

新北市政府稅捐稽徵處使用牌照稅身心障礙者免稅暨退稅申請書
 Revenue Service Office, New Taipei City Government for Vehicle License Tax
 Exemption or Return for People with Disabilities

區 流水號：
District No.

申請日期： 年 月 日
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			
車主 Vehicle Owner	戶籍地址 Household Registration Address		
	<input type="checkbox"/> 住居所 Residence Location <input type="checkbox"/> 就業處 所 Employment Location	<input type="checkbox"/> 同戶籍地址 Same as Household Registration Address	

<p>申請免稅事由 (請在<input type="checkbox"/>打✓) Reasons to Apply for Tax Exemption (Please put a check mark in <input type="checkbox"/>)</p>	<p><input type="checkbox"/>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.</p> <p><input type="checkbox"/>供無駕駛執照之身心障礙者使用，其<input type="checkbox"/>本人<input type="checkbox"/>配偶 <input type="checkbox"/>同一戶籍二親等以內親屬或<input type="checkbox"/>同一戶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<input type="checkbox"/> the applicant, <input type="checkbox"/> the applicant's spouse, <input type="checkbox"/> the applicant's second-degree relative who is registered in the same household, or <input type="checkbox"/> a guardian or an assistant assigned by the court and registered in the same household.</p>
<p>使用牌照稅 退稅申請 Application for Vehicle License Tax Exemption</p>	<p><input type="checkbox"/>直撥退稅帳戶 Direct Deposit</p> <p><input type="checkbox"/>金融機構：_____銀行_____分行帳號_____</p> <p>Financial Institution Bank Branch Account Number</p> <p><input type="checkbox"/>同意本人已繳納地方稅款，如有重（溢）繳稅時，直接撥入上述帳戶內。 The applicant agrees that the tax overpayment can be returned and deposited directly to the account mentioned above.</p> <p><input type="checkbox"/>支票退稅收件地址：_____</p> <p>Tax return check will be sent to this address</p>
<p>檢附證明文件 Attaching Documents for Verification</p>	<p>一、免稅證明文件：身心障礙手冊或證明。 Verification Documents for Tax Exemption: Disability Card or Verification.</p> <p>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，該退稅款改以退稅支票方式辦理)。 Please attach a copy of passbook cover with the financial institution information if direct deposit is chosen for a tax refund. (If direct deposit cannot be processed, the tax refund will be sent through check.)</p>