



An tÚdarás Slándála Príobháidí
The Private Security Authority

**APPLICATION PACK
FOR
LICENSED CONTRACTOR
ADDING SECTOR(S)
TO THEIR LICENCE**

**(Contains Guidelines for Contractors who wish to
add a Sector to their existing PSA Licence and
Application Form)**

November 2016

Please read the following notes before completing your Application Form to Add A Sector(s) to your Licence

These guidelines are for contractors wishing to add a sector(s) to an existing licence. Contractors renewing a licence or applying for a first licence should refer to the relevant Application Packs which are available on our website www.psa.gov.ie.

These guidelines have been developed to assist you with completing the application form to add a sector to your Private Security Services Licence. You should read the guidelines carefully before completing the application form. The relevant application form is available at the end of these guidelines.

FAILURE TO FOLLOW THE GUIDELINES WILL RESULT IN YOUR APPLICATION BEING REJECTED AND RETURNED TO YOU.

Before You Start

You should ensure you are using the correct version of the application form. The correct form is included with these guidelines.

- For detailed information on licensing of the various sector(s) reference should be made to the Private Security Authority (PSA) website, www.psa.gov.ie
- Application forms should be fully completed in **BLACK INK** and in **CAPITAL LETTERS**
- If you are having difficulty with any question and require further guidance or assistance please contact the PSA by email, contractors@psa.gov.ie
- Please check that you have forwarded all relevant documentation in support of your application.
- Incomplete applications will be rejected and returned to applicant.

VETTING

The PSA have introduced new vetting procedures for licensed contractors. Persons who have been previously vetted by the PSA as part of the contractor licensing process are not required to undergo the National Vetting Bureau (NVB) vetting process unless any of the following apply:

- They have been convicted of any offence in Ireland or any other jurisdiction since last vetted
- They have appeared before the courts for any reason (including motoring offences) since they were last vetted.
- They left the country for a period exceeding 6 months since they were last vetted.

Under the new procedures persons will only be required to undergo the NVB e-vetting process once every 5 years or where otherwise requested by the PSA.

Where a new director, company secretary, partner or shareholder joins the business the NVB e-vetting process must be completed.

Where vetting is required the PSA will issue an invitation to complete an e-vetting application to the e-mail address provided. This should be your personal e-mail address.

Section A: GENERAL DETAILS

1. Name of Applicant

This is the name which will appear on the licence. It must be the name of the contractor. A trading name is not acceptable. (See 3 below)

- A Sole Trader should give their full name
- A Partnership name should include the name of each partner, as per the partnership agreement
- For a Company, company name only to appear.

Certificates of Incorporation are not required provided there has been no change in the company registration details since the original application was lodged with the PSA.

2 Address

Please enter the address of the premises from which you trade. Your licence and all correspondence will be sent to this address.

3. Business Name

A business/trading name will appear below the applicants name on the licence.

Certificates of Business Name are not required provided there has been no change in the details since the original application was lodged with the PSA.

4. Contact Name

Name of person dealing with application and whom the PSA will contact regarding the application and licence.

5/6. Telephone & Mobile Number

Please enter contact numbers as requested.

7. E-mail Address

Please enter contact email address as requested. The PSA will distribute our ezine and other licensing information to this address. Any changes to this e-mail address must be notified to the PSA immediately.

8. PPS Number / Revenue Registration Number

If the applicant is a Sole Trader, please enter your PPS Number.

If the applicant is a Partnership or a Company, please enter your Revenue Registration Number.

9. Number of Employees

The number of persons employed by your business in Ireland.

Section B: LICENCES REQUIRED

Table 1 (Calculating Turnover)

1. Tick the box for each sector to be included on your licence (current sector(s) plus new sector(s)).
2. Insert the annual turnover* for each sector for which you have ticked a box.
3. Add the sum of all the turnover figures and inset the total figure in the box for Combined Turnover.

Note. * 'Turnover' means the gross revenue (excluding Value Added Tax) of an applicant arising in the financial period in respect of the provision by the applicant of the security service or security services to which the licence or licences applied for relates or relate. For licensing purposes we require that you state your annual turnover for the last 12 months for which you are legally obliged to submit accounts and, for Companies, an Auditor's Turnover Certificate.

