



Return this application to:  
**Road Transport Operator Licensing Unit**  
Department of Transport, Tourism and Sport  
Clonfert House, Bride Street, Loughrea, Co. Galway H62 ET93

**APPLICATION FOR CHANGE OF BUSINESS / REGISTERED / PARKING ADDRESS**

Please complete in CAPITAL LETTERS. Tick boxes as appropriate in this form. Please ensure that all relevant documents are enclosed (see page 2).

Section 1 Licence Details	<u>Office Use Only</u>
<p><b>1A</b> Name of Licence Holder _____</p> <p><b>1B</b> Road Haulage Operator Licence <input type="checkbox"/> Road Passenger Transport Operator Licence <input type="checkbox"/></p> <p><b>1C</b> Licence No. _____</p> <p><b>1D</b> National <input type="checkbox"/> International <input type="checkbox"/></p>	

Section 2	Details of Establishment
<p>I wish to make notification of a change of (<i>please tick</i>): <input type="checkbox"/> Business Address <input type="checkbox"/> Registered Office <input type="checkbox"/> Parking Address</p>	
<p><b>2A</b> New <b>Business Address</b> of Licence Holder (if applicable) _____ _____ <b>2B</b> Eircode _____</p>	
<p><b>2C</b> New <b>Registered Office</b> of Licence Holder (if applicable) _____ _____ <b>2D</b> Eircode _____</p>	
<p><b>2E</b> New <b>Parking Address</b> of Licence Holder (if applicable) _____ _____ <b>2F</b> Eircode _____</p>	
<p><b>2G</b> Office Phone No. _____ <b>2H</b> Mobile No. _____</p>	
<p><b>2I</b> Office E-mail _____</p>	
<p><b>2J</b> Every operator must have adequate parking space and operating premises in the State. <b>Please tick box to confirm that there is adequate operational base and parking for every vehicle on the licence:</b> <input type="checkbox"/></p>	

Section 3	Declaration and Signature
<p><b>3A</b> I hereby declare that all of the information in this application is true and accurate.</p>	
<p><b>3B</b> I confirm that all the relevant licence documents are enclosed in the case of a change of Business Address. (<i>See page 2</i>)</p>	
<p>Signed _____ Name in <b>BLOCK CAPITALS</b> _____</p>	
<p>Date _____ Status _____ (Sole Trader, Director, Secretary, Partner, Member of Management Committee)</p>	

## **Checklist of Documents that must accompany an Application for Change of Business Address**

The following licence documents must be submitted to the Road Transport Operator Licensing Unit for change of business address as this is the address that appears on licence documents:

For **National Licence** holders (Haulage and Passenger)

- The original Operator Licence
- All Certified Copies of the Operator Licence for the vehicles authorised on the licence

For **International Licence** holders (Haulage and Passenger)

- The original Operator Licence
- All Certified Copies of the Operator Licence for the vehicles authorised on the licence
- The original Community Licence
- All Certified True Copies of the Community Licence for the vehicles authorised on the licence

For further information contact the Road Transport Operator Licensing Unit at:

**Department of Transport, Tourism and Sport,  
Clonfert House, Bride Street, Loughrea, Co. Galway H62 ET93**  
Telephone: 091 872950 Lo-call: 0761 001 601 Fax: 091-872999 E-mail: [rtol@dttas.gov.ie](mailto:rtol@dttas.gov.ie)  
Website: [www.rtol.ie](http://www.rtol.ie)