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Reference: ASGI/01/NEW

26 February 2026

## CASH-IN-TRANSIT (CIT) PALLET TRANSPORTATION RECORD Irish & EU Regulatory Compliant

**Document Type:** Operational / Regulatory / Audit Record

**Applicable Law & Standards:**

- Regulation (EU) No 1214/2011 (where cross-border applies)
- Irish Cash-in-Transit licensing requirements
- I.S. 998:2006 Cash-in-Transit Standard (Ireland)
- Finance (Provision of Access to Cash Infrastructure) Act 2025

### SECTION 1: UNIQUE TRIP IDENTIFICATION & BARCODE

**CIT Trip Reference (Human-Readable):**

**ASG-CIT-IRL-\*\*\*\*\_\*\*\*\*\***

*(Format example: ASG-CIT-IRL-20260226-001)*

**Machine-Readable Barcode Value:**

ASG|CIT|IRL|20260226|PICKUP-DELIVERY|REF-001

**Barcode Placement (for print / PDF):**

||||| ||||| ||| || ||||| ||| ||||| |||

*(Encode the value above as Code-128 or QR Code when printing or generating PDFs)*

Initials:

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**Purpose:** This barcode uniquely links the consignment, vehicle, crew, and route to this single transport operation for audit, incident review, and regulatory inspection.

**SECTION 2: OPERATION & CONSIGNMENT DETAILS**

1. **Date of Transport:** \_\_\_\_\_
2. **Client / Contracting Entity:** \_\_\_\_\_
3. **Authorised Client Representative:** \_\_\_\_\_
4. **Contact Telephone:** \_\_\_\_\_
5. **Type of Consignment:**
  - Euro banknotes
  - Euro coins
  - Sealed cash pallets
  - Mixed euro denominations
6. **Number of Pallets / Containers:** \_\_\_\_\_
7. **Declared / Contracted Value (if applicable):** \_\_\_\_\_

**SECTION 3: REGULATORY & LICENSING CONFIRMATION**

1. Operator holds valid **Irish CIT licence**.  Yes  No
2. Operator registered as a **CIT provider** where required?  Yes  No  
*(Cross-Border Only – complete if applicable)*
3. Valid **EU Cross-Border CIT Licence** held?  Yes  No
4. Host Member State security rules complied with?  Yes  No

**SECTION 4: PICK-UP LOCATION DETAILS**

1. **Pickup Site Name:** \_\_\_\_\_
2. **Full Address:** \_\_\_\_\_

Initials: \_\_\_\_\_



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3. **Authorised Pickup Contact:** \_\_\_\_\_

4. **Contact Number:** \_\_\_\_\_

5. **Scheduled Pickup Time:** \_\_\_\_\_

6. **Actual Arrival Time:** \_\_\_\_\_

**SECTION 5: PICK-UP SECURITY & HANDOVER CONTROLS**

1. Controlled access at pickup site?  Yes  No

2. Secure / restricted loading area used?  Yes  No

3. Pallets sealed before handover.  Yes  No

**Seal / Container Numbers:**

4. Any irregularity noted at pickup?  Yes  No

If YES, describe:

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**SECTION 6: VEHICLE & CREW DETAILS**

**Vehicle**

• Registration Number: \_\_\_\_\_

• Approved for CIT use?  Yes  No

• Tracking / security systems active?  Yes  No

**Crew**

• Driver Name: \_\_\_\_\_

Initials: \_\_\_\_\_



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- Security Operative(s): \_\_\_\_\_

All crew licensed, trained, and authorised?  Yes  No

**SECTION 7: LOADING & DEPARTURE CONFIRMATION**

1. Pallet count verified against manifest?  Yes  No
2. Loading supervised by authorised personnel?  Yes  No
3. Vehicle doors sealed after loading?  Yes  No

**Vehicle Seal Numbers:**

\_\_\_\_\_

**Pickup Authority Name & Signature:** \_\_\_\_\_

**Time:** \_\_\_\_\_

\_\_\_\_\_

**SECTION 8: IN-TRANSIT CONTROL**

1. Planned route followed or authorised deviation?  Yes  No
2. Any unscheduled stops or delays?  Yes  No

If YES, details:

3. Any incident, alert, or security concern during transit?  Yes  No

**SECTION 9: DELIVERY LOCATION DETAILS**

1. **Delivery Site Name:** \_\_\_\_\_
2. **Full Address:** \_\_\_\_\_
3. **Authorised Recipient:** \_\_\_\_\_
4. **Contact Number:** \_\_\_\_\_
5. **Scheduled Delivery Time:** \_\_\_\_\_
6. **Actual Arrival Time:** \_\_\_\_\_

Initials: \_\_\_\_\_



**SECTION 10: DELIVERY VERIFICATION**

- 1. Recipient identity verified?  Yes  No
- 2. Vehicle seals intact on arrival?  Yes  No
- 3. Seal numbers matched pickup records?  Yes  No
- 4. Pallet count matched manifest?  Yes  No

**SECTION 11: DELIVERY CONFIRMATION**

**Recipient Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date & Time:** \_\_\_\_\_

Any discrepancies noted?  Yes  No

If YES, details:

\_\_\_\_\_  
\_\_\_\_\_

**SECTION 12: INCIDENT & REGULATORY REPORTING**

Was any incident, deviation, or non-compliance identified that may require internal or regulatory reporting?

Yes  No

If YES, summary:

\_\_\_\_\_

Incident / Reference Number: \_\_\_\_\_

\_\_\_\_\_

**SECTION 13: FINAL OPERATOR DECLARATION**

I confirm that this Cash-in-Transit operation was conducted in accordance with Irish law, applicable EU regulations, licensing conditions, and Andro Secure Group Ireland operational standards.

**Completed By (Name):** \_\_\_\_\_

**Position:** \_\_\_\_\_



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**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Initials:* [Redacted]

