Claim for Tax Relief in Relation to Vehicles Purchased for use by Qualifying Organisations



The Drivers and Passengers with disabilities scheme provides repayment or remission of VAT and Vehicle Registration Tax (up to a certain limit) on the purchase of an adapted vehicle for transport of a person with specific severe and permanent physical disabilities.

Online application

- Please go to **www.revenue.ie**.
- Log onto my**Account** or ROS.
- Select the Drivers and Passengers with Disabilities (DPD) option.
- Select the appropriate category that refers to your application.
- Complete and submit.

If everything is in order and your application has been successful, the exemption notification will be available for you to download straightaway. (A random number of applications will be selected for audit, this may delay the approval of some applications.)

If you are unable to complete your application online you may complete this paper form and submit to the address below.

How to complete this application form to claim this tax relief:

- Please use BLOCK LETTERS.
- Place a tick \square in the relevant boxes.
- Ensure all supporting documentation is attached to your application or everything will be returned to you.

More information is available about the Drivers and Passengers with Disabilities Scheme and can be accessed by downloading the leaflet **VRT7** from **www.revenue.ie** or by contacting the Central Repayments Office on 01 738 3671.

The form should be forwarded to the following address: FREEPOST Office of the Revenue Commissioners Central Repayments Office Sarsfield House Francis Street Limerick V94 R972 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.



FORM DDO Claim for Tax Relief in Relation to Vehicles Purchased for use by Qualifying Organisations



ORGANISATION DETAILS			
Name:			
Address			
(incl. Eircode):			
Telephone No.			
Tax Reference	No.:		
Charity Regist	ation No.:		
nternational Ban	Account Number (IBAN) (Max. 34 characters)		
Bank Identifier Co	de (BIC) (Max. 11 characters) Name	e on account	
	Vehicle Details	S	
VIN No.:		C.C. :	
Fuel Type: [iesel Petrol LPG	Vehicle: New Used Import	
	e subject of a lease arrangement? Yes	No	
	Garage Details		
Name:		<u>.</u>	
Address			
(incl. Eircode):			
VAT No.:			
Phone No.:			
Please state are	you claiming:		
1. A vehicle spec	ally constructed or adapted for the transport of	disabled persons. YES NO	
2. A vehicle exte	sively adapted to transport disabled persons.		
3. A vehicle adar	ted to transport five or more persons with a disa		
-	driver please indicate the level of adaptation:		
SPECIA	· · ·	EXTENSIVE	
5. Is this your firs			
	5 above is NO, please quote registration no.'s of	rvenicies already approved on this Scheme.	
	cle replace any of the above vehicles?	YES NO	
• •	rsons do you provide care and transport for?		
9. How many of	these persons qualify under Regulation 3?		
	(This declaration must be completed by all a		
	or relief from tax under the Disabled Drivers a 4 (S.I. No 353 of 1994, as amended).	and Disabled Passengers (Tax Concessions)	
•	that the information on this form and on suppowledge and belief.	porting documentation is true and correct to	
I authorise repa	ment due to the Organisation to be paid dire	ectly to the above valid current bank account.	
Signature:		Date: / /	
Name (Block Le		on in the Organisation:	
	ess & telephone no.:	<u> </u>	

It is an offence to make a false declaration for the purposes of obtaining relief from tax.

CHECKLIST

When submitting this form please ensure you have all of the following:

1.	Fully Completed DDO			
2.	Copies of Primary Medical Certificates for disabled person(s)			
* Please note a minimum of 5 copies of Primary Medical Certificates are required if you answered YES to Q3 above				
3(a).	Declaration of Conversion of a Vehicle (for a new vehicle)			
or				
3(b).	Suitably Qualified Individual (SQI) (for used vehicles)			
4(a).	Copy of quotation for the purchase of a new vehicle			
or				
4(b).	Copy of purchase invoice for the vehicle marked paid in full			
5(a).	Copy of quotation detailing the adaptations to be carried out on the vehicle			
or				
5(b).	Copy of invoice detailing the adaptations carried out on the vehicle marked paid in full			
6.	Is the form signed and dated			

Please retain original documentation as these may be requested for verification purposes.

The completed application form should be sent to: Office of the Revenue Commissioners Central Repayments Office Sarsfield House Francis Street Limerick V94 R972