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# **COVID-19 FPN Cancellation Request Form**

SECTION A - Applicant's details (As per Covid-19 Fixed Payment Notice)	
Name: Address: Phone No: Email:	FPN Number:
SECTION B:	
Have you previously applied to have a Covid-19 Fixed Payment Notice cancelled? Yes: No: If yes, please provide details hereunder:	
SECTION C: COVID-19 Cancellation Request Reason (tick one):	
SEE NOTES FOR GUIDANCE	
1. Detection Issue	
2. Medical Exemption for non-wearing of face mask	
3. Reasonable Excuse to Travel	
4. Paired Household	
SECTION D: Declaration	
Supporting documentation enclosed Yes No (SEE NOTES FOR GUIDANCE)  If supporting documentation as set out in the Guidance Notes is not provided the application will be refused.  I certify that the information provided is true to the best of my knowledge and belief.	
Signed	Date:
The completed form should be returned either by email to <a href="NPO@garda.ie">NPO@garda.ie</a> , by fax to 0504-59844 or by post to Fixed Charge Processing office, Parnell St., Thurles, Co. Tipperary.	

NB: Submitting a Covid-19 cancellation request form does <u>NOT</u> suspend the 28 day payment timeframe of the fixed payment.

## **COVID-19 FPN Cancellation Request Form Guidance Notes**

This form should only be used if you believe there are grounds to have the notice cancelled e.g. detection issue or exceptional circumstances (see Covid-19 Cancellation Request Reason Guidance below). Complete the Covid-19 FPN Cancellation Request Form immediately and forward either by email to NPO@garda.ie, by fax to 0504-59844 or by post to Fixed Charge Processing Office, Parnell St., Thurles, Co. Tipperary with supporting documentation.

Please note the 28 day period for payment of the notice will not be suspended pending any appeal. Completing the Covid-19 Cancellation Request Form

#### Sections A, B, C and D must be completed in all cases.

#### **SECTION A:**

 Complete the details on the cancellation request form as per the details on the fixed payment notice (FPN) including your Name, Address and FPN Reference number. Phone number and email are optional.

#### **SECTION B:**

• The applicant must indicate if they have previously applied to have a Covid-19 fixed payment notice terminated and provide details for same

#### **SECTION C:**

 Select a cancellation request reason from one of the options outlined below, that reflects your reason for appeal.

#### SECTION D

• Finally the applicant must certify that the information provided is true to the best of their knowledge and belief

# **COVID-19 Cancellation request reason - guidance**

## Face Covering - on Public Transport

### **Grounds for Cancellation**

- 1. Not requested by a relevant person to put on a face covering
- 2. Person has a reasonable excuse

### **Definitions**

#### Relevant person

- (a) any officer, employee or agent of a public transport operator who is
  - (i) in, on, or boarding a public transport vehicle owned or operated by that operator, and
  - (ii) acting in the course of his or her duty as such officer, employee or agent in connection with the provision of a public passenger transport service on behalf of that operator;
- (b) any officer, employee or agent of the National Transport Authority who is
  - (i) in, on, or boarding a public transport vehicle owned or operated by a public transport operator, and
  - (ii) acting in the course of his or her duty as such officer, employee or agent of the National Transport Authority.

#### Reasonable excuse

- (a) the person cannot put on, wear or remove a face covering -
  - (i) because of any physical or mental illness, impairment, or disability, or
  - (ii) without severe distress,

- (b) the person needs to communicate with a person who has difficulties communicating (in relation to speech, language or otherwise),
- (c) the person removes the face covering to provide emergency assistance or to provide care or assistance to a vulnerable person,
- (d) the person removes the face covering to avoid harm or injury, or the risk of harm or injury,
- (e) the person removes the face covering in order to, and only for the time required to, take medication.

## **Face Coverings in Certain Premises and Businesses**

### **Grounds for Cancellation**

- 1. Person was not in a relevant premises.
- 2. Person was a responsible person or worker for that relevant premises where there was a screen that separates the responsible person or worker from other persons or the responsible person or worker takes all reasonable steps to maintain a distance of at least 2m between himself and other persons
- 3. A member of An Garda Síochána in the course of performing his or her duties.
- 4. The person has a reasonable excuse.

#### **Definitions:**

Relevant premises defined as per Government regulations on date of offence

### **Responsible person**

The occupier of the relevant premises, manager of the relevant premises and any other person for the time being in charge of the relevant premises, worker of the relevant premises.

#### Reasonable excuse is namely;

- (a) the person cannot put on, wear or remove a face covering -
  - (i) because of any physical or mental illness, impairment, or disability, or
  - (ii) without severe distress,
- (b) the person needs to communicate with a person who has difficulties communicating (in relation to speech, language or otherwise),
- (c) the person removes the face covering to provide emergency assistance or to provide care or assistance to a vulnerable person,
- (d) the person removes the face covering to avoid harm or injury, or the risk of harm or injury,
- (e) the person removes the face covering in order to, and only for the time required to, take medication.

## Supporting documentation required with Cancellation Request Form

A certificate / letter from a medical practitioner or other medical professional outlining the named person was not required to wear a face covering on the date they were detected by the Garda. (refers to person who has a reasonable excuse )

Any other documentation submitted with an application for cancellation will be considered by the Cancelling Authority.

## **Movement of Persons**

## **Grounds for cancellation**

You may have grounds for cancellation of this notice, if it is deemed that you had a reasonable excuse for leaving your place of residence in accordance with Regulation 4(1) of Statutory Instrument 701 of 2020 as amended.

Please note documentary proof relating to your reasonable excuse will be requested in order to consider your application.

# **Events in Dwellings**

## **Grounds for cancellation**

You may have grounds for cancellation of this notice, if it is proven that you are in a paired household arrangement. Such arrangements allows for a household consisting of a person who lives alone, or vulnerable persons (a "relevant household"), to pair with one other household for the purpose of attending events in either dwelling. Neither household may already be a paired household, and neither may subsequently agree to pair with any other household.

Please note supporting information of proof relating to your paired household arrangement will be required in order to consider your application.