

**CLIENT IDENTITY SERVICES**

**REG1**

**DEPARTMENT OF SOCIAL AND FAMILY AFFAIRS** REVISED 9/0



**APPLICATION FOR PERSONAL PUBLIC SERVICE NUMBER (PPS No.)**

PPS No. ALLOCATED/TRACED: \_\_\_\_\_

THIS FORM IS TO BE COMPLETED ONLY IF YOU DO NOT ALREADY HOLD A PPS NO.  
PLEASE USE BLOCK LETTERS.  
ALL IRISH NATIONALS BORN IN 1971 OR AFTER SHOULD HAVE A PPS NO.  
ALL PERSONS WHO HAVE WORKED IN THIS COUNTRY SINCE 1979 SHOULD HAVE A PPS NO.

If you already have an RSI Number this has now become your PPS No.  
Please see Checklist (inside) for the list of documents which must be presented with this form.  
Presented Documents may be held for checking.

Reason why PPS No. is required:

**PART 1**

**PUBLIC SERVICE IDENTITY DATA**

PLEASE STATE:

• **TITLE**     Mr     Mrs     Ms     Other

• **FIRST NAME(S)**   

• **SURNAME**   

• **DATE OF BIRTH**

DAY		MONTH		YEAR	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

• **ADDRESS**   

**SEX**     Male     Female

**NATIONALITY**   

**YOUR TOWN AND COUNTRY OF BIRTH**

<b>TOWN</b>	<b>COUNTRY</b>
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**IF YOU HAVE CHANGED YOUR SURNAME  
PLEASE STATE YOUR BIRTH SURNAME**   

**MOTHER'S BIRTH SURNAME**   

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## PART 2

## Additional Information

Name and Address of Employer

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Employer's Registered (PAYE) Number

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Date of taking up employment

DAY		MONTH		YEAR			

Irish National Insurance number  
(if born before 1963)

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Your Social Security, Insurance or Registration  
Number in another country

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If you are (or were ever) in receipt of any  
Social Welfare Pension, Benefit or Allowance  
in this country, the EU or the UK,  
please give details of type and reference  
number, if known

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Country where you were previously employed  
or educated, if outside Ireland

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Latest date of taking up residence in Ireland

DAY		MONTH		YEAR			

Your Telephone No.

Code	Local Number
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Marital Status

<input type="checkbox"/>	Married	<input type="checkbox"/>	Single	<input type="checkbox"/>	Separated
<input type="checkbox"/>	Cohabiting	<input type="checkbox"/>	Widowed	<input type="checkbox"/>	Divorced

Spouse/Partner's Full Name

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Spouse/Partner's PPS No. (RSI No.)

FIGURES					LETTER(S)		

Date of Marriage

DAY		MONTH		YEAR			

## PART 3

## Witnessed Declaration

I declare that all the information supplied on this form is correct to the best of my knowledge.

Your Signature

Date

Signature of Witness

Date

**WARNING: PENALTY FOR FALSE STATEMENTS OR UTTERING FALSE DOCUMENTS: FINE OR IMPRISONMENT OR BOTH**

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# INFORMATION NOTE

The Social Welfare Act, 1998 provides for the introduction of the Personal Public Service Number (PPS No.), formerly known as the RSI Number. Your PPS No. together with associated identity data forms your Public Service Identity (PSI) introduced in 2002.

If you commence employment or a training course and you do not have a PPS No., it is very important that you apply for a PPS No. to ensure that your PRSI record is correctly updated. It is also important that you give your PPS No. to your employer at the commencement of your employment.

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## CHECKLIST

### LIST OF DOCUMENTS WHICH MUST BE PRESENTED WITH THIS FORM:

#### IRISH NATIONALS

- Long form of Birth Certificate  
and
- Valid photographic ID, e.g. Current Valid Passport or Full Driving Licence, Employment ID Card etc.  
and
- Evidence of address.

#### UK CITIZENS - (may include residents of Northern Ireland)

- Current Valid Passport  
or
- Birth Certificate (long form preferred) and valid photographic ID e.g. Full Driving Licence, Employment ID (with photo)  
and
- Evidence of either work/claim/residency/tax liability/education history in the UK or Northern Ireland  
and
- Evidence of address.

