## GARAGES/PRIVATE OFF-STREET PARKING FORM A1.5 SPACES APPLICATION



Personal details of applicant:		- W. C.
Name and Surname:	Tel. / Mob.	
Address:	E-mail:	
	Fax:	
	ID:	(Please attach copy of ID card)
Parking Area Information:		
Location (please attach site plan):		Capacity:
Vehicle registration number of vehicles using the garage/parking area*:		
Posistration number and description of values	Dogiotrofice super	nd description of vohicle
Registration number and description of vehicle  1.	6. Registration number a	nd description of vehicle
2.	7.	
3.	8.	
		-
4.	9.	
5.	10.	
* For additional vehicles please fill in a second application form.		
The CVA Board may carry out a site inspection to ensure that the parking area is as described in the application, and may also carry out regular checks to ensure that the use remains the same. An annual fee of €46.59 will be charged for each vehicle in addition to the road licence. The application is subject to the CVA Board approval.		
Signature of Applicant: Signature of receiving clerk:		
	Date:	
FOR OFFICE USE ONLY		
Input date:	Documents requested:	Site plan
CVA acknowledgement no:	Site Inspection:	
Approved on:		
Reason for non-approval:		

Where a person filing an application for exemption knowingly supplies false or incorrect information, such person shall be guilty of an offence and shall, on conviction, be liable to a penalty (multa) of not more than €698.81.