



12D1234

Important Notice

Following notification of change of ownership the record for the above vehicle on the national vehicle database has been updated in your name as the registered owner.

Overleaf please find part completed form RF100 which should be used without delay for the first licensing (taxing) of the vehicle at your local motor tax office. The non-display of current tax disc on a motor vehicle in a public place at any time is an offence and the registered owner may be subject to heavy penalties

Driver and Vehicle Computer Services Division
Tel Lo-Call 0818 411412

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

A. VEHICLE PARTICULARS

1. Make FORD			
2. Model FIESTA			
3. Further Description/Body Type			
4. Colour/s RED/DEARG	CODE	5. Engine Capacity (cc) 1242	
6. Engine Number 5M12345			
7. Chassis Number WF0HXXGAJH5M*****			
8. Engine/Fuel/Power Source/Type PETROL/PEITREAL	CODE	9. CO ₂ Emissions (g/km) 147	
10. Statistical Code			
11. EU Type-Approval Directive/s	M1 Vehicles only 2001/116	Non M1 Vehicles Noise / Emissions E1*98/14*0191*10	
12. Number of seats 5	13. Number of Windows 0		
14. Registration Number and Date of First Registration in the State.	12D1234	Day 26	Month may
Year 2005			

If any of the vehicle particulars printed in Section A have changed, or are incorrect, you must inform the Revenue Commissioners.

B. OWNER PARTICULARS
BLOCK CAPITALS ONLY

Mr, Ms, etc.	MR
First Name(s)	TEST
Surname	USER
Company Name	
Address	12 ***** COURT
Town/City	SWORDS
County	CO. DUBLIN
Phone No.	

OFFICE USE ONLY

INS ☐	Cash €	Change €
KG ☐	CHQ €	
PSV ☐	PO €	
SB ☐	BD €	
EXNT ☐	Other €	
Date Received		
Disc Letter ☐	Date Issued	

C. MOTOR TAX PARTICULARS - TAX CLASS

(Please tick, as appropriate)

PRIVATE ☐	AGRICULTURAL TRACTOR ☐
GOODS Unladen Weight (kg) ☐	LARGE PUBLIC SERVICE VEHICLE Service capacity (excluding driver) ☐
Will vehicle be used to carry other people's goods for reward? Yes ☐ No ☐	EXEMPT (state reason) State-Owned ☐ Fire Services ☐ Diplomatic ☐ Driver/Passenger with a disability ☐ Other(Please specify) ☐
HACKNEY ☐	
TAXI ☐	
SMALL DUMPER ☐	
Skip Capacity (m ³) ☐	
OTHER TAX CLASS (Please Specify)	

E. MOTOR TAX PERIOD

NON-USE PERIOD (if applicable Complete Declaration overleaf)

MONTH	YEAR	to	MONTH	YEAR
☐	☐		☐	☐

ARREARS PERIOD (if applicable)

MONTH	YEAR	to	MONTH	YEAR	€
☐	☐		☐	☐	☐

TAX DISC	From first day of	MONTH	YEAR
		☐	☐

Tax Disc Period Required (Tick ONE Box)	3 months ☐	€	☐
	6 months ☐		
	12 months ☐	Total	€ ☐

F. CARD PAYMENT OPTIONS

(Please tick, as appropriate)

Master Card ☐	Visa ☐	Amex ☐	Laser ☐
Cardholder Signature:			
Expiry Date:			
Card Account No.:			

G. DECLARATION

I declare that the particulars given on this form are correct

Signature: _____