FORM DWWTS NIP (a) 2026

comhairle chontae na mí
meath county council

Domestic Waste Water Treatment Systems Grant
Under the
National Inspection Plan

Claim Payment Form DWWTS NIP (a)

Environment Department

Meath County Council

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Version (September 2026)

FORM DWWTS NIP (a) 2026

GRANT PAYMENT CLAIM FORM

Works for the remediation, repair, upgrade or replacement of a Domestic Waste Water Treatment System (DWWTS), related to an inspection under the National Inspection Plan.

- Please read the information notes before completing the claim form.
- All questions on the form must be answered and where specified, supporting documents must be provided. Incomplete forms, or those which are not accompanied by the appropriate documents, will not be processed.
- Work must NOT start before the local authority has issued an Advisory Notice. The local authority should carry out such inspections or other checks as it considers necessary before approving the application. Works started before an Advisory notice is issued are not eligible for grant assistance.
- The grant scheme is administered by local authorities. Any enquiries should be addressed to the Rural Water Liaison Officer or the Environment Section in the local authority.
- All forms to be used can be obtained from the local authority, who will provide assistance with completing them, if required.
- In respect of an applicant receiving grants, subsidies or similar type payments from a Government Department or Public Authority that have a total value of more than €10,000 during the year, you will need an e-Tax Clearance certificate.
- The local authority reserves the right to make any necessary enquiries to verify information or for clarification of supporting documents provided with a grant application. An application that includes false or misleading information or documents will not be approved for a grant.

1. Details of the Applicant	
Name of applicant (in block capitals):	
Address (location of DWWTS): EIRCODE (required):	
Telephone no:	
E-Tax clearance printout:	Yes ☐ No ☐
E-mail address:	
In the last 12 mths, have you received a grant from any public body? If yes, please provide details: • amount:	Yes ☐ No ☐ €

• date paid:	
2. Details of the DWWTS	
Date inspection carried out:	
Advisory Notice reference number:	
Date of local authority Notice of Compliance:	
3. General description and cost of works carried out (Itemised receipt(s) must be provided when the works are completed):	
4. Previous Payments	
Was any grant paid in respect of this DWWTS in the last 7 years? If yes, please provide details: amount: date paid:	Yes ☐ No ☐ €
5. Details of Contractor(s) (e-Tax Clearance printout for each contractor must be provided)	
Contractor 1	**Contractor 2 (if applicable)**
Contractor name:	Contractor name:
Contractor address: EIRCODE:	Contractor address: EIRCODE:
6. Declaration	
I declare that the information provided by me on this grant payment claim form is correct and I understand that the provision of any false or misleading information or invalid supporting documents may result in this claim being cancelled. **Signature of claimant:** _____ **Date:** _____	