



### CHECKLIST

BEFORE SUBMITTING THIS FORM PLEASE REFER TO THIS CHECKLIST TO ENSURE YOU HAVE COMPLETED IT CORRECTLY.

- ✓ Fully completed application form
- ✓ Driving licence
- ✓ Identity documents e.g. passport
- ✓ Correct Fee
- ✓ Your foreign driving licence (if this applies)
- ✓ Your last digital tachograph driver card (if this applies)
- ✓ Proof of residency (if this applies)
- ✓ If card was lost/stolen/damaged or malfunctioned attach report
- ✓ If a card was confiscated by an enforcement body attach report

#### DATA PROTECTION:

Data held on your Driver Card may be exchanged with the appropriate authorities in other Member States, for enforcement purposes.

#### SECTION 1 DETAILS OF APPLICANT

SURNAME

FIRST NAME

MR

MRS

MISS

MS

DATE OF BIRTH DAY  MONTH  YEAR

CURRENT ADDRESS

PLACE OF BIRTH

DAYTIME PHONE NUMBER  MOBILE PHONE NUMBER

E-MAIL ADDRESS

PERSONAL PUBLIC SERVICE NUMBER (P.P.S.N.) (formerly R.S.I. Number)

**SECTION 2****THE DIGITAL TACHOGRAPH DRIVER CARD YOU WANT**

ARE YOU THE HOLDER OR HAVE YOU HELD ANY OTHER TYPE OF DIGITAL TACHOGRAPH CARD?

YES  NO

IF YES, TICK APPROPRIATE BOX AND GIVE DETAILS

COMPANY

WORKSHOP

ISSUING AUTHORITY

Complete only **ONE** of the following (Please tick and supply details as appropriate)

**A** I AM APPLYING FOR MY FIRST DIGITAL TACHOGRAPH DRIVER CARD AND I HOLD A VALID DRIVING LICENCE ISSUED IN IRELAND

INSERT DRIVING LICENCE NO.

**B** I HOLD A VALID DRIVING LICENCE ISSUED BY ANOTHER COUNTRY AND WISH TO APPLY FOR MY FIRST DIGITAL TACHOGRAPH DRIVER CARD AND I AM PROVIDING PROOF OF RESIDENCY IN IRELAND

Please supply the following information regarding your driving licence.

COUNTRY OF ISSUE

NAME OF THE ISSUING AUTHORITY

DRIVER LICENCE NUMBER

EXPIRY DATE OF LICENCE

**C** I AM AN EXISTING IRISH DIGITAL TACHOGRAPH DRIVER CARD HOLDER WISHING TO REPLACE MY CARD

Please state reason for replacement.

LOST

STOLEN

DAMAGED

OTHER (SPECIFY)

Please confirm when and where this occurred.

DATE:

TOWN/COUNTRY:

If lost or stolen please attach a report of where and to what authority you reported the matter.

If your card has malfunctioned or is damaged it must be returned with the application form and a report attached setting out the details.

**D** I AM AN EXISTING DIGITAL TACHOGRAPH DRIVER CARD HOLDER WISHING TO EXCHANGE MY CARD

TO NOTIFY CHANGE OF ADDRESS

TO NOTIFY CHANGE OF NAME

TO NOTIFY CHANGE OF PHOTOGRAPH

If you are exchanging your card, your original card must be returned before the new card is issued.

**E** I WISH TO EXCHANGE MY FOREIGN DIGITAL TACHOGRAPH DRIVER CARD FOR AN IRISH DRIVER CARD

Please supply the following details.

COUNTRY OF ISSUE

NAME OF ISSUING AUTHORITY

DRIVER CARD NUMBER

**F** I WISH TO RENEW MY DIGITAL TACHOGRAPH DRIVER CARD BECAUSE MY PRESENT CARD IS DUE FOR RENEWAL OR HAS EXPIRED

**G** MY PREVIOUS DIGITAL TACHOGRAPH DRIVER CARD WAS SUSPENDED/WITHDRAWN BY AN ENFORCEMENT AUTHORITY

Please supply details

**SECTION 3** PHOTOCOPIES OF IDENTITY DOCUMENTATION WILL SUFFICE FOR ALL APPLICATIONS

Tick relevant boxes for the documents you are providing to prove your identity.

DRIVING LICENCE

BIRTH CERTIFICATE

PASSPORT

**SECTION 4** WITNESS OF SIGNATURE

I certify that the photograph (on the back of which I have signed my name) supplied with this application is a true likeness of the applicant who has signed the declaration at Section 5 in my presence.

|                    |                      |                      |                            |
|--------------------|----------------------|----------------------|----------------------------|
| SIGNATURE OF GARDA | <input type="text"/> | <b>STATION STAMP</b> |                            |
| NAME               | <input type="text"/> |                      |                            |
| RANK               | <input type="text"/> |                      |                            |
| GARDA NUMBER       | <input type="text"/> |                      |                            |
| GARDA STATION      | <input type="text"/> |                      | PHONE <input type="text"/> |
| DATE               | <input type="text"/> |                      |                            |

**SECTION 5** DECLARATION/SIGNATURE

The person who is applying for a digital tachograph drivers card must sign this declaration.

**DECLARATION BY APPLICANT**

I hereby apply for a Driver Card and I declare that my address indicated above is my place of normal residence, that the information given by me in this application is correct and that the accompanying photographs and other documents relate to me. I am aware that if I am disqualified from driving or my Driving Licence has been revoked for any reason, this digital tachograph driver card cannot be used, until the period of restriction has ended.

**IMPORTANT**

If presenting this form for signature by a Garda (Section 4 above) you must sign this application form in the presence of that Garda. The signature must be in black ink and your signature must be completely within the box.

|            |                                  |                                 |
|------------|----------------------------------|---------------------------------|
| SIGNATURE: | <input type="text"/>             | <b>PLACE<br/>PHOTO<br/>HERE</b> |
| DATE:      | <input type="text" value="/ /"/> |                                 |