

COMHAIRLE CONTAE MHAIGH EO



Oifig Mótarchánach
An Meal
Caisleán an Bharraigh
Co. Mhaigh Eo
(094) 904 76 00
motortax@mayococo.ie

Motor Tax Office
The Mall
Castlebar
Co. Mayo
(094) 904 76 00
motortax@mayococo.ie

Dearbhú Mótarcharbháin

Ní mór duit an dearbhú seo a chomhlánú má tá tú ag cur feithicle faoi cháin ar ráta mótarcharbháin.

(i) Dearbhaím leis seo go gcloíann feithicil na cláruimhreach

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leis an tuairisc seo a leanas ó Acht Rialtais Áitiúil, 1998, is é sin:-

“mótarcharbháin, ar feithiclí iad a shuítear chun sástacht na gCoimisinéirí Ioncaim a bheith deartha, déanta nó oiriúnaithe chun cóiríocht shealadach chónaithe a chur ar fáil a bhfuil airde inmheánach nach lú ná 1.8 méadar inti nuair a dhéantar í a thomhas ar cibé modh a bheidh ceadaithe ag na Coimisinéirí Ioncaim agus a bhfuil, i leith na bhfeithiclí sin, mar chuid den dearadh, den déanamh nó den oiriúnú sin, an trealamh buan fheistithe seo a leanas iontu –

- (a) aonad doirtil
- (b) trealamh cócaireachta a bhfuil ar a laghad iarta ann le 2 fháinne nó cibé trealamh eile cócaireachta de réir mar a bheidh forordaithe, agus
- (c) aon trealamh nó feisteáin eile de réir mar a bheidh forordaithe.”

Síniú: _____

Dáta: _____

Motorcaravan Declaration

You must complete this Declaration if you are taxing the vehicle at the motor caravan rate.

(i) I declare that vehicle registration number

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Complies with the following description under the Local Government Act, 1998, viz:-

“motor caravans, being vehicles which are shown to the satisfaction of the Revenue Commissioners to be designed, constructed or adapted to provide temporary living accommodation which has an interior height of not less than 1.8 metres when measured in such a manner as may be approved by the Revenue Commissioners and, in respect of which vehicles, such design, construction or adaptation incorporates the following permanently fitted equipment -

- (a) a sink unit
- (b) cooking equipment of not less than a hob with 2 rings or such other cooking equipment as may be prescribed, and
- (c) any other equipment or fittings as may be prescribed.”

Signature: _____

Date: _____