

# APPLICATION FORM FOR DIGITAL TACHOGRAPH WORKSHOP CARD



Use the checklist below to make sure that your application is complete before you return it.

**PART A** of this form must be completed by an approved fitter.

**PART B** of this form must be completed by the workshop manager, who is also responsible for submitting the form to the RSA.

## APPLICATION CHECKLIST

Please tick ✓ to confirm that the application is complete.

- All of **PART A** has been completed by an approved fitter
- All of **PART B** has been completed by the workshop manager.
- Clear photocopy of the **workshop's** valid NSAI Certificate of Approval.
- Clear photocopy of valid Certificate of Approval as a **fitter**.
- €60 fee.
- If you are applying for a replacement for a damaged, malfunctioning or locked-out card, you must submit that card as part of the application.
- For first-time applications, a passport-size photograph of the approved fitter must be submitted.  
If you are renewing or replacing an existing Workshop Card, you don't have to supply a photograph of the fitter, but you can if you want to.

## Where to send your application

Send the completed application form or submit it in person to:

Road Safety Authority  
Clonfert House  
Bride Street  
Loughrea  
Co. Galway.

Remember to enclose all relevant documents  
(see the checklist above).

## Processing

You will not be issued with a receipt for this application. If your application is incomplete or invalid, it will be returned to you immediately.

## Queries?

If you have any queries about completing this form, please contact the Road Safety Authority:

Telephone: (091) 872600  
Fax: (091) 872660  
Email: [digitaltacho@rsa.ie](mailto:digitaltacho@rsa.ie)  
[www.rsa.ie](http://www.rsa.ie)

# PART A: TO BE COMPLETED BY AN APPROVED FITTER

## 1. TYPE OF APPLICATION

(Please tick ✓ as appropriate)

- First-time application  
 Replacement card  
 Renewal card

Date current card expires:  
 (This is at point 4b of your Workshop Card)

Day		Month		Year					

## 2. DETAILS OF APPROVED FITTER

Surname	
First name	
Home address	
Date of birth	
PPSN	
Place of birth (country)	
Daytime phone number	
Mobile phone number	
Email address	

The RSA has my permission to use my mobile phone number to contact me.

yes

no



# PART B: TO BE COMPLETED BY THE WORKSHOP MANAGER

## 1. DETAILS OF APPROVED WORKSHOP

Workshop name																								
Workshop address																								
Workshop manager's name																								
Workshop manager's declaration	<p>I declare that I am the designated person authorised to apply for workshop cards on behalf of the workshop named above and that the fitter named at <b>Part A</b> of this application above has the required qualifications to work on digital tachographs.</p> <p>I declare that the information given by me in this application is correct and that the workshop is authorised to carry out work on digital tachographs.</p>																							
Signature																								
													Day	Month		Year								
Daytime phone number																								
Mobile phone number																								
Email address																								
The RSA has my permission to use my mobile phone number to contact me.																								
yes <input type="checkbox"/>																								
no <input type="checkbox"/>																								

## 2. PAYMENT

Please debit my VISA/Mastercard/American Express/Laser/Debit card with the amount of €60

Cardholder name																								
Card number																								
Expiry date																								
CVV2 number				3-digit number on back of the card																				