

Brian Caffrey International Ltd.

Driver Application Form - Part I

Surname:	_____	Christian Name:	_____
Address 1:	_____	Address 2:	_____
	_____		_____
Date of Birth:	_____	PPS Number:	_____
Telephone:	_____	Mobile Number:	_____
eMail:	_____	Full Medical Card:	YES NO
Marital Status:	_____	Nationality:	_____

P45:	YES NO	HAZ CHEM:(ADR):	YES NO
Licence No:	_____	Passport No:	_____

PAPERWORK NEEDED

- P45 (If individual was previously employed in Ireland)
- Reg 1 and consent form to be signed where PPS number is required
- Form 12A to be completed if employee is living in Ireland but is working for the first time
- Clear copy of Passport and Driving Licence required in all cases.

LICENCE DETAILS

What type of Heavy Goods Licence do you hold: _____

On what date did you obtain it: _____

Who is the issuing authority: _____

What authority holds your Test Certificate: _____

Please state the type of HGV's you have driven and for what time periods:

Weight:	Period:	Employer:	Telephone Number:
	From: To:		
	From: To:		
	From: To:		
	From: To:		

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Driver Application Form - Part II

Do you have any endorsements / points on your licence? **YES / NO** If YES, please give details:

Have you EVER been charged with any motor offences? **YES / NO** If YES, please give details.

ie. Nature and results of prosecutions: _____

Have you any prosecution pending? **YES / NO** If YES please give details: _____

Have you had any accidents, claims or losses in the past FIVE years in any vehicle driven by you?

YES / NO If YES please give details:

DATE:	DETAILS OF ACCIDENT	COST OF DAMAGES:

BANK DETAILS:

IRISH BANK

Bank Name: _____

Sort Code: _____

Account Number: _____

DECLARATION

I hereby declare that, to the best of my knowledge, the above information is correct and that I have not misrepresented or mis-stated any material fact.

DATE: _____

SIGNATURE: _____

FOR OFFICE USE ONLY

Start Date: _____

Type of Employment: _____

Daily Rate: _____

Subsistence: _____