Industrial and Provident Soci a Friendly Society or a Trade Union, please supply their Registration Number:				Obtained from the Registry of Friendly Societies
5. If the Connected Person is a Charity, please supply their Charity Number:				Obtained from the Revenue Commissioners
6. Registered name of Company	/Business:			aldon terifees
7. Trading name of business (if	different):			PLOCK CAPITALS
8. Nature of business:				(is curing

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ompany/Business ddress:		BLOCK CAPITALS
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. Telephone Number:		11. Fax Number:
Mobile Phone Numb	er:	
E-mail address:		
Website:		
	I/or Swiss nationals (including oyed by the Connected Person:	16. Number of non EEA nationals currently employed by the Connected Person:
	Member States of the European Union toge	
1.0		(4) = -
Part One	A Details	of the Foreign Employer
Name of Foreign Emp	oloyer:	BLOCK CAPITALS
Address of Foreign E	mployer:	BLOCK CAPITALS
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You must now attach		BLOCK CAPITALS
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Part Two	Details	BLOCK CAPITALS BLOCK CAPITALS or Supporting Documentation under "(A) Requirements for Conversion." of Foreign National of Employment Permit)
Part Two 1. Passport Number:	Details (Holder o	BLOCK CAPITALS BLOCK CAPITALS or Supporting Documentation under "(A) Requirements for Concerson." of Foreign National of Employment Permit) Enter these details exactly as they appear on the Foreign National's
Part Two 1. Passport Number: 2. Expiry Date:	Details (Holder o	BLOCK CAPITALS BLOCK CAPITALS or Supporting Documentation under "(A) Requirements for Converson." of Foreign National of Employment Permit) Enter these details exactly as they
2. Expiry Date: 3. Nationality:	Details (Holder of	BLOCK CAPITALS BLOCK CAPITALS or Supporting Documentation under "(A) Requirements for Concerson." of Foreign National of Employment Permit) Enter these details exactly as they appear on the Foreign National's
Part Two 1. Passport Number: 2. Expiry Date: 3. Nationality: 4. First Name:	Details (Holder of	BLOCK CAPITALS BLOCK CAPITALS or Supporting Documentation under "(A) Requirements for Concerson." of Foreign National of Employment Permit) Enter these details exactly as they appear on the Foreign National's
Part Two 1. Passport Number: 2. Expiry Date: 3. Nationality: 4. First Name: 5. Middle Name(s):	Details (Holder of	BLOCK CAPITALS BLOCK CAPITALS or Supporting Documentation under "(A) Requirements for Concerson." of Foreign National of Employment Permit) Enter these details exactly as they appear on the Foreign National's

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Address 1:	BLOCK CAPITALS
Address 2:	BLOCK CAPITALS
Town:	BLOCK CAPITALS
County:	BLOCK CAPITALS
Country:	BLOCK CAPITALS
Telephone No.:	12: Mobile Phone No.:
Please provide the Foreign National's	PPS Number:
DI	dument Demitt him
Please provide the number of the Emp ewed:	Dioyment Permit being
E-mail address:	
Immigration Details (Please enter the de	letails exactly as they appear on your current GNIB card*)
GNIB Pin No.	Dept. No.
ou must now attach the documents o	outlined in Requirement for Supporting Documentation under "(B) Requirements for National."
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Page 3

Details of Requirement for Renewal of Intra-Company Transfer Part Three 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.

