

DECLARATION FOR REGISTRATION OF A NEW OR USED MOTOR CYCLE

(Please read notes overleaf before completing this form)

Birth Cert. Number (where applicable)

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A. VEHICLE PARTICULARS

1. Make				
2. Model				
3. Further Description				
4. Colour/s			C O C C	
5. Engine Type		6. Engine Capacity (cc)		
C O D E				
7. Frame Number				
8. Engine Number				
9. Maximum Design Speed (km/Hour)				
10. Statistical Code				
10a. EU Type - Approval Directive/s				
11. Registration Number and Date of First Registration in the State.		Day	Month	Year
Receipt No. (where applicable)				

B. REGISTRATION TAX PARTICULARS

VAT: Where VAT is also payable at the time of registration, a Form VAT 4 should be completed.				
12. No. of cc up to and including 350 cc:		13. No. of cc above 350 cc:		
No. cc @ €2		No. cc @ €1		
14. VRT Payable €		15. Method of Payment (Code Only)		
16. In the case of a new motor cycle is it being declared for demonstration purposes. (Please tick)		Yes	No	

C. ACCOUNTING PARTICULARS

DISTRIBUTOR DETAILS

17. Name	
(a) T.A.N.	(b) Invoice Reference No.

DEALER DETAILS

18. Name	
(a) T.A.N.	(b) Sales Invoice Ref.

PAYER DETAILS

19. Name and Address	
(a) T.A.N.	(b) VAT Number

D. OWNER PARTICULARS

20. Surname/ Company Name	
Title: (Mr., Mrs., Miss, Dr., Rev., etc.)	
First Name(s)	
Address	
Town/City	
County	21. Index Mark of County/Borough
VAT No.	T.A.N. (where applicable)
22. VRT Exemption (Please state, if appropriate)	
VRT Exemption Code (where appropriate).	

E. PREVIOUS REGISTRATIONS

23. COMPLETE ONLY FOR USED MOTOR CYCLES				
Latest Registration Number	Country of Latest Registration	Date of Latest Registration	Country of First Registration	Month & Year of Manufacture

F. PAYER'S DECLARATION

24. I, _____
(BLOCK CAPITALS)

declare that the details given above relate to this motor cycle and are, to the best of my knowledge, true and accurate.

Signature: _____

Date: _____

G. OFFICIAL USE ONLY

25. Officer's Signature and VRO Date-Stamp

Signature: _____

NOTES

These notes are intended to be an aid to completing this form. In cases of difficulty consult with any official in your local Revenue Vehicle Registration Office (VRO). The numbers below refer to the corresponding box numbers on the form. In certain boxes codes are required – a comprehensive list of all codes is available from any Revenue Vehicle Registration Office. These codes **must** be inserted – not to do so will result in a delay in your registration. VAT **will** only be payable at the time of registration where a new motorcycle has been acquired in another Member State by a person/company/institution not entitled to a deduction of VAT under section 12 of the VAT Act 1972.

SECTION A - VEHICLE PARTICULARS

1. Only the manufacturer's marque is to be inserted here.
2. Enter the model name.
3. Enter and remainder of model description.
4. Either one colour or the appropriate combination should be entered here + CODE.
5. As appropriate (e.g. petrol, electricity) + CODE.
6. Enter Cubic Centimetres.
10. This Code is available from any VRO or Fax No: (053) 33779.
11. If you have reserved a number the receipt number should be entered in the sub-box provided – the receipt itself should accompany this application.

SECTION B – REGISTRATION TAX PARTICULARS

- 12/13. The rate of VRT applicable is €2 per cc. up to 350cc. and €1 per cc. thereafter.
14. The total resulting from the calculations in Box 12 and Box 13.
15. Payment may be made by cash or bank draft. Authorised traders may pay by deferred (if approved), FACT, "Other Public Departments" or ordinary cheque. Where you are claiming that your vehicle is exempt from Vehicle Registration Tax you should insert here the code you entered in Box 22.

PAYMENT BY:	
CASH	A
DEFERRED	E
FACT	D
OPD	J
EXEMPT	X
ORDINARY CHEQUE	U

SECTION C – ACCOUNTING PARTICULARS

- 17-19. Complete as appropriate. Where the Payer is the same as the individual/company in Section D it is sufficient to note this in box 19. Where Boxes 17 and 18 do not apply simply note "not applicable" in the boxes.

