

ADI Renewal declaration form

Enclosed, please find my renewal registration fee of **€250** made payable to: The Road Safety Authority, ADI Unit.
Please tick all of the following declarations and sign at the end.

Payment type (tick as applicable)

☐ Online banking EFT. Please also include the date the lodgement was made to the RSA bank account.

Lodgement Date:

☐ Cheque ☐ Postal Order ☐ Bank Draft

Please tick all of the following declarations and sign at the end.

I declare that:

☐ My driving licence is valid and includes the [category](#) for which instruction is to be delivered, as follows.

	A1	A2	A	B	BE	C1	C	C1E	CE	D1	D	D1E	DE	W
Please tick	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

☐ I am properly insured to deliver driving instruction.

☐ The vehicles I provide for driving instruction are roadworthy, properly maintained and in full compliance with the [Road Traffic Act](#).

☐ I am a person of good repute and I do not have any convictions or charges for any of the following serious offences (tick all as applicable):

	Yes	No
Murder	☐	☐
Manslaughter	☐	☐
Serious assault	☐	☐
Sexual offences	☐	☐
Drug trafficking	☐	☐
Any other offences	☐	☐

☐ I am tax compliant, and I hold a current tax clearance certificate.

☐ I have not been disqualified from holding a driving licence, in the State, or by a Member State of the European Communities or the European Economic Area.

☐ I have not been disbarred from giving driving instruction by the competent authorities in a Member State of the European Communities or the European Economic Area.

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Any changes must be notified immediately to the RSA Driver Education Section.

Signed:

Date:

ADI Number:

(these personal details must be added)

ADI renewal check test

One of the conditions of registration is that an ADI must pass a check test when required. In order to facilitate you in meeting this requirement please state below, the [Driving Test Centre](#) where you would like to complete your Check Test/s.

Please state preferred

Check Test Centre location:

We will email you the appointment details, so make sure to check your junk/spam folder.

Updating your personal details

Do you need us to update your [ADI Online Register](#) details?

☐ Yes

☐ No

If yes, please complete all of the fields below. It may take up to 10 days for any changes to be captured in the system.

Company or
organisation name:

Your name:

ADI number:

Telephone 1:

Telephone 2:

Address:

Email Address:

Website address:

Counties to cover
(max. 3):

Categories* you're qualified to give instruction in:

List your training fleet by category (e.g., A, A1, B, BE C, C1 etc.)

** Please include any sub-categories, e.g., C1, D1E, etc.*