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Part Four		Details	of Em	oloym	ent		
Proposed Position of Foreig with Connected Person:	n National		BLOCK C	AFITALS			
IOTE: Questions 2 and	3 to be completed Part A and Part B o					ho are li	isted
Regulatory Body:			BLOCK	ARITALS			
Registration/Pin:							
the application is in respect of I			t A of Schedule 2 in	the Principal F	Regulations plea	se provide	your
pplications for other Health Proi ith the appropriate medical bod					ovide a copy of	their registi	ration
Duration of Transfer (definite and end dates up to a maxime ears)*:	e start	M M Y	ү Перактелен өг	[D D M	M Y	9
All renewal Employment Permit mployment Permit. It should be							
Place(s) at which the duties/ is to be carried out:		y Transfer Emple		CAPITA	-	ponou or c	, yours.
is to be carried out.		BLOCK CA	FITALS				
Calculation of Remuneration	**						
		Annual Salary (Foreign Currency)	Hourly Rate (Foreign Currency)	Annual Salary (in euro)	Hourly Rate (in euro)	Excha Rate U	
(a) Current Basic Annual S	Salary	Currency)		€	€		
(b) Additional payment to Salary up to or over the Wage or the rate of pay	e Irish National Minimu y fixed under or pursua			€	€		
(c) Deductions from either applicable)				€			
(d) Total Basic Annual Sal	ary less deductions at	(c)		€			
Board and	Payments in respect (if applicable)	of		€			
Accommodation	Monetary Value of (if applicable)	4		€			
Payments in respect of Hea (if applicable)	alth Insurance			€			
Total Remuneration				€	€		
l amounts which make up the b onetary value of Board and Ac ust be verifiable by way of supp age.	commodation (or either conting documentation in	of them) or Health	Insurance is being	included in the	Gross Annual	Remunerat	tion this
Number of hours of work per Please note that for the purpose	s of Employment Permit	applications, the	standard working w	reek is 39 hours	s per week.		
		applications, the		capital			

Part Five	- 1	Requireme	ent for Paym	ent
Is a fee payable for this Emp application?	loyment Permit	Yes		No
If No, please indicate on wha	at basis no fee is applicab	le?		
The Connected Person has of Revenue Commissioners	charitable status with the	A	oplication is in respect of a national married to or partnership with an EEA	in a civil
If no fee is payable proceed	to Part Six.			
		Details	of Payment	
	Circular 1/2013, from 19 Se sers in respect of services re	tronic Funds Transfer eptember 2014 (e-Day) t endered. To facilitate th	he public sector will no longer is, the Employment Permits S	accept cheques, bank drafts or ection will no longer accept pape
an e-mail address to request 11) and Payers Declaration because as complete. An e-mail the bank account into which the payment.	t payment must be provide below and payment will be nail will issue to the applicar re payment should be made	ed at Question 8. They requested when an ap at and their authorised a and an Application ID n	y should also complete Payi oplication is accepted into t gent (if applicable) giving deta umber which <u>must</u> be used a	ions 1, 2, 3, 4, 5, 6, 7, and 8) – ment Details (Question 9 and he Employment Permits ails of the amount of the fee due, is the reference when making the must complete all details below.
Contact Details	CONTRACTOR OF THE PARTY OF THE	ke payment by cheque,	bank drait or postal order and	must complete all details below.
Please indicate who is ma payment:	king the C	onnected Person		Other
2. Title:	Mr Mrs	Miss	Ms Other ((please state)
3. Name:		Brock	COAPITALS	
4. Company (if applicable):		BLOCK	CHAPITALS	
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 Clearing System. Cheques sho				stitution operating within the Irish
Payer's Declarat	tion			
I, the undersigned, agree tha	at in the case of a refund o			pplicant specified on Page 1. tion will consist of 90% of the total
Payer's Signature: (Original signature required)			Date:	D B W W Y
Employment Permits Section is forwarded to the applicant for the mandate form.				

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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 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.

ational: Original signature required)		Title:				
ame (in BLOCK CAPITALS):	BLOCK CAPITALS	Date:	D	D M	MY	Y
our employment permit will	normally be posted to you a	at vour current addre	ss as	in Par	2 of th	is Form.
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ck this box if you want your permit	to be posted to your current addre	ess.				
ck this box if you want your permit	to be posted to the Connected Per	rson as stated in Part 1 of	this Fo	rm		
ok and box ii you maint your points	to be posted to the confidence it of					
ck this box if you want your permit	to be posted to your Authorised A	gent (if applicable).				

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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
 - 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 Health4 Insurance Act 1994.

I understand and accept that:

Signature of Connected

- 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 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.

