

**CHOICE BASED LETTING EXPRESSION OF INTEREST FORM**

**APPLICANT INFORMATION**

|  |  |
| --- | --- |
| **HOUSING APPLICATION REF** |  |
| **NAME** |  |
| **JOINT APPLICANT NAME(if applicable)** |  |
| **PPS No.** |  |
| **Phone No.** |  |

**PROPERTY INFORMATION**

|  |  |
| --- | --- |
| **ADDRESS OF PROPERTY****(this is the property you wish to apply for)** |  |

**SIGNATURE .................................................................................**

**Date ..............................**

**Please return complete form to: Longford County Council, Housing Dept. Town Hall, Market Square, Longford. EMAIL:** **cbl@longfordcoco.ie**

**Tel: 043-3343300**