

URN _____

DCYA Ref No _____

(For office use only)

New Applications Information 2019/20**Section 1: Primary organisation contact details****1.1** The **Business Name** is the name of the childcare service e.g. Little Learners.**Business Name** _____**1.2** The **Legal Name** is the legal entity responsible for the organisation. The authorised signatory is the person who will be the 'Primary Authorised User' on the Programmes Implementation Platform (PIP) with the responsibility of assigning access permissions at organisation level and, if relevant, individual childcare facility level.

Accepted legal structures:	The legal name should be:	The primary authorised user position should be:
Limited Company (must attach Certificate of Incorporation)	the company name	the director
Sole trader	the name of the sole trader	the sole trader
Partnership	the names of the partners	one of the partners
School board of management	the board name	the Chairperson

(Please note that a childcare service must fall into one of the above categories in order to be eligible to participate in any of the childcare programmes)

Legal Name (see table above)
(must match legal name on form 6) _____

TRN _____ TCAN _____

Legal Structure (see table above) _____

Community Based or Private Enterprise _____

Primary Authorised User (PAU) - Details**1.3** The Primary Authorised User contact details given in this application will be set up on PIP as the primary contract user at organisation level and will be used to manage your contracts, finance / bank details, tax compliance details and authorise PIP access to any other users in your organisation.PIP Primary Authorised User
(see table at 1.2 above) _____Position held (see table at 1.2 above)
(must match position on forms 4 and 6) _____Primary Authorised User Address

Contact Number of Primary Authorised User Landline _____ Mobile _____

Contact Email of Primary Authorised User _____

(must match email on forms 4 and 6)

N.B. For Security purposes the email address provided must be unique and accessible only to the Primary Authorised User.

Section 2: Service details

Business name (see 1.1 above) _____

Childcare Service Address

Contact Number for Childcare Service Landline _____ Mobile _____

Contact E-mail of Childcare Service _____

TUSLA Registered (please circle) Yes / No

Registration date: / /

(This is a requirement for ALL early years' services. The application will not be accepted without Tusla registration)

Section 3: General contact details for correspondence

(Please complete this section if nominating another person to receive general business correspondence related to the childcare programmes and PIP e.g. service manager)

Contact Name _____

Position held _____

Secondary Contact Address

Street 1 _____

Street 2 _____

Street 3 _____

County _____

Contact Number Landline _____ Mobile _____

General Contact Email _____

Please return this form to your local city/county childcare committee