Person: (Original signature required)		
Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Title:
Position Held:	BLOCK-CAPITALS	Date: 0 0 M M V V
Your certified copy of the er	mployment permit will normally be _l Part 1 of this Form.	posted to you at your current address as in
Tick this box if you want your certifie	ed copy of the employment permit to be pos	ted to your current address.
Tick this box if you want your certifice Agent (if applicable).	ed copy of the employment permit to be pos	ted to your Authorised

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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 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
 - 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 Health4 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 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
- neither I, nor a person acting on my behalf, shall keep any personal document belonging to a holder of an employment permit.

gnature of Foreign mployer: Original signature required)		
ame (in BLOCK CAPITALS):	BLOCK CAPITALS	Title:
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Requirements for Supporting Documentation

(A) Requirements for Connected Person

All Connected Persons 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 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 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 2006, as amended.
- Copies of P60s or P21s 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.

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 Employments Permits Act 2006, as amended. The current fees applicable are available on the Department's website

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 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.**

RICTEP002/15

(E) Conditions of Issue of an Employment

- 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.

 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)(df) of the Employment Permits Act 2006, as amended
- The Foreign National remains an employee of the Foreign Employer for the duration of the transfer. The Foreign National only performs the duties in respect of which the Employment Permit is issued.
- 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.
- 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. 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 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 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 <u>all</u> questions

Connected Persons should include copies of:

- Completed P30/ROS 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/PIN 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.

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 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,

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/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@djei.ie

353-1-417 5333 Call Centre:

LoCall: 1890 201 616 (from within Ireland only)

Fax: 353-1-631 3268

Davitt House 65a Adelaide Road Dublin 2 Ireland Address:

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 Nuálaíochta 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).

Passport Photograph

X1

Please print the Foreign National's name on the back of photograph and staple here.

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

In accordance with the Employment Permits Act 2006, as amended, the Contractor (foreign employer) must be the applicant in respect of all Contract for Services Employment Permit applications.

Part One	Registration	n Details of Contractor
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 Contractor is an Industrial and Provident Society, Friendly Society or a Trade Union, please supply their Registration Number:		Obtained from the Registry of Friendly Societies
5. Registered name of Company/Busin	ness:	ALBOY EAGITARS -
S. Trading name of business (if different	ent):	6 LOCAL TEPPER
7. Nature of business:		#105%SAPITAN
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Part Three

Details of Requirement for Renewal of Contract for Services Employment Permit

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Proposed Period of Employment Permit (maximum period of 3 years)							
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Part Five		Re	equiren	nent fo	r Payr	nent		
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If No, please indicate on what	basis no fee is	applicable?					-	1
			1		in respect of nal married to thip with an E	or in a civ	ril	
If no fee is payable proceed to	Part Six.							
			Detai	Is of Pa	aymen	it		
Important Note for Business I In accordance with D/Finance C postal orders from business use based payments from business Transfer (EFT).	Circular 1/2013, fi	rom 19 Septer services rende	mber 2014 (e-Da ered. To facilitat	y) the public se e this, the Emplo	syment Permits	Section w	ill no longe	er accept pape
Business user applicants for an e-mail address to request 11) and Payers Declaration be Section as complete. An e-ma the bank account into which the payment.	payment must be elow and payme ail will issue to th	be provided a ent will be red ne applicant ar	t Question 8. I quested when a d their authorise	hey should als n application is d agent (if appli	o complete P accepted int cable) giving d	ayment De o the Emp etails of the	etails (Que loyment P e amount o	estion 9 and ermits of the fee due,
Applicants, other than business		nue to make p	ayment by cheq	ue, bank draft or	postal order a	ind must co	omplete all	details below.
Contact Details of	f Payer							
Please indicate who is mak payment:	ing the		Contractor			Ot	her	
2. Title:	Mr	Mrs	Miss	Ms	Othe	er (please state)		
3. Name:			BLO	CK CAPIT	ALS			
4. Company (if applicable):			8110	CK CAPIT	ALS			
5. Telephone Number:				6. Fax Numb	er:			
7. Mobile Phone Number:								
8. E-mail:				_				
Payment Details								
9. Method of Payment:	Electroni	ic Funds Transfer	Cheque	Ва	nk Draft	P	ostal Orde	r
10. Cheque No.								
11. Payment enclosed / Amount of payment due:	€							
Payment must be in the form of Clearing System. Cheques show Payer's Declaration	uld be made pay						operating v	vithin the Irish
I, the undersigned, agree that (Under the Employment Permits fee paid.)								
Payer's Signature: (Original signature required)					Date:	D D	IN M	y y
Employment Permits Section is forwarded to the applicant for cothe mandate form.								

