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Description automatically generated with low confidenceINSTRUCTIONS FOR COMPLETING the  
AMENDMENT OF AUTHORISATION – CVR   
TEST OPERATOR application form

## Who this application form is for

This form should be completed by an individual/sole trader or on behalf of a company or unincorporated association to apply for an amendment to their authorisation as a CVR test operator in accordance with Section 14 of the Road Safety Authority (Commercial Vehicle Roadworthiness) Act 2012.

## How to fill this form

Fill in the form on your computer by clicking your mouse in any field where you want to enter text and type your entry. (Do not use the Tab key in your entry.)

To tick a check box, use the spacebar or left-click the mouse in the box. Clear the box by pressing the spacebar again, or by left-clicking again.

Alternatively, print the form and fill it in manually in **black ink**, using CAPITAL LETTERS.

When you have filled in the form, print it out, **sign the declaration** at section 7, and submit it, along with the supporting documents, to the address shown below.

|  |  |
| --- | --- |
| **Submit this application form along with the required supporting documents to:** | CVR Authorisation Unit Road Safety Authority  Clonfert House Bride Street Loughrea, H62 ET93 Co. Galway |

If you require any further information concerning the completion of this form, you can:

* Visit the Road Safety Authority’s CVRT website ([www.cvrt.ie](http://www.cvrt.ie/))
* Contact us by email at [cvrauthorisations@rsa.ie](mailto:cvrauthorisations@rsa.ie)

## Checklist

Applications will be accepted only if they are fully completed with all necessary documentation enclosed. Incomplete application forms will be returned to the applicant.

Please tick boxes in the checklist below to confirm that all necessary documentation is enclosed.

|  |  |
| --- | --- |
| This application form with all relevant sections completed and the declaration form signed. Note that all 11 pages of the form must be returned. |  |
| An independent risk assessment report (applicable where application is for authorisation to carry out ADR testing) (see Section 4 of this form). |  |
| A letter from your insurance company (*not your broker)* detailing the insurance cover provided (see Section 5 of this form). |  |
| If applicable, a completed and signed Conviction Notification Form – available at [www.cvrt.ie](http://www.cvrt.ie/). |  |

The Road Safety Authority reserves the right to seek additional information from you regarding your application.

## Fees in relation to amending a CVR test operator authorisation

The Road Safety Authority will advise applicants of the fees payable in respect of the amendment of an authorisation at the time of making an offer in relation to the application. Any fees paid will not be refundable.

## Data protection

Please note that all of the information requested on this form is necessary for the purposes of processing your application for authorisation as a CVR test operator. If you fail to answer any of the questions set out in the application form, it will not be possible to process your application for authorisation.

The details set out in your application form will be processed by the RSA and/or its service providers solely for the purposes of processing your application and, where you are successful, managing your authorisation as a CVR test operator or as otherwise permitted by law including, but not limited to, any use or disclosure of data permitted under the Road Safety Authority (Commercial Vehicle Roadworthiness) Act 2012.

The RSA will process your details in accordance with its obligations under the Data Protection Law (Data Protection Regulation (GDPR) and the Data Protection Acts 1998 to 2018). This includes taking all reasonable steps, including appropriate technical and organisational security measures, to protect personal data.

The RSA may disclose personal data to its agents, contractors and service providers to the extent reasonably required for the purposes described above.

You have the following rights, in certain circumstances and subject to certain restrictions, in relation to your personal data:

* The right to access your personal data
* The right to request the rectification and/or erasure of your personal data
* The right to restrict the use of your personal data
* The right to object to the processing of your personal data
* The right to be forgotten in certain circumstances
* The right to receive your personal data, which you may have provided to us, in a structured, commonly used and machine-readable format or to require us to transmit that data to another controller.

If you wish to avail of any of these rights, please contact us at dataprotection@rsa.ie. Your request will be dealt with without undue delay and in any event within one month of receipt of the request.

Application for amendment of authorisation – CVR test operator

**This application is for the amendment of authorisation as a CVR test operator in accordance with Section 14 of the Road Safety Authority (Commercial Vehicle Roadworthiness) Act 2012**

# 1. THE CVR TEST OPERATOR

|  |  |
| --- | --- |
| Name of CVR test operator |  |
| Trading name (if different from above) |  |
| Testing centre address |  |
| Authorisation number |  |
| Contact person |  |
| Email address |  |
| Phone number |  |
| Mobile phone number |  |

# 2. AMENDMENT TO CVR TEST OPERATOR AUTHORISATION

Please complete the appropriate box(es) below regarding the amendment(s) required to your authorisation.

