Please see below for the most recent guidance about how to get a PPS card during the Covid 19 Restrictions

From: DEASP [mailto:no-reply@mywelfare.ie]

Sent: Friday 20 March 2020 18:02

Subject: Postponement of Appointments

Dear Sir/Madam

This email is being sent to you because you made an appointment to attend an office of this Department for SAFE registration.

In line with the latest HSE and WHO advice around social distancing and in order to fight the spread of the COVID-19 virus, the Department has taken the decision to temporarily postpone all SAFE registration appointments with immediate effect to reduce footfall to offices in the best interest of customers and staff.

If you had made your appointment to obtain a **Personal Public Services Number** (PPSN) you can now apply for a PPSN by email by taking the following steps.

- Download and complete a REG1 form. This form is available at the following link https://psc.gov.ie/application-form-for-a-personal-public-service-number/ (This form is attached)
- 2. Scan or take a photograph of the following documents;

(You will need a copy of your

- TRC Card from IPO
- Your IPF1 Form from the IPO
- A proof of address from
- 3. Email these scanned images to PPSN@welfare.ie

Alternatively, you can send the completed REG1 form and scanned copies/photographs of your Identity Document and Proof of address to PPSN Allocation, CIS Registration, DEASP, Shannon Lodge, Carrick on Shannon, Co Leitrim, N41 KD81.

You should ensure that all the documents you sending are filled out clearly.

Your PPSN will be posted out to you.

For more information on the Department's response to the COVID-19 pandemic, please visit <u>our website</u> at <u>www.gov.ie/welfare or follow us on Twitter https://twitter.com/welfare_ie_.</u>

Application form for



Social Welfare Services REG 1

Data Classification R



Personal Public Service Number

Part 1	Your own details												
 Title: (insert an 'X' or specify) 	Mr. Mrs. Ms. Other												
2. Surname:													
3. First name(s):													
4. Birth first name(s):													
5. Birth surname:													
6. Your mother's birth surname:													
7. Your date of birth:													
8. Your gender:	D D M M Y Y Y Y Male Female												
Contact Details													
9. Your address:													
County													
Postcode													
10.Your telephone number:													
	MOBILE												
	LANDLINE												
11. Your email address:													
Declaration													
I declare that all the information I have given on this form is accurate.													
	Date: 2 0												
	DD MM YYYY												
Signature (not block letters)													
	Date: 2 0												
Signature of witness (not block lat	D D M M Y Y Y Y												

Part 1 continued	Your own details																					
12.Are you?	Single							Cohabiting														
	Married								In a Civil Partnership													
[Separated								A surviving Civil Partner													
[Divoi	rce	ed				A former Civil Partner														
[Widowed								(you were in a Civil Partnership that has since been dissolved)													
13.If you are married, in a civil	pai	rtne	rsł	nip	or (coh	abit	ing	, fro	m	wha	at d	ate	?								
	D D M M Y								Y Y Y													
14. Please state your spouse's, civil partner's or cohabitant's details:																						
Surname:																						
First name(s):																						
PPS No.:																						
15.Please state the reason why	you	u rec	qu	ire	a Pl	PS N	Nun	nbe	r?	Į.												
16.Your nationality?																						
17.Country you were born in?																						
18.If born in the Republic of Ire	elan	d, w	ha	t co	oun	ty v	vere	e yo	u b	orn	in?	•										
19. Name of the most recent country (before the Republic of Ireland) in which you were employed, educated, registered or from which you were receiving a pension, benefit payment														ent								
or allowance?																						
20. Your social security, personal or registration number in that country?																						
21.If you lived or worked in the Republic of Ireland up to 1979, what was your Irish National Insurance Number?																						
22.If you previously lived in Ire	lan	d pl	lea	ISE	stat	te v	our	ade	dre	ss a	t th	at t	ime	٠.								
22.ii you previously lived in ite	, idii	u, pi		.30	Ju		Uui	au		, a				·.								
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Data Protection Statement

The Department of Employment Affairs and Social Protection administers Ireland's social protection system. Customers are required to provide personal data to determine eligibility for relevant payments/benefits. Personal data may be exchanged with other Government Departments/Agencies where provided for by law. Our data protection policy is available at www.welfare.ie/dataprotection or in hard copy.