Part Six **Acceptance of Terms & Conditions**

Declaration of Foreign National

I, the undersigned, agree to continue to 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.

Signature of Foreign National: (Original signature required)		Title:			
(original organization)					
Name (in BLOCK CAPITALS):	SLOCK GAPITALS	Date:	D D	M M	Y X
Your employment permit will ı	normally be posted to you at your	current addre	ss as in	Part 2 of	this Form.
Tick this box if you want your permit	to be posted to your current address.				
		2000			
lick this box if you want your permit	to be posted to the Contractor as stated in	1 Part 1 of this For	m.		
Tick this box if you want your permit	to be posted to your Authorised Agent (if	applicable).			
Declaration of Releva	nt Person				
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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 Egyption National's pays lin for the duration of their assignment in the State
- 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:
 - 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 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.

Original signature required)		
lame (in BLOCK CAPITALS):	BLOOK CAPITALS	Title:
Position Held:	BLOCK CARITALS	Date:
	Certified Copy of Employ	ment Permit
(The certified copy of the en	Certified Copy of Employ ployment permit will normally be Part 1 of this Form.	posted to you at your current address as in
The certified copy of the en	ployment permit will normally be	posted to you at your current address as in
The certified copy of the en	nployment permit will normally be p Part 1 of this Form.	posted to you at your current address as in

ent Name BLOCK CAPITALS):	BLOCK CAPITALS	Title:	
understand that neither I, nor a person a mployment permit.	cting on my behalf, shall keep any personal	document belonging	ng to a holder of an
Signature of Agent: Original signature required)		Date:	D D M M Y
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Address 1:	BLOCK CA	APITALS	
Address 2:	BLOCK CA	APITALS	
Town:	BLOCK CA	APITALS	
County:	BLOCK CA	APITALS	
Country:	BLOCK CA	APITALS	
E-mail address:			
=			
Telephone number:			
	Lagant to act on my behalf in respect of this	application	
, the Contractor, permit the above named	agent to act on my behalf in respect of this	application.	D D M M Y
, the Contractor, permit the above named Signature of Contractor: Original signature required)		Date:	D D M M Y
, the Contractor, permit the above named Signature of Contractor: Original signature required) , the Foreign National, permit the above n	agent to act on my behalf in respect of this a	Date:	
I, the Contractor, permit the above named Signature of Contractor: (Original signature required) I, the Foreign National, permit the above n Signature of Foreign National: (Original signature required)	named agent to act on my behalf in respect o	Date:	D D M M Y
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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.

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 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 fulfill 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 2006, 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 an 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

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 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 <u>must</u> 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

- 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.
- 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)(df) of the Employment Permits Act 2006, as amended. The Foreign National remains an employee of the Foreign Employer for the period of his/her employment in the State.
- The Foreign National only performs the duties that arise out of the contract service agreement and in respect of which the Employment
- 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.
- Any application that contains omissions or is incorrectly completed will be returned to the applicant or the authorised agent (if applicable) for completion.
- 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.
- 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: 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 employeent 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 Contractor and the Details of the Relevant Person: Complete all questions

Contractors should include copies of:

Completed P30/ROS Online Receipt dated within 3 months preceding the application (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 Contract Service Agreement: Complete all questions.

Please complete in relation to the details of the contract service agreement and requirement for renewal of Contract for Services

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/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 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 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.

