

FIRST CLAIM FOR TAX REPAYMENT DURING UNEMPLOYMENT



Please read the INFORMATION NOTES overleaf BEFORE completing this form
 ALL SECTIONS AND THE DECLARATION BELOW MUST BE COMPLETED IN ALL CASES
 (Where this form is not completed in full it may be necessary to return it to you which may delay processing your claim)

NAME and ADDRESS (Block Capitals)

PPS Number

Employer Number

Unit Number

Date of Cessation Of Employment
 Day Month Year

Refer to your form P45 for answers to above

Employer Name

AMOUNT OF INCOME RECEIVED BY YOU SINCE THE DATE YOU BECAME UNEMPLOYED

Tick (a) appropriate box to indicate type of income received, then enter the relevant details in the spaces provided.

<input type="checkbox"/>	Unemployment Benefit	Date this income started	<input type="text"/>	Gross Weekly Amount	€ <input type="text"/>
<input type="checkbox"/>	Disability Benefit	Date this income started	<input type="text"/>	Gross Weekly Amount	€ <input type="text"/>
<input type="checkbox"/>	Other Social Welfare Pension(s)	Date this income started	<input type="text"/>	Gross Weekly Amount	€ <input type="text"/>

Please indicate type e.g. One-Parent Family Payment/
 Old Age Pension

<input type="checkbox"/>	Casual Earnings	Source of Income	<input type="text"/>	Gross Weekly Amount	€ <input type="text"/>
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(Do not include pay per P45 which you must attach to this form)
 Attach supporting documentation in respect of any tax deducted

<input type="checkbox"/>	Other income	Source of Income	<input type="text"/>	Gross Weekly Amount	€ <input type="text"/>
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No. of children for whom a dependant allowance is included in the Unemployment/Disability Benefit received

Unemployment Assistance is not taxable. If however you are in receipt of same please indicate by ticking this box

1. Do you intend to resume employment before 31 December next? YES NO
 If the answer is "no", state reason:
 If resuming education state name of school/college:

2. Are you making this claim on the basis that you are going abroad? YES NO
 If the answer is "yes" please state country of destination, intended departure date and duration of stay abroad:

3. Do you intend to take up employment abroad? YES NO

4. Address abroad for correspondence if known:

DECLARATION WHICH MUST BE SIGNED

N.B. Form P45 Parts 2 & 3 MUST accompany this claim

I declare that I am unemployed and that all particulars in this form are correct to the best of my knowledge and belief.

Signature: Date:

Telephone Number:

A person who knowingly makes a false statement for the purpose of obtaining repayment of income tax is liable to heavy penalties