Projected Turnover should not be included as turnover

Table 2 (Calculating Fee)

The licence fee consists of two components - an administration fee and a turnover fee which is based on the combined turnover of the contractor in each licensable security sector.

The licence fee for the additional sector(s) will be based on the unused period of the existing licence and will be calculated on the basis of combined turnover for all sectors including turnover (if any) in the add-on sector.

To calculate the unused period of a licence count the number of months that have passed since the licence issued. Part of a month should be counted as a full month. Subtract this number from 24 (licences are issued for two years) to find the number of unused months.

The table below sets out the turnover fees and administration fees to be paid based on the unused period of a licence and the combined turnover.

Fee Calculation Table

			Turnover Bands						
1	2	3	4	5	6	7	8	9	10
Unused Period (Months)	Admin fee €	% Fee payable	< €300k	<€625k	<€1.25m	<€3.75m	<€10m	<€20m	>€20m
0-3	€1,000	100%	€250.00	€1,250.00	€2,500.00	€5,000	€9,000	€19,000	€25,000
4-6	€875	87.50%	€218.75	€1,093.75	€2,187.50	€4,375	€7,875	€16,625	€21,875
7-9	€750	75%	€187.50	€937.50	€1,875.00	€3,750	€6,750	€14,250	€18,750
10-12	€625	62.50%	€156.25	€781.25	€1,562.50	€3,125	€5,625	€11,875	€15,625
13-15	€500	50%	€125.00	€625.00	€1,250.00	€2,500	€4,500	€9,500	€12,500
16-18	€375	37.50%	€93.75	€468.75	€937.50	€1,875	€3,375	€7,125	€9,375
19-21	€250	25%	€62.50	€312.50	€625.00	€1,250	€2,250	€4,750	€6,250
22-24	€125	12.50%	€31.25	€156.25	€312.50	€625	€1,125	€2,375	€3,125

To calculate the fee

- 1 Insert the Combined Turnover from Table 1 into the first row of Table 2.
- 2 Insert the number of months unused on the licence.
 - Count the number of months which have passed since the licence issued.
 - Part of a month should be counted as a full month.
 - Subtract this number from 24 (licences are issued for two years) to find the number of unused months.
3. Calculate the Turnover Fee.
 - Find the column which relates to your Combined Turnover (Columns 4–10).
 - Find the number of unused months on your licence in column 1.
 - Go to the corresponding row in the Combined Turnover Column you selected.
 - Insert this amount for the Turnover Fee in Table 2.
- 4 Calculate the Administration Fee.
 - Find the number of unused months on your licence in column 1.
 - Go to the corresponding row in column 2.
 - Insert this amount for the Administration Fee in Table 2
- 5 Insert the Total Fee Due by adding the Turnover Fee and Administration Fee together.

Example of Fee payable:

- Contractor licence issued 1 April 2014
- 1 November 2014 contractor applies to add a new sector – the unused period on the existing licence is 17 months
- Cost of a new 2 year licence to include the original sector(s) and the addition of the new sector(s) is:

Administration fee	€375.00
<u>Turnover fee (based on combined turnover of all sectors)</u>	<u>€93.75</u>
Total cost of new 2 year licence	€468.75

The table on Page 4 should be referenced when calculating the fees payable for the addition of Sector(s) to existing licenses.

The fee payable is the administration fee plus the turnover fee.

Section C: DETAILS OF SOLE TRADER, PARTNERS, COMPANY SECRETARY, DIRECTORS & SHAREHOLDERS

This section must be completed if the applicant is a sole trader, partnership or company.

- Enter the name, address and contact details of the sole trader, partners, all directors, company secretary and shareholders with a shareholding of 5% or greater.
- Please note that an e-vetting application will be sent to and must be fully completed by all partners, directors, company secretary and shareholders listed. You must ensure you provide your personal e-mail address in this section.
- Information on additional partners, directors and shareholders can be provided on an additional sheet.

