

TRANSFER OF RESIDENCE

C&E 1076 (Rev1)

Application and Declaration for Exemption from Import Charges and Vehicle Registration Tax

Local Ref. Nu	ımber
Date of Lodge	ement

Before completing this form, please read Public Notice Number 1875 and Revenue Information Leaflet VRT - Transfer of Residence, concerning tax relief on personal effects and motor vehicles respectively.

_		Pers	sonal D	etails					
1.	Name of App	licant:							
2.	Daytime tele	phone number:							
	3a. Resider	ce outside the State		3b.	Residence	in the Sta	te		
4.	Occupation o	utside the State:							
5.	Duration of n	ormal residence outside the State	e: From	/	/	То		1	1
6.	Date of taking	g up residence in the State:						/	1
7.	under the tra	ailed of an exemption from Vehicl nsfer of residence provisions in the provide details on page 6 of this form,	ne last five		Yes	No		(pleas	e tick √)
		Pro	perty D	etails					
8.	Date of impo	rtation into the State:						/	1
9.	Place of impo	ortation into the State:							
10.	Importer or a	gent responsible for this importat	ion: (<i>The a</i> g	gent must d	complete page	7 of this fo	rm)		
	Name								
	Address								
11.	Importer/Age	nt's Telephone No.:							
12.	Does the pro	perty include a motor vehicle?			Yes	No		(pleas	e tick √)

- 1. This form must be completed and presented to Customs at the place of importation.
- 2. Where more than one vehicle is involved please complete a separate version of the form on page 2 for each vehicle.
- 3. Page 6 may be used to provide additional information regarding this application.

	Vehicle Details			
13.	Make and model:			
14.	Current registration number:			
15.	Country where registered:			
16.	Date of first use and possession by applicant:		1	1
17.	Date of permanent importation into the State:		1	1
18.	Place of importation into the State:			
19.	Address where the vehicle is currently kept:			
20.	When the vehicle was acquired was it the subject Yes	No	(pleas	e tick √)
20.	of an exemption or refund of tax? (If yes, please refer to Revenue Information Leaflet VRT- Transfer of Residence Duty Free Vehicles and provide details on page 6 of this form)			S don't y
_	For Official Use Only			_
(TI	his space is for details of the vehicle's OMSP and the notional VRT payable at the time the deck must be recorded accurately as they are required for statistical and control pu A print-out of the "Display 2nd Hand Valuation" obtained from the MVT system w	ırposes.		he details
	New Registration Number = =			
	Officer: Date	ə:	/	/

I hereby declare that I am transferring my normal residence to the State on the date declared on page 1 of this form. I also declare that the property (including any motor vehicle) detailed in this application:

- was in my possession and was used by me at my place of previous normal residence outside the State for a minimum period of at least six months prior to my taking up residence in the State,
- was acquired by me under the general conditions of taxation in force in the domestic market of a country and is not the subject, on the grounds of exportation or departure from that country, of any exemption from or refund of any tax*,
- is my personal property at the time of my transfer of residence to the State,
- is being brought permanently into the State by me within twelve months of the date of my taking up permanent residence in the State.

I further declare that the information given in this form relates to this application and is true and correct. I understand that the onus to supply the proof as set down in law rests with me. I also understand that my failure to supply the required proof, or otherwise, to fail to comply with the conditions for the granting of the exemption may result in the refusal of this application.

I undertake that the property, including any vehicle, whose details appear on this application will not be sold or otherwise disposed of, hired out, lent or given as security in the State without the prior written permission of the Revenue Commissioners during in the period of twelve months following its importation and, in the case of any vehicle, during the period of twelve months following its registration unless payment of the appropriate import charges and, where applicable, the Vehicle Registration Tax has been made.

I hereby claim relief from the payment	of import charges and,	where appropriate,	Vehicle Registration	Tax in
respect of the property detailed on this	form.			