#### EEA CITIZENS - (EU Nationals - (other than UK) and Citizens of Iceland, Norway and Liechtenstein) plus Switzerland

- Current Valid Passport or National Identity Card  
and
- Evidence of either birth/work/unemployment/residency/tax liability/education in an EU/EEA country or Switzerland  
and
- Evidence of address in Ireland.

#### NON-EEA NATIONALS

- Current Valid Passport or Certificate of Registration with the Department of Justice, Equality and Law Reform (Green Book or Plastic card)  
and
- Evidence of either birth/work/unemployment/residency/tax liability/education in the relevant country  
and
- Evidence of address in Ireland.

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The following documents are NOT ACCEPTABLE: Short form of Irish birth certificate, provisional driving licence, baptismal certificate, personal letter and photocopies of certificates.

## Data Protection and Freedom of Information

The Department of Social and Family Affairs will treat all information and personal data which you give as confidential. It will only be disclosed to other bodies in accordance with law and it will be subject to the Department's responsibilities under the Data Protection Act and Freedom of Information Act.

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For Official Use only



Photocopies of the documents inspected should be attached and filed with this form. You should indicate what happened to the inspected or requested documents.

Documents	Inspected (Y/N)	Requested (Y/N)	Held (Y/N)	Date	Official Stamp of Section or Office Issuing this Form
Birth Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Passport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ID Card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Green Book	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Social Services Card Ordered		<input type="checkbox"/>		<input type="checkbox"/>	

Signature of Officer checking REG1 form and documents

Signature of Officer Registering Client

Date

Date

**Return of Documents Held for Checking**

Acknowledgement (to be signed by customer and witnessed by the officer returning the documents)

I acknowledge return of the documents indicated by Y (as held) above submitted in support of my PPS No. Application.

Signature

Date

Signature of Witness

Date



Department of Social  
And Family Affairs  
Gandon House  
Amiens Street  
Dublin 1.



An Roinn Gnóthaí Sóisialacha  
agas Teaghlaigh  
Teach Gandon  
Sráid Amiens  
Baile Átha Cliath 1.

☎: (01) 8748444

**APPLICATION FOR A PPS NUMBER BY A NON-RESIDENT**

The normal procedure is to make personal application at one of the Departments Local Social Welfare Offices and provide Proof of Identity.

Where the attached Reg1 form is used for application for a PPS Number by a person **not resident in the state** for Probate, Beneficiary, Tax, Employment or other purposes and where a professional person i.e. solicitor, accountant, tax consultant, employer, etc is acting on their behalf, the PPS Number maybe given to such third party / parties. The onus is on the applicant, (or the third/party acting on his/her behalf) to furnish the PPS Number to the Revenue Commissioners, other Government Department or service providers requesting it.

In order to comply with **Data Protection Legislation**, the applicant must give his/her permission for the PPS Number allocated to be given to the third party/parties.

The form itself should be completed **as far as possible** by the applicant and returned via the retained third party (Solicitor, Accountant etc) to Client Identity Services with headed paper of the third party and accompanied by either **COPIES\*** of **PASSPORT** or **NATIONAL IDENTITY CARD** which will confirm the identity of the applicant\*\* and that he/she is resident outside the state.

\*The Check List of Documents on the form itself may be ignored in these exceptions. Original documents need not be sent.

\*\*Where an overseas applicant is a **minor** the Reg1 Form should be completed by parent/guardian. In the absence of Passport or Identity Card a copy of the Birth Certificate will suffice.

Completed forms should be returned to **CLIENT IDENTITY SERVICES** at the above address. Tel: +353 1 704 3281, Fax: +353 1 704 3237

**FORM OF CONSENT**

TO: CLIENT IDENTITY SERVICES

I hereby give my permission for the PPS Number allocated on the basis of the attached Reg1 Form to be given to the third party/parties acting on my behalf in dealings with the Revenue Commissioners, Government Departments and other service providers in Ireland.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**This Form of Consent must accompany the completed Reg1 Form and letter from the third party.**