Section D: PRIVATE INVESTIGATOR OPERATOR DETAILS

To be completed by those applying for a Private Investigator Licence

This section must be completed if the applicant is applying for a Private Investigator Licence.

- Enter the name, address and PPSN of all employees (as defined in PSA Licensing Requirement - Private Investigators (PSA 42:2015)) engaged by you in the course of providing a Private Investigator service.
- Information on additional employees can be provided on an additional sheet.

If there has been no change in employees since your last application you can write 'Same' in this section

Section E: BANK DETAILS (Payment by EFT)

(Please note that in line with Government policy the PSA no longer accepts cheque payments)

This section records the details of the Electronic Fund Transfer (EFT) of the prescribed licence fee by the applicant to the Private Security Authority's Bank account.

- Please enter the name of the applicant as it appears in Section A of the application form.
- Please enter the transaction date of the payment
- Please sign the declaration that the licence fee has been paid by Electronic Fund Transfer

Section F: DECLARATION

The application should be read, signed and dated by

- the applicant in the case of a Sole Trader
- all of the Partners in the case of a Partnership
- the Company Secretary or Managing Director in the case of a Company

NOTE: Please remember to sign the application form.

All application forms must be signed and dated within 4 weeks of the application being lodged with the PSA.

DOCUMENTS TO ACCOMPANY APPLICATION FORM

In addition to a completed application form your application should include the following items.

1 Confirmation that payment has been transferred by Electronic Fund Transfer (EFT)

2 Evidence of a Current Valid Tax Clearance Certificate

The applicant must provide evidence of a current valid Tax Clearance Certificate (including Revenue Tax Clearance Access Number)".

3 Auditors Turnover Certificate

Companies are required to provide an Auditors Turnover Certificate/ Letter from Accountant for the last 12 months for which they are legally obliged to submit accounts. This turnover should be broken down by Sector.

Sole Traders and Partnerships must record their turnover in Section B, Table 1.

If the current licence issued over 15 months ago, new turnover figures must be provided for all sectors.

4 Foreign Criminal Record Certificate

All Sole Traders, Partners, Directors, Company Secretary or Shareholders with a holding of 5% or more who have spent 6 months or more in another jurisdiction within the last 25 years are required to provide a Criminal Record Certificate (CRC) from that jurisdiction.

A person who has spent a period outside the State before their 15th birthday will not be required to supply a foreign CRC for this period abroad.

If you have included a Foreign CRC with your application previously and you have not resided in another jurisdiction since that application you are not required to provide another Foreign CRC.

If you are permanently resident in another jurisdiction and were resident in that jurisdiction when your application was previously lodged you are not required to provide a Foreign CRC if you provided one previously.

The PSA may request an updated Criminal Record Certificate at any time.

5 Evidence of Attainment of the Required Standard(s)

Applicants for Private Security Services Contractor Licences must produce evidence of having attained the relevant operational standard(s) for the licence(s) required **or** a letter of registration for the required standard(s) with an approved certification body. Details of the Standards required are set out below.

CATEGORY OF LICENCE	STANDARD(S) REQUIRED
Door Supervisor (Licensed Premises)	PSA 28:2013
Door Supervisor (Event Security)	PSA 39:2014
Security Guarding (Static)	PSA 28:2013
Security Guarding (Event Security)	PSA 39:2014
Security Guarding (Alarm Monitoring)	PSA 33:2014
Security Guarding (CCTV Monitoring)	PSA 33:2014
Installer of Security Equipment (Installation & Maintenance of Intruder Alarm)	EN 50131-1 together with EN 50131-7 and SR 40
Installer of Security Equipment (Access Control)	SR 40
Installer of Security Equipment (CCTV)	PSA 2006_12 together with SR 40
Cash-In-Transit	PSA CIT2:2014 together with IS 998:2006
Private Investigator	PSA 42:2015
Locksmith	PSA 55:2016

6 Original Licence

The original PSA licence must be returned to allow for the addition of the new sector(s).

