Louth County Council
Housing Department, Fair Street, Drogheda
Telephone No. 041-9876131 / Lo Call 1890 202303
Email: rents@louthcoco.ie

Payment Plan Agreement for Rent and Arrears

Name: _____

Address: _____

Account Number: _____ Current weekly Rent: _____ Arrears: _____

Louth County Council charges rent very Thursday. I agree to pay my rent in advance every week/fortnight /month on _____ (day/date) and to clear my/our arrears as follows:-

a) **Payment of a lump sum of €_____ and/or**

b) **Payment of €_____ rent and €_____towards rent arrears per week.**

Total weekly payment of: €_____ (rent and arrears) paid weekly/monthly/fortnightly until further notice.
If my/our weekly rent changes I/we must continue to pay the rent and arrears as agreed. (For monthly Direct Debit payments see payment methods)

c) **If you submitted a new rent form and you do not know your new rent figure, please complete this section:**

Rent form submitted on: __/__/____

Total payment of € _____ per week/fortnight/month on _____ (day/date) until the new rent figure is confirmed in writing by the Rent Assessment Team. The payment plan will be reviewed then.

Payment will be paid using one of the methods listed below (tick relevant box)

1. ☐ Household Budget Scheme - direct deduction from my/our Social Welfare benefits
2. ☐ By standing order from my/our bank account
3. ☐ Cash with a Rents Postpoint Payment Card at any post office or at a designated outlet
4. ☐ Cash at the Accounts Office, Civic Offices Drogheda, Dundalk Town Office, or County Hall
5. ☐ **Direct Debit -** By monthly direct debit on the 15th of every month. I/we agree to pay _____ (rent and arrears) until further notice. If the weekly rent changes I/we must continue to pay rent by monthly direct debit and the additional sum of €_____ per month off arrears. To calculate monthly payments, multiply your weekly rent by 52 and divide by 12. Please note that amounts taken by direct debit may vary at the discretion of Louth County Council.

If paying by Household Budget, Standing Order, or Direct Debit, there may be a delay before these payments start. You must make the agreed payment with your rent card/in the cash office from the date of this Payment Plan Agreement, until such time as your payments start.

I/we agree that if my/our circumstances change and I/we are unable to adhere to this agreement, I/we will contact the Housing Department immediately and make alternative arrangements to clear my/our arrears.

Note: a change in circumstances means any change to the income of all tenants **and** occupants. You must also notify the Council if anybody moves in or out of your property or if anybody's income changes.

I/we understand and accept that failure at any stage to fully comply with this Agreement will result in termination of this Agreement, the consequences of which are that I can be issued with a **Tenancy Warning Letter which may lead to a District Court Hearing.** *Tenants who are evicted for non-payment of rent are deemed to have rendered themselves homeless through their own fault and will not be offered other accommodation by the Council.*

Signed: (1) _____ (2) _____
Tenant Tenant

Witness: _____ Date: _____

Contact: _____ *Tel:* _____
Account Manager