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, 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@djei.ie

Call Centre:

353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

353-1-631 3268 Fax:

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 N

Application form for renewal of Reactivation Employment Permit



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

RREP002/15

Reactivation 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 Reactivation Employment Permit for the same employer and employment.
- A renewal application 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 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

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

Recent Passport Photograph

Please print Foreign National's name on back of photograph and staple here.

RREP002/15

Employer					National (Holder oyment Permit)
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If this is an application for a He Princ	ipal Regu	The Property of the Park Control of the Park C			
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Company Name Registered Number (if applicable):					Obtained from the Companies Registration Office
Business Name Registered Number (if applicable):					Obtained from the Companies Registration Office
If the Employer is an Industrial and Provident Society, a Friendly Society or a Trade Union, please supply their Registration Number:		ĬΤ			Obtained from the Registry of Friendly Societies

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): BEECH CAPITALS 7. Please state the full name of the Employer: BEDGK GARITALS 8. Please state the nationality of the Employer: SCOUR EMPITALE 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? If Yes, please specify: No Not applicable BLOCK CAPITALE 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: BUBUR CAPITALS 13. Company/Business Address: Address 1: BUDGE CARITALS Address 2: BLOUK CARITALS Town: BLOOK CARITAL'S County: BLOCK CAPITALS Country: 14. Telephone Number: 15. Fax: 16. Mobile Phone Number: 17. E-mail: 18. Website: 19. Number of EEA* and/or Swiss nationals (including 20. Number of non-EEA nationals currently Irish) currently employed by the Employer: 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."

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Employment Permits Section is forwarded to the applicant for a the mandate form.											ed on

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

Signature of Foreign National:		Title:					
Original signature required)			L				
Name (in BLOCK CAPITALS):	SLOCK CAPITALS	Date:	D	D M	All	Y	8
our employment permit will i	normally be posted to you at your	current addre	ss as	s in Pa	t 2 o	f thi	s Form.
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ick this box if you want your permit	to be posted to your Authorised Agent (if a	pplicable).					

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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 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.

associated by	Title:
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	Date: D D M M Y A

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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 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

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 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 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)(df) 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.
- 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(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. 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 (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 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 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 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@djei ie

353-1-417 5333

LoCall: 1890 201 616 (from within Ireland only)

Fax: Address:

Call Centre:

353-1-631 3268 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 O

Application form for renewal of Sport and Cultural Employment Permit



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

RSCEP002/15

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
- 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

5. If the Employer is a Charity, please

supply the Charity Number:

- 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

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

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

Recent Passport Photograph

Please print Foreign National's name back of photograph and staple here.

Obtained from the Revenue Commissioners

RSCEP002/15

Employer Foreign National (Holder of Employment Permit)				STATE OF SECURITION AND SECURITION SECURITIONS.
7777	alth Professio ipal Regulatio	ns please tic	Part A or P k this box	NAME OF TAXABLE PARTY.
Part One	Regist	ration	Deta	ils 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				Obtained from the Registry of Friendly Societies

Page 1

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): ELGCK 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? If Yes, please specify: Yes No Not applicable BLOOK GARITALE 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 GAPITALS 11. Trading name of business (if different): 12. Nature of business: 13. Company/Business Address: Address 1: BEDDE-CABITALS Address 2: BLOCK CAPITALS BLOCK CAPITALS Town: 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 20. Number of non-EEA nationals currently Irish) currently employed by the Employer: 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."

Details of Foreign National Part Two (Holder of Employment Permit) 1. Passport Number: 2. Expiry Date: Enter these details exactly 3. Nationality: as they appear on the Foreign National's passport. 4. First Name: 5. Middle Name(s): BLOOM CAPITALS 6. Family Name: BLOOK CAPITALS 7. Date of Birth: 8. Male: 9. Female: 10. Telephone No.: 11: Mobile Phone No.: 12. Current Address: BLUCK ENFITHIS BUOCK GAP(TALS BLOCK CAPITALS BLOCK GARITALS 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** Dept. No. No. If the proposed Foreign National has held consecutive employment permits for an uninterrupted period of 5 years and has