## 2.1 I wish to amend my authorisation by adding the following categories of CVR vehicles

|  |  |
| --- | --- |
| Please indicate the CVR vehicle category you wish to add to your Authorisation? | |
| HCV | LCV |
| Date of application: |  |

## 2.2 I wish to amend my authorisation by adding CVR testing lane(s)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Enter the number of testing lane(s) you wish to add to your CVR testing centre | | | | |
| For HCVs |  | For LCVs | |  |
| Note details on planning and building regulations for this application are collected in 3.4 below. | | | | |
| Date of application: | | |  | |

**Note:** There is a prescribed fee of €6,000 for each additional lane. The prescribed fee is payable upon acceptance of an offer of authorisation. The fee should be paid to the RSA via the CVR fees ‘top up’ account.

## 2.3 I wish to amend my authorisation by adding ADR and/or Tractor testing

|  |  |  |
| --- | --- | --- |
| Tick this box if you wish to add ADR testing to your Authorisation. | |  |
| Tick this box to indicate if you wish to add Tractor testing to your authorisation. | |  |
| Date of application: |  | |

**Note:** There is a prescribed fee of €500 to add ADR testing. The prescribed fee is payable upon acceptance of an offer of authorisation. The fee shall be paid to the RSA via the CVR fees ‘top up’ account.

## 2.4 I wish to amend my authorisation by relocating to a new CVR testing premises.

|  |  |  |
| --- | --- | --- |
| Tick box and provide the proposed location of new CVR testing premises below. | |  |
| **Note:** Details on planning and building regulations for this application are collected in 3.4 below. | | |
| Date of application: |  | |

**Note:** You shall reimburse to the Authority any costs incurred by the Authority in reconnecting the CVR testing centre to the CVR information system following the suspension of an authorisation.

## 2.5 Fees and costs for amendment of an authorisation

(a) The fees for the amendment of an authorisation as a CVR test operator will depend on the amendment(s) being sought as set out above.The prescribed fee is payable upon acceptance of an offer of authorisation. The fee shall be paid to the RSA via the CVR fees ‘top up’ account.

**Note:** Any fees paid will not be refundable.

(b) In relation to CVR testing centre inspections, there are no costs chargeable to applicants for the initial or first subsequent inspection. However, costs are chargeable for second subsequent or further inspections that the RSA may conduct to establish that a CVR testing centre has the premises, facilities, equipment and testers necessary to enable tests to be carried out. The costs for repeated inspections shall be €200 per half day and or part thereof or €350 for a full day (being more than a half day).

# 3. THE CVR TESTING CENTRE TO WHICH THIS APPLICATION APPLIES

## 3.1 Opening hours

Please indicate below the normal opening hours for the CVR testing centre.

|  |  |  |
| --- | --- | --- |
|  | **Opening Time** | **Closing Time** |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |

## 3.2 Number of anticipated tests

Please indicate the **number** of CVR tests that you anticipate will be conducted on an annual basis.

|  |  |
| --- | --- |
| Heavy Commercial Vehicle |  |
| Light Commercial Vehicle |  |
| ADR |  |
| Tractor |  |

## 3.3 Quality assurance and monitoring

|  |  |
| --- | --- |
| Tick this box to confirm that you have quality control measures in place to deliver consistent CVR testing and that these are available for inspection. |  |

### 3.3 (a) ISO 9001 Certification

You must be the holder of ISO 9001 incorporating the requirements of CITA Recommendation 9B.

|  |  |
| --- | --- |
| Tick this box to confirm that you hold ISO 9001/CITA 9B Certification. |  |

### 3.3 (b) Software and hardware protection measures

|  |  |
| --- | --- |
| Please tick this box to confirm that you will adhere to the required software and hardware protection measures. |  |

## 3.4 Planning and building regulations

|  |  |
| --- | --- |
| I have submitted a CVR testing centre plan including site plan |  |
| Date of approval by RSA |  |
| I have received relevant Planning Permission from Local Authority |  |
| Planning no. |  |
| Date copy submitted to RSA |  |

**3.4 (a) Planning and Development Acts**

|  |  |
| --- | --- |
| Tick this box to confirm that the testing centre complies with the requirements of the Planning and Development Acts and all applicable building regulations. |  |

