桃園市政府地方稅務局使用牌照稅身心障礙者免稅暨退稅申請書 Taoyuan City Department of TaxationApplication for Vehicle License Tax Exemption or Return for People with Disabilities

區 流水號:

申請日期: 年月日

District No. Application Date(yr/m/d)

申請人(車主) Applicant (Vehicle Owner)				身心障礙者 Person with Disabilities		
姓名(簽名或蓋章) Name (Sign or Stamp)				姓 名 Name		
身分證 統一編號 ID Number				身分證 統一編號 ID Number		
出 生 日 期 Birth Date				出生日期 Birth Date		
電 話 Telephone Number				後續(重新)鑑 定 日 期 Follow-Up (Re-) Review Date		
車主對身心障 礙者之稱謂 Relationship with the Person with Disabilities			車 牌 號 碼 Vehicle License Number		排氣量或 馬力數 Engine Displacement or Horsepower	
身心障礙者 戶籍地址 Household Registration Address of the Person with Disabilities						
	户籍地址 Household Registratio n Address					
	□住居所 Residence Location □就業處 所 Employme nt Location	□同户籍地址 Same as Household Registration Address				

申請免稅事由 (請在□打) Reasons to Apply for Tax Exemption (Please put a check mark in	□供領有駕駛執照之身心障礙者使用,且為其本人所有之車輛。 The vehicle is used by the person with disabilities owning a valid driver's license and owned by the applicant. □供無駕駛執照之身心障礙者使用,其□本人□配偶 □同一户籍二親等以內親屬或 □同一户籍經法院選定之監護人或輔助人所有之車輛 The vehicle is used by the person with disabilities without a valid driver's license and owned by□ the applicant,□ the applicant's spouse,□ the applicant's second-degree relative who is registered in the same household, or □ a guardian or an assistant assigned by the court and registered in the same household.	
使用牌照稅 退稅申請 Application for Vehicle License Tax Exemption	□直撥退稅帳戶 Direct Deposit □金融機構:銀行分行帳號分行帳號	
檢附證明文件 Attaching Documents for Verification	ng applicant or his/her spouse, ID card can be used as a verification document too) ts for 二、直撥退稅請檢附金融機構封面及存摺影本。(若無法辦理匯款存入時,該退	