

DEPARTMENT OF AGRICULTURE, FOOD AND THE MARINE
APPLICATION FOR AN AUTHORISATION TO TRANSPORT LIVE ANIMALS
(COMMERCIAL TRANSPORT)

I/We, the undersigned, hereby apply to the Minister for Agriculture, Food and the Marine for an authorisation under Regulation 3 of the European Communities (Animal Transport and Control Post) Regulations, 2006 (S.I. No. 675 of 2006) to transport live animals and I/we declare that the particulars given in this application are correct.

N.B. PLEASE TICK AS APPROPRIATE

1. TYPE OF AUTHORISATION BEING APPLIED FOR

(a) Type 1 Authorisation (Journeys over 65km but less than 8 hours in duration)

and/or

(b) Type 2 Authorisation (Journeys over 8 hours in duration (long journeys))

2. PARTICULARS OF BUSINESS

(a) **Trade Name:** _____

Trade Address: _____

(b) **Telephone No:** _____

(c) **Status of Business:**

Limited company

Co-operative

Partnership

Sole Trader

(d) Please provide the following

(i) Company Registration Number: _____

(ii) V.A.T. Number: _____

(iii) Personal Public Service Number (PPSN): _____

(iv) Date of Birth: _____

(v) Email address: _____

(e) Location where business is carried out:

(f) Location of Registered office:

(g) If a **Limited Company or Co-operative**, state Name(s) and Address(es) of Director(s):

(h) If a **Partnership**, state Name and Address of each partner:

3. **PARTICULARS OF APPLICANT(S)**

(a) Name and address of applicant:

(b) Name and Address to which all correspondence concerning the authorisation should be forwarded

4. **DETAILS OF PREMISES**

(a) Is the premises to be used for or in connection with any other purpose or business?
YES **NO**

If **yes**, please specify:

(b) Is the premises wholly owned by the applicant?

YES **NO**

If **no**, please give details of ownership and any lease/letting agreement:

A copy of any current lease/letting agreement ***must*** accompany this form.

5. **DETAILS OF VEHICLES TO BE USED FOR THE TRANSPORT OF LIVE ANIMALS**

(Please note that vehicles used for the transport of animals on long journeys must be inspected and approved by the Department)

(a) Number of vehicles: _____

(b) Vehicle Registration Number (include details for each vehicle used to transport animals)
(Continue on separate page if necessary):

(c) Vehicle chassis number (for each vehicle to be used, cross referenced to registration number(s) (Continue on separate page if necessary):

(d) Type of transport (i.e. trailer, truck, articulated truck, tractor, other):
(Continue on separate page if necessary)

(e) Floor area of part of vehicle in which animals are to be carried (Sq Metres):
(Continue on separate page if necessary)

6. **DETAILS OF ANIMALS TO BE TRANSPORTED**

Please indicate the species of animal you propose to transport:

Yes **No**

(a)	Cattle over 0.9m at the withers	<input type="checkbox"/>	<input type="checkbox"/>
(b)	Horses	<input type="checkbox"/>	<input type="checkbox"/>
(c)	Sheep, Goats	<input type="checkbox"/>	<input type="checkbox"/>
(d)	Cattle up to 0.9m at the withers	<input type="checkbox"/>	<input type="checkbox"/>
(e)	Pigs less than 25kg in weight	<input type="checkbox"/>	<input type="checkbox"/>
(f)	Pigs greater than 25kg weight	<input type="checkbox"/>	<input type="checkbox"/>
(g)	Poultry	<input type="checkbox"/>	<input type="checkbox"/>
(h)	Dogs	<input type="checkbox"/>	<input type="checkbox"/>
(i)	Any other species of animal not referred to above (Please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>

7. **JOURNEY ORGANISER**

Please nominate a person(s) who will be responsible for the transport and who will provide information on the planning, execution and completion of the part of the journey under their control:

8. VEHICLE DRIVER AND ATTENDANTS

Please identify all persons who will carry out the function of driver and attendant on vehicles transporting animals referred to in point 4 above:
(Continue on separate page if necessary)

9. DECLARATION BY APPLICANT

- (a) I/We declare that to the best of my/our knowledge, all particulars given in this application are correct and no other application for a Transport Authorisation has been made in any other Member State of the European Community.
- (b) I/We agree to observe and be bound by all conditions of the European Communities (Animal Transport and Control Post) Regulations 2006 (S.I. No. 675 of 2006) and Council Regulation (EC) 1 of 2005 and to make available all required information to the Department of Agriculture, Food and the Marine when requested.
- (c) I/We undertake to notify the Department of Agriculture, Food and the Marine of any changes in or addition to the above particulars.
- (d) In accordance with Article 10(1)(b) of Council Regulation (EC) 1 of 2005 I/we declare that I/we have a sufficient and appropriate number of staff, equipment and operational procedures at my/our disposal to enable me/us to comply with the European Communities (Animal Transport and Control Post) Regulations 2006 (S.I. No. 675 of 2006) and Council Regulation (EC) 1 of 2005 and including where appropriate Good Practice Guides.
- (e) I/We also undertake to comply with the conditions of the European Communities (Animal Transport and Control Post) Regulations 2006 (S.I. No. 675 of 2006) and the requirements set out in Council Regulation (EC) 1 of 2005 relating to the transport of live animals and any conditions attached to an authorisation granted under the said Regulations.
- (f) I/We am/are aware that an authorisation granted on foot of false or misleading particulars supplied by the applicant may be revoked.
- (g) I/We am/are aware that the commission of an offence could result in the refusal, suspension or the revocation of an authorisation.

SIGNATURE(S) OF APPLICANT*

(or in the case of a company or co-operative, a person authorised for such purpose on behalf of the applicant).

NAME(S) IN BLOCK CAPITALS

POSITION:

DATE:

*If a partnership, all partners must sign.

It should be noted that information provided by you may be subject to disclosure under the FOI Acts 1997 and 2003. If you wish to have any of the records concerned protected under the Confidentiality, Commercially Sensitive, Personal Information or other exemption provisions of that legislation you should mark those records accordingly and state your reasons. The relevant exemptions will then be considered in the event of an FOI request relating to those records.

NOTES

- (1) This form, when completed, should be returned to:

*Department of Agriculture, Food and the Marine
Animal Welfare Division 4C
Agriculture House
Kildare Street
Dublin 2*

- (2) Incomplete forms will be returned to the applicant.

(Please retain copies of all documentation submitted for your own records)

Office Use

Date:

Reg: