

Cycle to Work
UCC Employer Bicycle Scheme



Application Form

Please write in **BLOCK CAPITAL** letters

To: **Commuter Planning, University College Cork**

From: _____ Staff No: _____
 Name

_____ PPS No: _____
 Department / Unit

_____ Mobile: _____
 Email

Employment status Permanent Fixed Term >>> ____/____/____
 Expiry Date of

Salary payment Monthly Weekly current contract

_____ Employee Signature / Date	<input type="checkbox"/> O.K. _____ HR, Employment status checked
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Supplier _____

Supplier's Name _____ Supplier's VAT No _____

Address _____

Bank details (for EFT transfers only): Bank: _____

Account No: _____ Sort Code: _____

For Admin use only	
Verification by HR: Spreadsheet Updated: Set up PO: Notification sent to Employee: Invoice to Payroll: Deduct Payroll:	Expected available net salary will suffice to cover the periodical payback rates <input type="checkbox"/> YES <input type="checkbox"/> NO ,denied _____ HR approved , Signature / Date

**Details of Bicycle / Safety Equipment
Quotation**

Goods	Description	Price incl. of VAT
Bicycle		
Cycle helmet <i>Conforming to European standard EN 1078</i>		
Bells and bulb horn		
Lights including dynamo packs <i>-- compulsory, if not included in "bicycle" --</i>		
Cycle clips and dress guards		
Panniers, luggage carriers and straps		
Locks and chains		
Pumps, puncture repair kits, cycle tool kits and tyre sealant		
Reflective clothing along with white front reflectors and spoke reflectors		
	TOTAL	

Supplier's Stamp / Date / Signature

Salary Deduction Authorisation

I hereby authorize a salary sacrifice of €_____ [Full cost of Bicycle] of my annual basic salary in lieu of the provision of a new bicycle/related bicycle safety equipment by my employer, University College Cork. *Tax exempt benefit in kind may only be provided to an individual employee once in any period of 5 consecutive tax years.

I realize that this arrangement will operate for a period of _____ months / weeks (max. one year) and that the salary sacrifice will be reflected in my pay-cheques and pay-slips over that period.

In case my employment terminates prior to the expiry of the deduction agreement, I agree that the outstanding Employer Bicycle Scheme debt will be deducted from my final salary/wage or any other monies due. In the event of insufficient monies being available to meet the debt in full, I will personally reimburse the University.

I declare that the bicycle/related bicycle safety equipment supplied under this scheme is for my personal use and will be used primarily for qualifying journeys i.e. journeys to or from work and/or between places of work and that such use is subject to any rules or conditions that are in force concerning the operation and use of the equipment.

I understand that I should use the bicycle in line with all rules and regulations as set out by the Road Safety Authority (RSA) and make use of proper bicycle safety equipment at all times.

(Please see RSA Website <http://www.rulesoftheroad.ie/rules-for-pedestrians-cyclists-motorcyclists/cyclists/index.html>)

I have read and I agree to the UCC Employer Bicycle Scheme Conditions and Procedures together with Department of Finance circular 16

Name: _____

Department: _____

Staff No. (as on payslip): _____

Signature / Date: _____

Contact:

UCC Building and Estates, Mary O'Donovan,
T: 2504, E: mary.odonovan@ucc.ie

Applications to be sent to:

Internal Post: Mary O'Donovan, Buildings & Estates, Capital
Projects Office, 3 Carrigside, College Road.