SECTION D – OWNER PARTICULARS

20. State clearly, using Block Letters, the name and address of the person in whose name the motor cycle is to be registered. In the case of a legal entity (e.g. a limited company) the full and correct legal title should be declared e.g. "A.B. Motors" should read "A.B. Motors Ltd." or "A..B. Motors PLC". If the owner has a VAT number or a Trader Account Number it should be entered in the appropriate box.
21. A list of these index marks may be obtained from any Revenue Vehicle Registration Office.
22. Where you are entitled to an exemption from VRT please state the exemption and insert the appropriate CODE in the sub-box.

SECTION E – PREVIOUS REGISTRATIONS

23. Complete this section only where the vehicle is used.

SECTION F – PAYER'S DECLARATION

24. This box should be signed and dated by the person named in box 19 or, in the case of a company, by an authorised person.

Any changes of owner **prior to first licensing** of a vehicle should be notified to the Central Vehicle Office, Freeport, Rosslare Harbour, Co. Wexford without delay, as the owner will be held liable for any "on the spot" fines for parking offences until the Revenue Commissioners are notified and their "register" amended.

RF100 MOTOR TAX APPLICATION FORM FOR A NEW OR USED MOTOR CYCLE

Application: I apply for a licence (Tax Disc) for the vehicle described

A. VEHICLE PARTICULARS				
1. Make				
2. Model				
3. Further Description				
4. Colour(s)				CODE
5. Engine Type	CODE	6. Engine Capacity (cc)		
7. Frame Number				
8. Engine Number				
9. Maximum Design Speed (km/hour)				
10. Statistical Code				
10a. EU Type - Approval Directive/s				
11. Registration Number and Date of First Registration in the State.		Day	Month	Year

B. OWNER PARTICULARS	
Block Capitals Only	
Title: Mr., Ms. etc.	
First Name(s)	
Surname or Company Name	
Address	
Town / City	
County	
Phone No.	

1. OFFICE USE ONLY											
INS	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>CASH</td><td>€</td></tr> <tr><td>CHQ</td><td>€</td></tr> <tr><td>PO</td><td>€</td></tr> <tr><td>BD</td><td>€</td></tr> <tr><td>OTHER</td><td>€</td></tr> </table>	CASH	€	CHQ	€	PO	€	BD	€	OTHER	€
CASH	€										
CHQ	€										
PO	€										
BD	€										
OTHER	€										
EXMT	Change <input style="width: 50px;" type="text"/>										
Disc Letter <input type="checkbox"/>	Date Issued <input style="width: 50px;" type="text"/>										
	Date Received <input style="width: 100px;" type="text"/>										

C. MOTOR TAX PARTICULARS - TAX CLASS	
(Please Tick, As Appropriate)	
Motor Cycle <input type="checkbox"/>	Exempt <input type="checkbox"/>
Year of First Registration (outside the State)	If Exempt, is the motor-cycle:
<input style="width: 30px;" type="text"/>	State-owned <input type="checkbox"/>
	Fire-Services <input type="checkbox"/>
	Diplomatic <input type="checkbox"/>
Is the motor-cycle (Please tick as appropriate)	
New <input type="checkbox"/>	Imported or Used <input type="checkbox"/>

D. INSURANCE PARTICULARS	
Name of Insurance Company (NOT Broker)	
Expiry date of insurance certificate under Road Traffic Act, 1961, as amended	Day Month Year
	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
Policy No.	<input style="width: 100px;" type="text"/>

E. MOTOR TAX PERIOD	
NON-USE PERIOD (If applicable Complete Declaration Overleaf)	
MONTH YEAR to MONTH YEAR	
<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> to <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	
ARREARS PERIOD (If applicable)	
MONTH YEAR to MONTH YEAR	€ <input style="width: 50px;" type="text"/>
<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> to <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	
TAX DISC: From first day of	MONTH YEAR
	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
Total € <input style="width: 50px;" type="text"/>	

F. CARD PAYMENT OPTIONS	
(Please Tick, as appropriate)	
Master Card <input type="checkbox"/>	Visa <input type="checkbox"/> Amex <input type="checkbox"/> Laser <input type="checkbox"/>
Cardholder Signature: _____	
Expiry Date: _____	
Card Account No: _____	

G. DECLARATION	
I declare that the particulars given on this form are correct.	
Signature: _____	Date: _____
(See Note G)	

NOTES [To the completion of the RF100]

Please contact your local Motor Tax Office if you need any assistance completing this form

1. When to use this form

This form may be used to apply for a Motor Tax Disc for a vehicle which has already been registered by the Revenue Commissioners. This form should be brought or posted to the Motor Tax Office of the District where the vehicle is ordinarily kept.