COMPLETED APPLICATION

Completed application form, payment and supporting documentation should be sent to:

**Contractor Licensing
The Private Security Authority
Davis Street
Tipperary Town
Co. Tipperary
E34 PY91**

Contact Details For Contractor Licensing

Regions:	Telephone
Cork, Kerry and Foreign Companies (excluding Northern Ireland)	062 32631
Cavan, Donegal, Kildare, Mayo, Monaghan, Roscommon, Sligo, Westmeath & Dublin Districts 2, 4, 6 & 6W and Northern Ireland	062 32624
Galway, Kilkenny, Meath & Dublin Districts 8, 10, 12 & 14	062 32635
Laois, Leitrim, Louth & Dublin Districts 1, 3, 5, 7, 9, 11, 13, 15 & 17	062 32614
Clare, Limerick, Longford, Wicklow, Dublin District 24 & South County Dublin	062 32606
Carlow, Offaly, Tipperary, Waterford, Wexford, North County Dublin & Dublin Districts 16, 18, 20 & 22	062 32627

E-Mail contractors@psa.gov.ie



Application Form For Adding New Sector To Current Licence

Please comply with the instructions for completing this form as failure to do so may result in your application being rejected. The instructions are contained in the Guidelines which accompanied the application form. This form should be completed in **BLACK INK** and in **BLOCK CAPITALS**

Is Application for A Sole Trader Partnership Company

Section A: GENERAL DETAILS

Current PSA License No.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Expires	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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1. Name of Applicant
(Name to Appear on License)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2. Address

(Address to which license and correspondence to be sent)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Eircode

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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3. Business Name

(Business Name, if different from Name of Applicant. This name will also appear on License.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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4. Contact Name

Name of person to whom all correspondent regarding this application and licensing matters will be sent

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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5. Telephone Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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6. Mobile Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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7. E-Mail Address

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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8. PPS Number or Revenue Registration Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Number of
9. Employees

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Section B: LICENCES REQUIRED

Table 1 - Calculating Turnover

Sector (tick all that apply)	√	Sector Turnover
Door Supervisor (Licensed Premises)		€
Door Supervisor (Event Security)		€
Security Guard (Static Guard)		€
Security Guard (Event Security)		€
Security Guard (Alarm Monitoring)		€
Security Guard (CCTV Monitoring)		€
Installer (Intruder Alarm)		€
Installer (Access Control)		€
Installer (CCTV)		€
Cash In Transit (Coin)		€
Cash In Transit (ATM)		€
Cash In Transit (Point to Point)		€
Cash In Transit (Other)		€
Private Investigator		€
Locksmith		€
Combined Turnover		€ (A)

Table 2 - Calculating Fee

Please refer to the fee table in application guidelines to calculate the Turnover Fee at (B) and the Administration Fee at (C) below.

Unused Months on Licence		
Turnover Fee	€	(B)
Administration Fee	€	(C)
Total Fee Due	€	(B) + (C)

For further information on turnover requirements refer to the application guidelines.

Section C: DETAILS OF SOLE TRADER, PARTNERS, COMPANY SECRETARY, DIRECTORS & SHAREHOLDERS

The Name, Address & Contact Details for the Sole Trader, each Partner, the Company Secretary, each Director and Shareholder must be provided below. Information on additional Partners, Directors and / or Shareholders should be provided on a separate sheet.

Name

Address

Phone No. -

Personal E-mail Address

Date of Birth / / PPS No.

Role **Partnership Partner** **Company Company Secretary** **Director**
Sole Trader **Shareholder** Enter % Shares Held

Since the issue of your current licence have convictions been recorded against you in the Republic or Ireland or any other jurisdiction. Yes No

If Yes, the PSA will issue an e-vetting application to your personal e-mail address.

Name

Address

Phone No. -

Personal E-mail Address

Date of Birth / / PPS No.

Role **Partnership Partner** **Company Company Secretary** **Director**
Sole Trader **Shareholder** Enter % Shares Held

Since the issue of your current licence have convictions been recorded against you in the Republic or Ireland or any other jurisdiction. Yes No

If Yes, the PSA will issue an e-vetting application to your personal e-mail address.