## 3.5 Health and safety legislation

|  |  |
| --- | --- |
| Tick this box to confirm that your practices and procedures and premises conform with the requirements of the Safety, Health and Welfare at Work Act 2005 to 2014 and applicable regulations. |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever been convicted of an offence under the Safety, Health and Welfare at Work Act 2005 to 2014? | | **Yes** | **No** |
| If the answer is **Yes**, please state: | | | |
| Date of conviction |  | | |
| Nature of conviction |  | | |

## 3.6 RSA CVRT branding guidelines

RSA CVRT branding requirements are set out in the RSA’s *Commercial Vehicle Roadworthiness Testing Brand Manual.* This document is available on the RSA website at [www.cvrt.ie](http://www.cvrt.ie).

|  |  |
| --- | --- |
| Tick this box to confirm that your testing centre complies with or shall comply with the RSA CVRT Branding Guidelines. |  |

## 3.7 Recording of complaints

|  |  |
| --- | --- |
| Tick this box to confirm that you have a system in place to record any complaints received by you in connection with the carrying out of CVR tests at your CVR testing centre. |  |
| Please provide details of your system for handling complaints. | |

## 3.8 Conformance issues

Please explain here any issues that you may have regarding conformance with Sections **3.3** to **3.7**.

|  |
| --- |
|  |

## 3.9 CVR testers

Please provide details of the CVR testers employed or to be employed at the CVR testing centre, and tick the boxes to indicate the types of vehicle they are authorised to test.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of CVR tester** | **HCV** | **LCV** | **ADR** | **Tractor** |
|  |  |  |  |  |
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## 3.10 Conformance of the testing centre building

## Conformance of the testing centre buildingwith the Authorisation of Commercial Vehicle Roadworthiness Test Operators and Testers Regulations 2013 (as amended, the “Regulations”) and the RSA’s Premises and Equipment Guidelines for CVR test operators

Tick the boxes below to confirm that your testing centre building meets the requirements set out in Part 1 of Schedule 3 of the Regulations and the RSA’s *Premises and Equipment* *Guidelines for CVR Test Operators.* These documents are available on the RSA website at [www.cvrt.ie](http://www.cvrt.ie).

A CVR testing centre shall be a premises that:

|  |  |  |
| --- | --- | --- |
| **(a)** | is a permanent, immovable, enclosed and weatherproof facility with space to carry out CVR tests for the categories of CVR vehicles to be tested and which meets the applicable requirements. |  |
| **(b)** | has a hard concrete floor surface or equivalent flooring; |  |
| **(c)** | has suitable access and egress measures and parking facilities to accommodate vehicle movements to, from and within the CVR testing centre; |  |
| **(d)** | has reception and customer waiting areas conveniently located in the premises; |  |
| **(e)** | has toilet facilities within the premises for customers attending the premises for tests and accessible from the waiting area; |  |
| **(f)** | has suitable signage for the carrying out of CVR tests; |  |
| **(g)** | has test lanes for each of the categories of vehicles to be tested at the premises as authorised by the Authority; |  |
| **(h)** | has facilities for the storage of records, books and other documentation and computer equipment; and |  |
| **(i)** | a ventilation and fume extraction system in the test area of the premises. |  |

## 3.11 Premises and facilities

|  |  |  |
| --- | --- | --- |
| Tick the boxes to confirm that the premises and facilities intended for testing shall meet the standards required by regulations and guidelines issued by the Authority. | **Yes** | **No** |

## 3.12 Required CVR testing equipment

|  |  |  |
| --- | --- | --- |
| Tick the boxes to confirm that the test lanes intended for testing shall have the testing equipment required by regulations and guidelines issued by the Authority. | **Yes** | **No** |

# 4. ADDING ADR and/or TRACTOR AUTHORISATIONS

This section must be completed by applicants seeking to add ADR and/or Tractor testing to their authorisation. If you are not seeking to add ADR/Tractor testing to your authorisation, you do not need to complete this section.

## 4.1 ADR Testers

|  |  |
| --- | --- |
| Tick this box to confirm that you have tester(s) who are authorised to carry out ADR tests.  If you do not currently have authorised ADR testers, the persons you propose to engage as ADR testers must apply for authorisation. (Contact the RSA for the required form). |  |

### ADR Risk assessment

|  |  |
| --- | --- |
| Tick this box to confirm that a risk assessment of the suitability of the premises for carrying out inspections of ADR vehicles has been carried out by an independent and competent risk assessor.  The risk assessment report **must be submitted** with your application. |  |
| Tick this box to confirm that all recommendations resulting from the risk assessment have been implemented. |  |

