



Tel: 1800 11 55 00

e: customercare@dtes.ie

w: www.dtes.ie

DTES Renewal Application Form

First Name:	Surname:
Your Address:	
Fueral Andreas	
Email Address:	
Vohisla Pagistration	Existing Dies Number
Vehicle Registration:	Existing Disc Number:
Additional Comments:	

NB* Please remember to attach your VRT7 Cert to This Document and post to EA House, Damastown Road, Mulhuddart, Dublin 15.*