Section C: DETAILS OF SOLE TRADER, PARTNERS, COMPANY SECRETARY, DIRECTORS & SHAREHOLDERS

The Name, Address & Contact Details for the Sole Trader, each Partner, the Company Secretary, each Director and Shareholder must be provided below. Information on additional Partners, Directors and / or Shareholders should be provided on a separate sheet.

Name

Address

Phone No. -

Personal E-mail Address

Date of Birth / / PPS No.

Role Partnership Partner Company Company Secretary Director
 Sole Trader Shareholder Enter % Shares Held

Since the issue of your current licence have convictions been recorded against you in the Republic or Ireland or any other jurisdiction. Yes No

If Yes, the PSA will issue an e-vetting application to your personal e-mail address.

Name

Address

Phone No. -

Personal E-mail Address

Date of Birth / / PPS No.

Role Partnership Partner Company Company Secretary Director
 Sole Trader Shareholder Enter % Shares Held

Since the issue of your current licence have convictions been recorded against you in the Republic or Ireland or any other jurisdiction. Yes No

If Yes, the PSA will issue an e-vetting application to your personal e-mail address.

SECTION D: OPERATOR DETAILS

To be completed by PRIVATE INVESTIGATOR applicants ONLY

The Name, Address & PPS Number For Each Operator Must Be Provided Below. Information On Additional Employee Should Be Provided On A Separate Sheet.

Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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PPS No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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SECTION D: OPERATOR DETAILS

To be completed by PRIVATE INVESTIGATOR applicants ONLY

The Name, Address & PPS Number For Each Operator Must Be Provided Below. Information On Additional Employee Should Be Provided On A Separate Sheet.

Name

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Address

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PPS No.

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Name

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Address

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PPS No.

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Name

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Address

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PPS No.

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SECTION E: BANK DETAILS - PAYMENT PROCESSING

The prescribed licence fee must be paid through your bank by Electronic Fund Transfer (EFT) in accordance with the following conditions:

- Payments must be in Euros.
- The EFT details must contain the name of the applicant as provided in Section A of the application form.
- Details of the payment must be completed below.
- Payments must be made without charge to the payee.

Note: The PSA cannot be responsible for payments made into this account which cannot be identified.

PSA EFT Bank Details

Account Name: PRIVATE SECURITY AUTHORITY

Bank: Bank of Ireland, Main Street, Tipperary Town

IBAN

I	E	6	7	B	O	F	I	9	0	6	1	0	1	1	3	1	7	0	7	7	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

BIC

B	O	F	I	I	E	2	D
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Payment Details

Name of Business making the payment

Date Payment Transferred

D	D	/	M	M	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Payment €

		,			
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I declare that payment for the licence fee has been transferred to the Private Security Authority's bank account as outlined above.

Signed _____

Date _____

Section F: APPLICATION DECLARATION & CONSENT

DECLARATION AND CONSENT

- I confirm that I have read and understand the contents of the application form. I declare that the information provided in this application is true and complete in every respect and that the applicant is fully compliant with all statutory obligations of the Private Security Services Acts and Regulations thereunder.
- I understand that under the Private Security Services Acts 2004 and 2011 it is an offence to supply misleading information in order to obtain a Private Security Authority Licence and that doing so may lead to the application being refused or the licence being suspended or revoked and to a prosecution.
- I understand that the Private Security Authority may require information in connection with this application or in connection with any licence issued thereunder and give my consent to the Private Security Authority asking a third party for such information.
- I understand that information about the licence will be placed on a public register in accordance with section 33 of the Private Security Services Acts 2004 and 2011.
- I understand that it is my responsibility to advise the Private Security Authority of any changes to the details contained in this application including any changes which occur during the life time of any licence subsequently issued by the Authority. I am aware that failure to do so may result in the application being rejected or the licence being suspended or revoked.
- I hereby authorise the Private Security Authority to request that the National Vetting Bureau issue an e-vetting application to the personal e-mail address(es) provided.

Signature

Date

Print Name

Position in
Business

(In the case of a partnership, all partners are required to sign. One partner should sign above and the other partners below)

Signature

Date

Print Name

Signature

Date

Print Name

All application forms must be signed and dated within 4 weeks of the application being lodged with the PSA.