

UK AUTHORISATION APPLICATION – NEW/ALTERATION/RENEWAL

<u>CHECKLIST: please ensure that the following information is included in your application prior to</u> sending it to the NTA. Incomplete applications will be returned.

1.	A completed applie	cation fo	rm, signe	ed and o	dated	•	•	•	
2.	The appropriate fe	е.	•	•	•	•	•	•	
3.	Copy of Valid Cor	nmunity	Licence	•	•	•	•	•	
4.	Valid Tax Clearan	ce Verifi	cation D	etails	•	•	•	•	
5.	Timetable .	•	•	•	•	•	•	•	
6.	Drivers rota .	•	•	•	•	•	•	•	
7.	Fare structure – $\in a$	and Poun	ds Sterli	ng	•	•	•	•	
8.	Copy of PSV Lice	nce(s) fo	r each ve	ehicle(s)) provid	ing the	service	•	
9.	Copy of Certificate of Roadworthiness (CVRT) for each vehicle(s).								
10.	Copy of Insurance service	Certifica	ate(s) for	each vo	ehicle(s)) provic	ling the	•	
11.	*A complete map	of the pro	oposed re	oute*	•	•	•	•	
12.	*Maps clearly show	wing eac	h individ	lual stoj	p*	•	•	•	

Note:

All of the above items (1-12) are required for a new application or a renewal application. Items marked with * are not required if your application is for a variation with no change in route and passenger pick-up/set-down locations.



APPLICATION FORM FOR AN AUTHORISATION OR RENEWAL OF AN AUTHORISATION TO CARRY OUT AN INTERNATIONAL REGULAR SERVICE OR AN INTERNATIONAL SPECIAL REGULAR SERVICE¹

To start a regular service	
To start a special regular service	
To renew authorisation for a service	
To alter the conditions of authorisation for a service	

National Transport Authority/ Údarás Náisiúnta Iompair

(Authorising authority)

1. Name and first name or trade name of the applicant operator; in the case of an application by a group of operators or by a partnership, the name of the operator entrusted by the other operators for the purposes of submitting the application:

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2. Services to be carried out¹

By an operator \Box	by a group of operators \Box	by a partnership	by a subcontractor \Box

3. Names and addresses of the operator or, in the case of a group of operators or of a partnership, the names of all operators of the group or of the partnership; in addition, any subcontractors shall be identified by their names²

3.1	. tel
3.2	. tel
3.3	. tel
3.4	. tel

¹ Tick or complete as appropriate.

² Attach list if appropriate.

4. In the case of a special regula	ar service:		
4.1 Category of passengers: ³	workers \square	school pupils/students \Box	other □
5. Duration of authorisation req			
6. Principal route of service (un	· · ·		
7. Period of operation:			
8. Frequency (daily, weekly, etc	.):		
9. Fares:		Annex attached \square	
10. Enclose a driving schedule driving times and rest time period	-	-	the international rules on
11. Number of authorisations or		1	
12. Any additional information:			
(Place and date)		(Signature	of applicant)

Important notice

In particular the following must be attached to the application:

(a) the timetable including the time slots for controls at relevant border crossings;

(**b**) a certified true copy of the operator's (or operators') licence(s) for the international carriage of passengers by road provided for according to national or Union legislation;

(c) a map on an appropriate scale on which are marked the route and the stopping points at which passengers are to be taken up or set down;

(d) a driving schedule to permit verification of compliance with the international rules on driving times and rest periods;

(e) any appropriate information concerning coach and bus terminals.

³ Tick or complete as appropriate.

⁴ The authorising authority may request a full list of passenger pick-up and set-down points with full addresses to be attached separately to this application form

⁵ Complete as appropriate. The attention of the applicant is drawn to the fact that, since the authorisation or its certified true copy has to be kept on board the vehicle, the number of authorisations or certified true copies, issued by the authorising authority, which the applicant must have should correspond to the number of vehicles needed for carrying out the service requested at the same time.