

The Roads Act 1993 - Control Of Skips Byelaws 1998 **APPLICATION/RENEWAL FORM - LICENCE FEE €1,000**

Name of Company

Address of Company

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Email Address:

Public Liability Policy No. **Expiry Date**

Name of Insurance Co.

Address of Insurance Co

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Please give all details of the following. Please note an additional sheet may be attached if necessary.

Name of Associated Skip Co: **Address:**

Actual No. of Skips

Insurance: *The skip operator must produce a current valid Public Liability Policy and Motor Liability Policy with an approved insurance company, completely indemnifying themselves and Dún Laoghaire Rathdown County Council in respect of all claims by third parties of whatsoever nature or howsoever caused resulting from the use and operation of the skip. The limits of indemnity shall be at least **€6,500,000** for any one incident.*

Safety Statement: *The skip operator must provide a Safety Statement.*

Byelaws: *I agree to comply with Dún Laoghaire-Rathdown County Council Byelaws for skips on public roads*

Signed: **Date:**

