



5. Employer's registered number:

6(a). I enclose a recent Tax Clearance Certificate dated:   **2 0**   
D D M M Y Y Y Y

6(b). If you have not attached an original Tax Clearance Cert, please insert an 'X' in the box below and sign that you authorise an officer of the Department of Social Protection permission to check your Tax Clearance Cert using Revenue On-Line Services.

Signature of employer (not block letters)

Tax Certificate number:

7. I have taken on or I propose to take on the person named in Part 2 as a full-time employee from:   **2 0**   
D D M M Y Y Y Y

**Please note that the exemption will apply from the date you are approved by this Department. Exemptions cannot be backdated.**

8. Total number of employees three months prior to taking on the person named in Part 2:

9. Total number of employees immediately prior to taking on the employee named in Part 2:

**The job should represent an increase in the workforce.**

10. Have you already availed of the Employer Job (PRSI) Incentive Scheme?  
 Yes  No

If 'Yes', please give details in the space provided:

11. Average number of weekly hours you expect the new employee named in Part 2 to work:  hours a week

**Minimum of 30 hours must be offered.**

12. How long will the job last?  months

**Position must be for at least six months.**

13. What is the gross weekly wage you are offering?

€ , .  a week



## Part 1 continued

## Employer's details

### 14. Please indicate under what Employment Group the job is created:

- Associate professional and technical occupations:
- Clerical and secretarial occupations:
- Craft and related occupations:
- Managers and administrators:
- Other occupations:
- Personal and protective service occupations:
- Person has no occupations:
- Plant and machine operatives:
- Professional occupations:
- Sales occupations:

## Part 2

## Employee's details

This section is to be completed by the employer.

Please state the employee's:

15. PPS No.:
16. Title: (insert an 'X' or specify) Mr.  Mrs.  Ms.  Other
17. Surname:
18. First name(s):
19. Birth surname:
20. Date of birth:        
D D M M Y Y Y Y
21. Mother's birth surname:
22. Address:
23. Telephone number:   
MOBILE   
LANDLINE
24. Email address:



## Part 2 continued

## Employee's details

25. Were they in receipt of one of the following social welfare payments for at least six months:

Jobseeker's Benefit:  Yes  No

Jobseeker's Allowance:  Yes  No

One-Parent Family Payment:  Yes  No

Disability Allowance:  Yes  No

26. Were they on the JobBridge or a Work Placement Programme?

Yes  No

If 'Yes', do they satisfy the equivalent six month (156 days) condition?

Yes  No

## Employee declaration

I declare that all the details given above on this form are true.

Signature of employee (not block letters)

Date:

D D

M M

2 0

Y Y Y Y

**Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.**

## Part 3

## Checklist for employer

Have you enclosed the following?

— Company Tax Clearance Certificate. Original certificate only.

**Note:** You should operate standard employee and employer PRSI pending approval.

**Please remember to sign the declaration in Part 1.**

If you need any help to complete this form, please contact the Employer Job (PRSI) Incentive Scheme Section or log on to [www.welfare.ie](http://www.welfare.ie).

Send this completed application form to:

**Employer Job (PRSI) Incentive Scheme**

Department of Social Protection

Floor 2

Shannon Lodge

Carrick-on-Shannon

Co. Leitrim

LoCall: 1890 927 999 (from the Republic of Ireland only)

Telephone: +353 71 9672616 (from Northern Ireland or overseas)

**Note:** The rates charged for the use of 1890 (LoCall) numbers may vary among different service providers.

## Data Protection and Freedom of Information

**We, the Department of Social Protection, will treat all information and personal data you give as confidential. We will only disclose it to other people or bodies according to the law.**

Explanations and terms used in this form are intended as a guide only and are not a legal interpretation.

