Cycle to Work

UCC Employer Bicycle Scheme

Application Form

Email to: i.sheehan@ucc.ie

Commuter Planning Office, 3 Carrigside, College Road, Cork.

Name	Staff ID:
Dept Department / Centre / Unit	Office #
UCC e-mail address	Mobile #

Permanent	Fixed Term	//
Monthly	U Weekly	Expiry Date of current Contract

Employee Signature & Date

Bicycles can only be purchased from UCC's approved Suppliers: <u>C2WSuppliers2025.pdf</u>

Name of bike shop: _____

For Administrative use only			
Employment status checked:	□ ОК		
Approval from HR:	Expected available net salary will suffice to cover the monthly / weekly payback amount.		
Purchase Order created:			
Invoice submitted:	🗆 YES 🛛 NO [denied]		
Name to Payroll:			
Spreadsheet updated:	HR Approval, Signature / Date		



Please type or write in **BLOCK CAPITAL** letters

Quotation

Please complete full details of Bicycle & Safety Equipment



Cycling Equipment	Description	Price incl. of VAT
Bicycle:	Make & Model	
 □ regular □ electric □ cargo 		
Lights including dynamo Pack - compulsory , if not provided on bicycle		
Cycle helmet Must conform to European Standard EN 1078		
Locks and chains		
Cycle clips and dress guards		
Pumps, puncture repair kits, cycle tool kits and tyre sealant		
Mirrors and mudguards		
Reflective clothing, high viz jacket and spoke reflectors		
Panniers, luggage carriers, straps, etc.		
Bells or bulb horn		
	TOTAL	

Salary Deduction Authorisation



I hereby authorize a salary deduction of $\underbrace{\mbox{email}}_{[max.\mbox{email}250\mbox{old}] (1250\mbox{email}250\mbox{old}) (1250\mbox{email}23000)]$ of my annual basic salary in lieu of the provision of a new bicycle/related bicycle safety equipment by my employer, UCC. A Tax-Exempt benefit-in-kind may only be availed of by an employee once in any period of four [4] consecutive tax years. https://www.revenue.ie/en/jobs-and-pensions/taxation-of-employer-benefits/cycle-to-work-scheme.aspx}

I realise 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.

Should my employment terminate prior to the expiry of the payment 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 commit to 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. <u>(Please see RSA Website</u> <u>http://www.rulesoftheroad.ie/rules-for-pedestrians-cyclists-motorcyclists/ cyclists/index.html</u>)

I have read and I agree to the UCC Employer Bicycle Scheme Conditions and Procedures together with Department of Finance Circular 16/2009.

Name:	
Department:	
Staff No:	
Signature:	 Date:

Queries: UCC Building & Estates, Commuter Plan Office: 021 490-2469 or mobile: 089 472-3181.

Applications can be sent via email to: i.sheehan@ucc.ie

Or by internal post to: Imelda Sheehan, Buildings & Estates, No. 3 Carrigside, College Road, Cork.