2. Before completing this form

- Ensure that the REGISTRATION MARK AND NUMBER assigned to the vehicle have been inserted clearly and legibly at Section A, item 11 on the form.

3. How to complete this form

Section A All the vehicle information in this Section should already have been completed by the motor dealer or the person who paid the Vehicle Registration Tax (VRT) to the Revenue Commissioners.

Section B If not already completed enter the name and address of the registered owner i.e. the keeper in whose name the vehicle is being licensed (taxed). In the case of a LEGAL ENTITY, the full and correct legal title must be given, e.g. in the case of a registered company, the name should be stated as per the Certificate of Incorporation. In the case of a private firm, the name by which it is ordinarily known and the names of the partners must be given, e.g. "John and Mary Murphy trading as J & M Suppliers".

Section C Tick the box opposite the Tax Class under which you wish to tax the vehicle. If the class required is not listed, please write the required class in the box provided. You must provide all required information and include any necessary documentation as detailed in Note 4 below. **IMPORTANT** See tax class definitions at your local Motor Tax Office and ensure that the vehicle is eligible to be taxed in the class selected.

Section D Enter details of your Insurance i.e. Name of Insurer, Policy No. and Date of Expiry of cover - Your Insurance must be current when the tax disc comes into force and the Insurance must be appropriate to the declared use of the vehicle.

Section E First Licence (Tax Disc) - Liability For Motor Tax

(i) Road Tax liability arises from the date the vehicle is first used in a public place after registration with the Revenue Commissioners. If your application for motor tax does not commence from the date of registration because of non-use of the vehicle in a public place, this must be covered in the application. (See (ii)). Motor Tax Discs are not issued in respect of months already elapsed and in the case of a Motor Cycle the period that a tax disc may be applied for is 12 months.

(ii) If you are declaring non-use of the vehicle, you must complete the declaration of non-use below at a Garda Station. Enter the period of non-use in the boxes provided, starting with the date of registration of the vehicle e.g. if vehicle registered with the Revenue Commissioners in June, 2004, enter as:

06 | 04

Additional evidence in relation to non-use may also be required by the Motor Tax Office.

(iii) If arrears are due, enter in the boxes the start and end month of the arrears period and the relevant amount of money;

(iv) Insert the commencement month/year and tick the relevant box for the tax disc period required. Insert the amount of the fee and complete the total box.

Section F Complete this section if payment is being made by Credit Card or Debit Card.

Section G The signature on the application must be that of the keeper of the vehicle. (Under section 130 of the Finance Act, 1992, the 'Owner' is the 'Keeper').

4. What must accompany this form

You **MUST** include the following:

- Fee - You must include a cheque or postal order for the correct fee, made payable to the appropriate County/City Council and crossed "Motor Tax Account". Do not send cash through the post. Contact your local Motor Tax Office for clarification of the appropriate fees and other payment methods.
- In cases where the Goods Tax Class is required and the vehicle does not exceed 1524 kg unladen weight, a declaration should be made on the appropriate form available from the Motor Tax Office stating that the vehicle will not be used for non-commercial (private) purposes. A weight docket from an approved weighbridge is required if the vehicle exceeds 1524 kg unladen weight.
- PSV (plate) Licence - only applies to public service vehicles
- Article 60 licence - only applies to school buses
- Certificate of Exemption (e.g. Certificate of Approval from the Revenue Commissioners for Drivers/Passengers with Disabilities) - only applies to vehicles exempt from Motor Tax.

5. Change of Ownership Prior to First Taxing

On the sale of the vehicle to a new owner (other than to a motor dealer) the registered owner selling the vehicle must forward this form RF100 and details in writing of the name /address of the new owner and date of transfer of ownership to the Department of the Environment, Heritage and Local Government, Shannon, Co. Clare. (If sale is to a motor dealer completed form RF105 must be forwarded).

WARNING - FALSE DECLARATIONS

Any person making a false declaration, or who subsequently fails to notify any changes in the licensing particulars now furnished, including disposal of the vehicle, is liable to heavy penalties. A licensing authority may require appropriate evidence as to the accuracy of particulars declared.

DECLARATION OF NON-USE - Complete this section at a Garda station if you are claiming non-use of the vehicle in any public place for any period between the date of registration and commencement of the tax period.

(i) I declare that the vehicle bearing the registration number has not been used by me or with my consent in a public place in the period

FROM first day of

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Month Year

TO last day of

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Month Year

Signature

Date

Garda Station Stamp

(ii) The foregoing declaration was completed in my presence by the applicant.

Garda Signature

Date