



**FORM OF APPLICATION TO BE COMPLETED WHEN BRINGING INHERITED
PERSONAL PROPERTY INTO THE STATE FROM NON-EU COUNTRIES**

Part I

1. Name of Importer:								
2. I, _____ the Importer have a Residence in the State at:								
3. Name of Deceased:								
4. Place of Death:	Date of Death: <table border="1" style="margin-left: auto; margin-right: auto; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	
D	D	M	M	Y	Y			
5. I have become entitled to the property being imported: on inheritance, <input type="checkbox"/> or as personal representative of the deceased <input type="checkbox"/>								
6. I formally received possession / control of the property on: <table border="1" style="margin-left: auto; margin-right: auto; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>		D	D	M	M	Y	Y	
D	D	M	M	Y	Y			
7. Date and place of importation: <table border="1" style="margin-left: auto; margin-right: auto; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; width: 80%;"> <tr> <td style="height: 20px;"></td> </tr> </table>		D	D	M	M	Y	Y	
D	D	M	M	Y	Y			
I, _____ (Block Capitals) the importer, do hereby declare that the particulars at Parts I and II herein contain a full and true account of the goods and / or vehicle/(s) imported.								
Signature: _____	Date: <table border="1" style="margin-left: auto; margin-right: auto; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	
D	D	M	M	Y	Y			

The Revenue Commissioners collect taxes and duties and implement customs controls. Revenue requires customers to provide certain personal data for these purposes and certain other statutory functions as assigned by the Oireachtas. Your personal data may be exchanged with other Government Departments and agencies in certain circumstances where this is provided for by law. Full details of Revenue's data protection policy setting out how we will use your personal data as well as information regarding your rights as a data subject are available on our **Privacy** page on www.revenue.ie. Details of this policy are also available in hard copy upon request.

*** LIST OF ARTICLES TO BE IMPORTED**

DESCRIPTION	VALUE (€)

Total No. of items listed: _____ Signature of Importer: _____

***If the property includes a motor vehicle Part II must be completed**

UNDER THE LAW ANY PERSON MAKING OR SUBSCRIBING OR CAUSING TO BE MADE OR SUBSCRIBED ANY FALSE DECLARATION IN ANY MATTER RELATING TO CUSTOMS OR VEHICLE REGISTRATION TAX IS LIABLE ON CONVICTION TO HEAVY PENALTIES

Part II

** VEHICLE DETAILS

Make:	Model and Version:						
Colour(s):	Body Type:						
Engine Type:	Engine Capacity:						
Chassis No.:	Engine No.:						
No. of Seats:	No. of Windows:						
Right Hand Drive <input type="checkbox"/> Left Hand Drive <input type="checkbox"/>	Has Vehicle been previously registered? Yes <input type="checkbox"/> No <input type="checkbox"/>						
Latest Registration No.:	Country of latest Registration:						
Date of First Registration:	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y
D	D	M	M	Y	Y		
Has the Vehicle been converted, adapted or improved since latest Registration? Yes <input type="checkbox"/> No <input type="checkbox"/>							
Details of Conversion, Adaptation or Improvement:							

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VEHICLE REGISTRATION TAX (VRT) DETAILS

Statistical code:	Extras – Distributor / Factory fitted:	
Total value of extras: €		
Month and Year of First Registration <input type="checkbox"/> or Manufacture <input type="checkbox"/>		
Mileage:	Condition:	OSMP: €
VRT Category:	VRT Rate:	Vehicle Registration Cert No.:
Import Station <input type="checkbox"/> / VRO: <input type="checkbox"/>		
Officer:	Date:	

**** Use additional pages where more than one vehicle is being transferred into the State.**

Part III

DECLARATION AT IMPORT BY IMPORTER OR AUTHORISED AGENT

I, _____ as **Importer** or **Agent of Importer** of the items described in the list attached which are being imported into the State and which **have arrived** or **are due to arrive** in the State at _____ (state place of importation) per _____ (give particulars, name etc. of import conveyance) claim relief from payment of relevant charges including Vehicle Registration Tax in respect of such goods under the Inheritance Provisions.

Date

D	D	M	M	Y	Y
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Signature Importer / Agent _____

Address (Incl. Eircode). _____

DECLARATION AT CARRIER

I hereby declare that

Vehicle Reg. No. _____ / Trailer No. _____ / Container No. _____

containing the goods listed herein and imported by _____ (**importer**) contains

no other consignment / **other consignments** as follows: (Give details of any other consignments)

This declaration is not required where the goods are imported as part of a groupage load for which a special manifest is presented.

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ACCEPTANCE OF DECLARATION

Station: _____

Office: _____

Date:

D	D	M	M	Y	Y
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Ref. No. in TOR Register:

Comments:

EXAMINATION AND CLEARANCE