DARS	DRUŽBA ZA AVTOCESTE V REPUBLIKI SLOVENIJI D.D.
Form for toll payment exer	nption due to transport for humanitarian aid
occn@dars.si	
Fax: +386 5 700 25 08	
Application No.:	(filled out by DARS, d. d.)
	APPLICATION
for aut	thorisation for an exemption from toll payment
Applicant:	
Name (company/authorit	y)/address:
Contact person:	
Phone/fax/e-mail:	
	ovisions of Article 9, paragraph five of the Road Tolling Act (Off
In accordance with the pro Gazette of RS No. 24/15 a	
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In accordance with the pro Gazette of RS No. 24/15 a humanitarian transport: basis of the submitted doo (1) Information on the o Date of transport: Time of transport: from Transport route: Date of return travel:	ovisions of Article 9, paragraph five of the Road Tolling Act (Off nd 41/17), we are sending you information regarding the and on the cuments, we are requesting an exemption from toll payment. date and route

Cargo information:

(2) Vehicle / vehicles information

Vehicle make	Registration no. plate	Registrati on	Country of registration	Country of registration
	front	no. plate rear	of the towing vehicle	of the trailer
			Venicie	

(3) Information about the vehicle owner or user

Name (company/authority)/address:

Contact person:_____

Phone/fax/e-mail:_____

(4) Information about the humanitarian organisation

Name/address:

Contact person:_____

Phone/fax/e-mail:______

Mandatory attachments: (1) copy of the travel order, (2) copy of the filled out international consignment note - CMR

The following needs to be provided to the toll enforcement agents during transport:

- Fully completed application with the assigned application number and the authorisation for an exemption from toll payment by DARS, d.d.;
- Travel order (original)
- International consignment note CMR (original)

Signature of the applicant:

Signature of the vehicle owner or user: _____

Signature of the contact person of the humanitarian organisation and a stamp:

Place and date: _____

To be completed by Dars d. d.

On the basis of the duly completed application No. _____, DARS, d.d. has found that all the conditions for an exemption from toll payment are / are not met.

When the conditions for an exemption from toll payment are met, this exemption shall apply for the period, travel route and the vehicles indicated in that application for authorisation for an exemption from toll payment.

Place and date: ______ Stamp (Name and surname) Signature