Signature of Applicant:	Date:	1	/	

WARNING

UNDER THE LAW ANY PERSON MAKING, SUBSCRIBING OR CAUSING TO BE MADE OR SUBSCRIBED ANY FALSE DECLARATION IN ANY MATTER RELATING TO CUSTOMS DUTIES AND / VEHICLE REGISTRATION TAX IS LIABLE ON CONVICTION TO HEAVY PENALTIES.

^{*}Please delete this paragraph if the vehicle was acquired duty free through diplomatic/consular arrangements or because of membership of an international organisation as described in Revenue Information Leaflet VRT concerning Transfer of Residence Duty-free vehicles.

	*List of Articles to be Imported	
Quantity	Description	Value €

^{*} Where a separate list of items to be imported is being submitted each page of the list must contain the information requested above and be signed and dated by the importer or his/her authorised agent.

	*List of Articles to be Imported	
Quantity	Description	Value €

^{*} Where a separate list of items to be imported is being submitted each page of the list must contain the information requested above and be signed and dated by the importer or his/her authorised agent.

	(This space is for use by the applicant to provide additional information	tion if req	uired)		
Signature:		Date:	1	/	

as *Importer/Agent of Importer of the items described in the list attached hereto which are being imported on transfer of normal residence to the State and which *have arrived/are due to arrive in the State at _____ (state place of importation) (give particulars, name etc. of import per conveyance) claim relief from payment of relevant charges including Vehicle Registration Tax in respect of such goods under the Transfer of Residence provisions. Signature *Importer/Agent Date: Address: **Declaration by Carrier** I hereby declare that Vehicle Registration. No. _____*/ Container No._____*/ containing the goods listed herein and imported by ______(Importer) contains *no other consignments/ *other consignments as follows (give details of any other consignments): Signature of Carrier: Date: Note: This declaration by the carrier is not required where the goods are imported as part of a groupage load for which a special manifest is presented.

Declaration at Import by Importer or Authorised Agent —

*Delete words which do not apply

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(Check list of documentary evidence lodged in support of this application. This must be completed in all cases

(Crieck list of documentary evidence loaged in si	ирроп от инѕ аррисацон. тт	is must be completed in all cases)
The following proofs have	been submitted	not been submitted (please <
Evidence of normal residence outside the state of th	State:	
■ Disposal of property abroad		
■ Cessation of employment		
Evidence of day-to-day living outside the State: (e.g. bank/credit card statements)		
Other documentation:		
2. Evidence of six months possession and us	se of the vehicle outside th	e State
■ Vehicle registration document Date registered by applicant		
Certificates of insurance for the vehicle showing applicant's name:From to		
■ Sales invoice/receipt of purchase Date of purchase		
■ Sailing ticket (where applicable)		
Other documentation		
3. Evidence of transfer of residence to the Sta	ate	
■ Acquisition of property in the State		
■ Commencement of employment		
Other documentation		
Documentary evidence to satisfy the requirements has*/has not* been produced	at 1, 2 and 3 above	
Application: Allowed Refused*		Station Stamp
Officer		*/doloto as annronriato)

T.O.R. 1

SECTIONS A, B OR C MUST BE COMPLETED BY APPLICANT.

A. FOR THO	SE RETURNING TO IRELAND AFTER RESIDENCE ABROAD.
Name:	
Date of Birth:	
PPS Number:	
Address in Ireland:	
B. FOR THO	SE TAKING UP RESIDENCE IN IRELAND FOR THE FIRST TIME.
Name:	
Date of Birth:	
PPS Number:	
Address in Ireland:	
Employer: (if any, in Ireland)	
Address:	
C. <u>FOR</u>	THOSES TRANSFERRING BUSINESS TO IRELAND.
Name:	
Date of Birth:	
PPS Number:	
Address in Ireland:	
VAT Number:	

(Relief from VAT can only be allowed when you have registered for VAT.)