

Tax saver Application form Annual Tickets (SAMPLE)

Company Name x provides you with the option of purchasing **Annual Bus, DART, Rail or LUAS** travel tickets in a tax efficient manner. Travel tickets can be purchased through salary deduction, and are not liable to income tax or PRSI. Visit www.taxsaver.ie to see what you can save.

	Ticket Type Click text for more information	Cost	✓ Tick beside ticket required	Photo ID Requirements (if you had a similar ticket last year there is no need to send photo or LUAS ID form)	
R1	Commuter Rail & DART Only (Leap card) Valid as far as Balbriggan, Dunboyne, Kilcoole, Hazelhatch & Maynooth	€ 1,460		Iarnród Éireann tickets require: Digital Photo	
R3	Commuter Rail & DART + Dublin Bus (Leap card) Valid as far as Balbriggan, Dunboyne, Kilcoole, Hazelhatch & Maynooth	€ 1,760			
R5	Commuter Rail & DART + Dublin Bus + LUAS (Leap card) Valid as far as Balbriggan, Dunboyne, Kilcoole, Hazelhatch & Maynooth	€ 2,140			
R6	Iarnród Éireann Point-Point (Write stations) From: _____ To: _____ Prices available on www.taxsaver.ie I added €410 for Connolly – Heuston Yes / No	Write price: €			
R7	Iarnród Éireann All Services	€ 4,810			
R8	Iarnród Éireann + Bus Éireann All Services	€ 5,430			
R9	Iarnród Éireann + Dublin Bus All Services	€ 5,430			
R10	Iarnród Éireann + Luas All Services	€ 5,430			
R11	CIE All Services	€6,400			
D1	Dublin Bus Travelwide	€ 1,320			Dublin Bus tickets require Digital Photo
D2	Dublin Bus + LUAS	€ 1,590			
B1	Bus Éireann Point-Point (Write stations) From: _____ To: _____	Write price: €		Bus Éireann tickets require: Digital Photo	
	Bus Éireann Zone:	Write price: €			

- I agree to forego €..... (Insert price of ticket(s)) of my taxable annual basic salary for **Company Name x** to purchase a bus/rail/luas pass valid from **to** in my name and on my behalf.
- The reduction in my salary will be spread over **x months**
- This reduction will be used to purchase the bus/rail/luas pass by means of a deduction from my payroll. The deduction will be reflected on my payslip
- I acknowledge this addendum will be an amendment to the terms and conditions of my existing contract of employment.
- I acknowledge that once this alteration is made there can be no entitlement to forego the benefit in favour of cash or to convert the benefit to cash.
- I understand any outstanding balance will be payable and will be deducted from my salary if I leave the employment of _____ before the conclusion of the relevant one year period.

Staff Number: **Signature:**
Name in BLOCK CAPITALS **Date:**.....