*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

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 Th	hree Details of Employment			
1. Title of Job;		GIDG& CERIFIE		
NOTE: Questio		be completed by Health Pro A and Part B of Schedule 2 i		curity Personnel who are listed in gulations.
2. Regulatory Body	r:	610	K CHRITOLS	
3. Registration/Pin/ Licence No.:				
please provide you	ur registration detai	ils above. Documentary evidence will	not be required.	of Schedule 2 in the Principal Regulations ons must provide a copy of their registration
with the appropria	te medical body or	recognition of their qualifications from concerned is to be carried out:		
. Place(s) at which	the employment			OCK CAPITALE
		81.00	k darijals	
5. Proposed Period Permit (maximu years)*				
* If this is an applica renewal stage if a fo	reign national has renewal application	been in continuous employment with	the same employer for t	mployment Permit may be applied for at the five years or more. Please note that all before the expiry date of the existing
6. Gross Annual Re	emuneration*	€	(Gross remunerati	ion excludes overtime or nts)
7. Gross Annual Sa (if different from		€		
3. Gross Weekly Sa	alary:	€	9. Hourly Rate of Pay:	€
Deductions from Salary:	m Gross Weekly	€	Please specify purpose of deductions:	AUDER PAPITALE
11. Health Insurance*:		€	Please specify name of Health Insurance Provider:	SUBCO SABITANT
Annual Remuneration	on this must be veri		the payslips. If Health I.	insurance is being included in the Gross such documentation may also be required in
Health Insurance c	an only be conside	red if the provider of the health insura of the Health Insurance Act, 1994.	ance is a person entered	d in the Register of Health Benefits
2. Number of hour week*:	rs of work per			
Please note that fo	or the purposes of E	Employment Permit Applications, the	standard working week	is 39 hours per week.
3. What are the m	ain functions of th	nis job:	8,00	DAPITALS
		Btor= c4	PITAVS	
You must now atta	ch the document	s outlined in Requirement for Supr	orting Documentation	under "(C) Application Requirements" (
	and additional	applicab		(a) represent requirements (i
		Page 4		RSCEP002/1

Part Four		Require	ement fo	or Paym	ent	
Is a fee payable for this Emplo application?	oyment Permit	Yes			No	
If No, please indicate on what	basis no fee is applicab	le?				
The Employer is the applicant the Revenue Commissioners	and has charitable state	us with	natio	is in respect of a onal married to o rship with an EE	r in a civil	
Dependant/Partner/Spouse Er	mployment Permit			ed General, React ultural Employme		T
If no fee is payable proceed to	Part Five.					
		Deta	ails of P	ayment	1	
Important Note for Business In accordance with D/Finance C postal orders from business use based payments from business Transfer (EFT). Business user applicants for an e-mail address to request p	circular 1/2013, from 19 Se irs in respect of services re users and has set up a co employment permits sho payment must be provid	eptember 2014 (e endered. To facil emmercial bank a puld complete the ed at Question 8	-Day) the public s itate this, the Emp account into which the Contact Detail 3. They should a	ployment Permits S payments can be s of Payer (Ques lso complete Pay	Section will no made by Elec tions 1, 2, 3, ment Details	o longer accept pa ctronic Funds 4, 5, 6, 7, and 8) s (Question 9 and
 and Payers Declaration be Section as complete. An e-ma the bank account into which the payment. 	ail will issue to the applican	nt and their autho	rised agent (if app	olicable) giving det	ails of the am	ount of the fee du
Applicants, other than business Contact Details of	The second secon	ke payment by ch	neque, bank draft	or postal order and	d must compl	ete all details belo
1. Please indicate who is mak	ing the payment:	Employ	er F	oreign National		Other
2. Title:	Mr Mrs	Miss	s Ms	Other	(please state)	
3. Name:		-8	OST EATH	1162		- J
4. Company (if applicable):	910VE DATITIES					
5. Telephone Number:	6. Fax Number:					
7. Mobile Phone Number:						
8. E-mail:						
Payment Details	3 3 3 1					
9. Method of Payment:	Electronic Funds Transfer	Che	que E	Bank Draft	Posta	l Order
10. Cheque No.						
11. Payment enclosed / Amount of payment due:	€					
Payment must be in the form of Clearing System. Cheques shou						ating within the Iris
Payer's Declarati			o const service (
I, the undersigned, agree that (Under the Employment Permits fee paid).	in the case of a refund of					
Payer's Signature: (Original signature required)				Date:	D D M	W W W
Employment Permits Section is forwarded to the applicant for co the mandate form						
me manuale form		Page 5				RSCEP002

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.

