

TRANSFER OF RESIDENCE FROM OUTSIDE THE EU

C & E 1076 (Rev 1)

APPLICATION AND DECLARATION FOR EXEMPTION FROM IMPORT CHARGES AND VEHICLE REGISTRATION TAX.

LOCAL REF. NUMBER	
DATE OF LODGMENT	

Before completing this form, please read Public Notice Number 1875 and Revenue Information Leaflet VRT 3 concerning tax relief on personal effects and motor vehicles respectively.

PERSONAL DETAILS

1. Name of applicant:

2. Daytime telephone number:

3a. Residence outside the State

3b. Residence in the State

4. Occupation outside the State :

5. Duration of normal residence outside the State:

From	/	/		to	/	/	
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6. Date of taking up residence in the State:

/		/
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7. Have you availed of an exemption from Vehicle Registration Tax under the transfer of residence provisions in the last five years?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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(If so, please provide details on page 6 of this form)

(please tick ✓)

PROPERTY DETAILS

8. Date of importation into the State:

/		/
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9. Place of importation into the State:

10. Importer or agent responsible for this importation:

(The agent must complete page 7 of this form)

Name: _____

Address: _____

11. Importer/Agent's Telephone No.:

() _____

12. Does the property include a motor vehicle?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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(please 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:

 / /

17. Date of permanent importation into the State:

 / /

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 of an exemption or refund of tax?

(If yes, please refer to Revenue Information Leaflet VRT 4 concerning duty free motor vehicles and provide details on page 6 of this form)

 Yes
 No

(please tick õ)

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(This space is for details of the vehicle's OMSP and the notional VRT payable at the time the declaration is made. The details must be recorded accurately as they are required for statistical and control purposes. A print-out of the "Display 2nd Hand Valuation" obtained from the MVT system will suffice)

New registration Number:

Officer: _____ Date: ____/____/____

Declaration and Undertaking

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 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: ____/____/____

**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 4.*

WARNING

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

(This space is for use by the applicant to provide additional information if required)

Signature: _____

Date: _____

DECLARATION AT IMPORT BY IMPORTER OR AUTHORISED AGENT

I _____ as importer/agent of importer* of the items described in the list on this form or 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)
per _____(give particulars, name etc. of import conveyance) claim relief from payment of relevant charges including Vehicle Registration Tax in respect of such goods under the Transfer of Residence provisions.

Date: Signature: _____ Importer/Agent*
Address: _____

DECLARATION BY CARRIER

I hereby declare that:
vehicle registration no. _____/ Trailer 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: The 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.

* 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)

The following proofs have: been submitted not been submitted (please ✓)

1. Evidence of normal residence outside the State:

- | | | |
|--|--------------------------|--------------------------|
| • Disposal of property abroad: | <input type="checkbox"/> | <input type="checkbox"/> |
| • Cessation of employment: | <input type="checkbox"/> | <input type="checkbox"/> |
| • Evidence of day-to-day living outside the State:
(e.g. bank/credit card statements) | <input type="checkbox"/> | <input type="checkbox"/> |
| • Other documentation: | <input type="checkbox"/> | <input type="checkbox"/> |

2. Evidence of six months possession and use of the vehicle outside the State:

- | | | |
|--|--------------------------|--------------------------|
| • Vehicle registration document:
Date registered by applicant: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| • Certificates of insurance for the vehicle showing applicant's name:
From: _____ to: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| • Sales invoice/receipt of purchase:
Date of purchase: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| • Sailing ticket (where applicable): | <input type="checkbox"/> | <input type="checkbox"/> |
| • Other documentation: | <input type="checkbox"/> | <input type="checkbox"/> |

3. Evidence of transfer of residence to the State

- | | | |
|---|--------------------------|--------------------------|
| • Acquisition of property in the State: | <input type="checkbox"/> | <input type="checkbox"/> |
| • Commencement of employment: | <input type="checkbox"/> | <input type="checkbox"/> |
| • Other documentation: | <input type="checkbox"/> | <input type="checkbox"/> |

Documentary evidence to satisfy the requirements at 1, 2 and 3 above
has*/has not* been produced

VRO Stamp

Application: Allowed
Refused*

Officer: _____

*(delete as appropriate)

T.O.R. 1

Section A, B or C must be Completed

A. For those returning to Ireland after a stay abroad.

Name:

Address in
Ireland

PPS Number:

B. For those taking up residence for the first time.

Name:

Address in
Ireland

Employer (if any, in Ireland)
Address:
.....

C. For those transferring their business to Ireland

Name:

Address in
Ireland

VAT Number:

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