

INHERITANCE

FORM OF APPLICATION TO BE COMPLETED WHEN BRINGING INHERITED
PERSONAL PROPERTY INTO THE STATE FROM NON-EC 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="width: 100%;"><tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr></table>				
5. I have become entitled to the property being imported: *(a) on inheritance, or *(b) as personal representative of the deceased					
6. I formally received possession/control of the property on: <table border="1" style="width: 100%;"><tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr></table>					
7. Date and place of importation: <table border="1" style="display: inline-table; width: 150px;"><tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr></table> <table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td></tr></table>					
I, _____ (<i>Block Capitals</i>) 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="display: inline-table; width: 150px;"><tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr></table>				

*Delete word/s inapplicable

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/LEFT Hand Drive:	Has Vehicle been previously registered? *Yes/No	
Latest Registration No.:	Country of latest Registration:	
Date of First Registration: / /		
Has the Vehicle been converted, adapted or improved since latest Registration? *Yes/No		
Details of Conversion, Adaptation or Improvement:		
FOR OFFICIAL USE ONLY		
VEHICLE REGISTRATION TAX (VRT) DETAILS		
Statistical code:	Extras – Distributor/Factory fitted:	
Total value of extras: €		
Month and Year of *First Registration/Manufacture:		
Mileage:	Condition:	OSMP: €
VRT Category:	VRT Rate:	Vehicle Registration Cert No.:
* Import Station/VRO:		
Officer:	Date:	

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

* Delete word/s inapplicable

PART III

DECLARATION AT IMPORT BY IMPORTER OR AUTHORISED AGENT

I, _____ as * *Importer/Agent of Importer* of the items described in the list attached hereto which are being imported into the State and which * *have arrived/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:

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 Signature *Importer/Agent _____

Address:

DECLARATION AT CARRIER

I hereby declare that

Vehicle *Regn. 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 _____

Ref. No. in TOR Register:

Office: _____

Comments:

Date:

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EXAMINATION AND CLEARANCE

*Delete word/s inapplicable