Signature of Foreign National: (Original signature required)		Title:
Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Date: D D M M Y Y
Your employment permit will	normally be posted to you at your o	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 stated in Part 1 of this Form.	to be posted to the Person who has made the	he offer of employment as
Tick this box if you want your permit	to be posted to your Authorised Agent (if a	pplicable).
		· · · · · · · · · · · · · · · · · · ·

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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
- 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 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)		
lame (in BLOCK CAPITALS):	BLDCK-CAFITALS	Title:
Position Held:	stock by livers	Date:
ick this box if you want your certifie	nployment permit will normally be Part 1 of this Form. ed copy of the employment permit to be posed ed copy of the employment permit to be pos	sted to your current address.

Authorisation of Agent	If no agent is representing	ng the applicant th	en this section to be left blank.
	agent) to act on your behalf please ensure to nust be in agreement with the nomination of g this application.		
Agent Name (in BLOCK CAPITALS):	BLOCK CAPITALS	Title:	
understand that neither I, nor a person Employment Permit.	acting on my behalf, shall keep any person	nal document belo	onging to a holder of an
Signature of Agent: Original signature required)		Date:	D D M M Y Y
Agent's Address for Correspondence:			
Address 1:	BLOOK C	APITALS	
Address 2:	BE COK C	AFITALS	
Town:	BLOOK C	APITALS	
County:	вьрак с	APITALS	
Country:	BLOCK C	APITALS	
E-mail address:			
Telephone number:			
Signature of Employer: Original signature required)	employment, permit the above named agen	Date:	D D M M Y Y
, the Foreign National, permit the above	named agent to act on my behalf in respec	et of this applicati	on.
Signature of Foreign National: (Original signature required)		Date:	D D M M Y Y

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

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

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 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 P30/ROS 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 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 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

Contact Details

E-mail: employmentpermits@djei.ie

Call Centre: 353-1-417 5333

Address:

LoCall: 1890 201 616 (from within Ireland only)

Fax: 353-1-631 3268

> 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 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.

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Form P

Notification of dismissal by reason of redundancy under section 20A or 20B of the Principal Act



An Roinn Post, Fiontar agus Nuálaíochta 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 completed in full by the foreign national who is the holder of the Employment Permit.
- 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 Innovati	on 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.
a. T. Maria	
Signed (Permit Holder):	Date:

Form O

Submission of decision for review under section 13 or 17 of the Principal Act



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

ROD002/15

Submission of a decision for review under section 13 or 17 of the Employment Permits Act 2006 (as amended)

- 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:
 - 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							
PLEA	PLEASE COMPLETE PART I AND II IN BLOCK CAPITALS						
Appli	plication ID or						
Empl	Applicant Name: Please see 1, above)						
Appli							
(Please							
Appli	plicant Address:						
PART	RT 2						
	ish to request a review of the decision to:						
(Tick W	k whichever is appropriate)						
[]	refuse my application for an employment amended), or	permit under section 12 of the Employment Permits Act 2006 (as					
11	revoke the employment permit under section 16 of the Employment Permits Act 2006 (as amended).						
The r	e reasons for my review are set out in PART 3	of this form.					
Signe	ned: I	Date:					

DA	DT	

Please set out below the grounds for your review which should address all of the grounds for ref	usal or revocation.
All details that you wish to have considered should be included. [If you do not have sufficient spo	ice below to set out
all the details you wish to have included in the review or wish to submit in supporting documenta	tion 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 Nuálaíochta Department of Jobs, Enterprise and Innovation