## 4.2 Tractor Testers

|  |  |
| --- | --- |
| Tick this box to confirm that you have tester(s) who are authorised to carry out Tractor tests.  If you do not currently have authorised Tractor testers, the persons you propose to engage as Tractor testers must apply for authorisation. (Contact the RSA for the required form). |  |

# 5. FINANCIAL RESOURCES, TAX CLEARANCE AND INSURANCE REQUIREMENTS

## 5.1 Financial resources

Applicants are required to provide an accountant’s letter stating that, to the best of their knowledge and based on the information provided to them, that applicants have the necessary financial resources to provide CVR testing in respect of the authorisation being sought.

|  |  |
| --- | --- |
| Tick this box to confirm that you have submitted the accountant’s letter requested above. |  |

## 5.2 Tax clearance

Applicants are required to demonstrate that they are tax compliant at the time of making this application. This requirement can be fulfilled by providing your PPSN/Tax Reference Number and your Tax Clearance Access Number which can be printed from the Revenue Online Service (ROS) (Tax Clearance Application Result section).

|  |  |
| --- | --- |
| Tick this box to confirm that you have submitted the details necessary to demonstrate tax compliance. |  |

## 5.3 Insurance

Applicants are required to submit a letter from their insurance company (not their broker) specifying the level of insurance cover held for public liability and professional liability. This cover should meet the requirements set out in the RSA’s *Premises and Equipment Guidelines for CVR Test Operators,* which is available on the RSA website at [www.cvrt.ie](http://www.cvrt.ie). The RSA will seek confirmation that you satisfy the minimum requirements for insurance cover.

|  |  |
| --- | --- |
| Tick this box to confirm that you have submitted the insurance letter requested above. |  |

**Note:** The Road Safety Authority reserves the right to seek additional information from you regarding your financial resources and insurance cover.

# 6. FIT AND PROPER PERSON REQUIREMENT

The Road Safety Authority **must** be satisfied that applicants are ‘fit and proper persons’ to be CVR test operators.

## 6.1 Notification of specified offences

In applying for an amendment to your authorisation as a CVR test operator, the applicant(s) or, in the case of a company, **each director and the company secretary**, or, in the case of an unincorporated association, **each partner or member of the committee of management** must notify the Road Safety Authority if he or she has been convicted in the State or in any other jurisdiction of any of the offences specified in Section 12(1) of the Road Safety Authority (Commercial Vehicle Roadworthiness) Act 2012.

|  |  |  |
| --- | --- | --- |
| Have you (as a sole trader) *or* any director or the company secretary of your company *or* any partner or member of the committee of management of your unincorporated association ever been convicted of an offence specified in Section 12(1) of the 2012 Act? | **Yes** | **No** |
| **If yes,** enclose with your application a **Conviction Notification Form** completed by each person convicted, in respect of each specified offence of which they were convicted (see CVR test operator Conviction Notification Form available on [www.cvrt.ie](http://www.cvrt.ie)) | | |

**WARNING:** Failure to notify the Road Safety Authority of such a conviction or providing information to the Authority knowing it to be false or misleading is a criminal offence and may result in the Road Safety Authority determining that **you are not a fit and proper person** to hold an authorisation and the refusal of the application.

# 7. DECLARATION

I/We wish to apply for an amendment to my/our authorisation as a CVR test operator.

I/We hereby declare that the information furnished in this application is complete, true and accurate.

I/We consent to the Authority verifying the accuracy of any information furnished in this application.

I/We confirm that that I/we have or have the capacity to obtain the necessary financial resources to provide CVR testing under the authorisation applied for.

I/We hereby confirm that I/we will notify any changes to any details in this application to the Authority during the application process (for example, change of address, change in financial status, changes to directors or the secretary of the company, or changes to partners or members of the committee of management in the case of an unincorporated association or any other changes that might affect the authorisation). I/we confirm that notification shall be made within five days.

I/We confirm that I/we will (during the period of authorisation) notify the Road Safety Authority if I am/we are convicted of any of the offences specified in Section 12(1) of the Road Safety Authority (Commercial Vehicle Roadworthiness) Act 2012 within 28 days of the expiry of the time allowed for appealing such conviction or the determination or withdrawal of the appeal of such conviction.

## Who must sign

* For an application from an individual / sole trader: the individual must sign.
* For an application from a company: each director and the company secretary must sign.
* For an application from an unincorporated association: each partner or member of the committee of management must sign.

|  |  |  |  |
| --- | --- | --- | --- |
| First name | Surname | **Position** | Signature |
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