

**TYPE XXII  
REGULATION 50C(1)**

**APPLICATION FOR AUTHORIZATION OF WORKSHOP FOR INSTALLATION,  
CALIBRATION, MAINTENANCE AND REPAIR  
OF SPEED LIMITATION DEVICES**

**(Regulation 50C(2)(a) of Motor Vehicles and Road Traffic Regulations 1984 to 2001)**

**A. If the applicant is an individual, provide the following information:**

Name: .....

Home address: .....

Date and place of birth: .....

Identity Card number: ..... Nationality: .....

Workshop address:  
.....  
.....  
.....

Tel.: ..... Mob.: ..... Fax: .....

E-mail: .....

**B. If the applicant is a company (legal entity), provide the following information:**

Company name: .....

Registration number: .....

Workshop address:  
.....  
.....  
.....

Tel.: ..... Mob.: ..... Fax: .....

E-mail: .....

**C.**

Director(s) Name(s)/Surname(s)	Date and place of birth	Identity Card number
.....	.....	.....
.....	.....	.....
.....	.....	.....

Shareholder(s) Name(s)/Surname(s)	Date and place of birth	Identity Card number
.....	.....	.....
.....	.....	.....
.....	.....	.....

Attach a copy of the Certificate of Incorporation issued by the Department of Registrar and Official Receiver together with copies of Certificates for the company Shareholders and Director.

**D. Premises description:**

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.....  
.....  
.....

Floor dimensions (useful area): .....

Non-covered area: .....

Attach a copy of the site plan/dimensioned drawing, in scale 1:100.

**E. Details for the minimum criteria devices/instrumentation/tools:**

1. ....
2. ....
3. ....
4. ....
5. ....

Attach a declaration from the manufacturer of the device/instrument to be used for calibrations declaring the device/instrument capability to calibrate speed limitation devices installed on vehicles of the M3 and N3 categories.

**F. Details for the minimum criteria personnel:**

Name and surname: .....

Social Insurance Number: .....

Specialty: .....

Please attach the following:

- 1). Copy of a certificate for specialized training on speed limitation devices or a declaration from the training provider.
- 2). Copy/ies of degree, diploma etc as evidence of the technician qualifications and proof of relevant experience.

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**For official use**

Approved on the following conditions / Rejected

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Remarks: .....

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Signature: .....

Date: .....