TOUICT002/15

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
 - 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.
- 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 C	COMPLETE IN BLOCK CAPITALS	
Applicati		
Employm	nent Permit Number:	
Foreign N	National/Employment Permit Ho	lder's Name:
		nnected Person or Foreign Employer) loyer Specified on Employment Permit:
Name of	New Connected Person/New Fo	reign Employer:
Address	of New Connected Person/New F	Foreign Employer:
Industria	l and Provident Societies Acts 18	Person under the Companies Acts, Limited Partnerships Act 1907, 193 to 1978, Friendly Societies Acts 1896 to 1977 or the Trade Union Acts
Name of I confirm the New	Connected Person/Foreign Emplo that there remains a connection Foreign Employer/Foreign Emplo	ereby notify the Minister for Jobs, Enterprise and Innovation of a Change of coper under section 8(8) of the Employment Permits Act 2006 (as amended as defined in the Employment Permits Act 2006 (as amended), between yer specified on the Employment Permit and the new Connected Employment Permit as applicable.
Signed:		Date:
		rently specified on Employment Permit
We herek	by confirm that:	
(i)	the employment of the foreign transferred to this New Foreign	
(ii)	the foreign national is carrying	g out duties for, or undergo training provided by a New Connected Person
and that remain th		n and location of employment as specified on this Employment Permit
Signed:		Date:
New Con	nected Person/New Foreign Emp	ployer
Signed:		Date:
	National/Holder of Employment I	

Form S

Notification of change of name of contractor or relevant person under section 8(8) of Principal Act



An Roinn Post, Fiontar agus Nuálaíochta 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).

- 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.
 - 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.
- 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 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 – Name of Contractor/Relevant Person	
Name of New Contractor/New Releva	nt Person:
Address of New Contractor/New Relev	vant Person:
Provident Societies Acts 1893 to 1978, if relevant or applicable: I, Contractor, hereby notify the Minister Contractor/Relevant Person under sect	er for Jobs, Enterprise and Innovation of a Change of Name of tion 8(8) of the Employment Permits Act 2006 (as amended). I confirm that abject of the Employment Permit, is still in force.
Signed: Contractor currently specified on Emp	
We hereby confirm that: (i) the employment of the for transferred to this New Confirmation.	reign national who is the holder of this Employment Permit has been ntractor, or ues to provide a service as part of the contract service agreement to this new
and that the terms, conditions, descrip remain the same.	tion and location of employment as specified on this employment permit
Signed:	Date:
New Contractor/New Relevant Person	
Signed:	Date:
Foreign National/Holder of Employme	

Form T

Notification of change of name of employer under section 8(8) of Principal Act



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

TOUEP002/15

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).

- 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.
- 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 Undertokings) Regulations 2003 (5.1. 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.
- 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 F	ermit Holder's Name:	
Name of Employer Specified on	Employment Permit:	
Name of New Employer:		
Address of New Employer:		
	ployer under the Companies Acts, Limited Partne 1978, Friendly Societies Acts 1896 to 1977 or the	
I, Employer, hereby notify the M section 8(8) of the Employment I	inister for Jobs, Enterprise and Innovation of a Cha Permits Act 2006 (as amended).	nge of Name of Employer under
Signed:	Date:	
Employer Currently Specified on	Employment Permit	
	ployment of the foreign national who is the holder of ployer and that the terms, conditions, description a rmit remain the same.	
Signed:	Date:	
New Employer		
Signed:		
Foreign National/Holder of Emp	loyment Permit	

GIVEN under my Official Seal, 2015.

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.

BAILE ÁTHA CLIATH ARNA FHOILSIÚ AG OIFIG AN tSOLÁTHAIR Le ceannach díreach ó FOILSEACHÁIN RIALTAIS, 52 FAICHE STIABHNA, BAILE ÁTHA CLIATH 2 (Teil: 01 - 6476834 nó 1890 213434; Fax: 01 - 6476843) nó trí aon díoltóir leabhar.

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