

臺灣臺中地方檢察署檔案應用申請書

Application for Using Archives at the Taiwan Taichung

District Prosecutors Office

申請書編號：

Application No.:

姓名 Name	出生年月日 Date of Birth	國民身分證統一編號/護照號碼/居留證號 National ID No./ Passport No./ Alien Resident Certificate No.	住(居)所、聯絡電話 Address of Domicile/Residence, Tel
<p>申請人 <u>Applicant</u></p>			地址： _____ Address: 電話： _____(O) _____ Tel.: 傳真： _____ Fax: e-mail： _____
<p>※代理人 與申請人之關係 () ※<u>Representative</u> Relationship with the applicant ()</p>			地址： _____ Address: 電話： _____(O) _____ Tel.: 傳真： _____ Fax: e-mail： _____
<p>※輔佐人 與申請人之關係 () ※<u>Assistant</u> Relationship with the applicant ()</p>			地址： _____ Address: 電話： _____(O) _____ Tel.: 傳真： _____ Fax: e-mail： _____

※法人、團體、事務所或營業所名稱：

※Name of corporation, association, firm or business entity:

地址：

Address:

(管理人或代表人資料請填於上項申請人欄位)

(Fill out the information of the administrator or the representative's information in the lines for applicant information)

序號 Serial No.	請先至全國檔案目錄查詢網 https://near.archives.gov.tw/ 查詢檔案目錄填入 Please go to the Navigating Electronic Agencies' Records https://near.archives.gov.tw/ to look up the documentation table for contents and fill it out.		申請項目 (可複選) 【閱覽、抄錄】【複製】 Application Category (select all that apply) [Read or Transcribe] [Make a Copy]
	檔號或文件名稱、或被告姓名及案號 File No. or document name, or defendant's name and case No.	檔案名稱或內容要旨 Document name or summary	
1			<input type="checkbox"/> 閱覽 <input type="checkbox"/> 抄錄 <input type="checkbox"/> 複製 <input type="checkbox"/> Read <input type="checkbox"/> Transcribe <input type="checkbox"/> Make a Copy
2			<input type="checkbox"/> 閱覽 <input type="checkbox"/> 抄錄 <input type="checkbox"/> 複製 <input type="checkbox"/> Read <input type="checkbox"/> Transcribe <input type="checkbox"/> Make a Copy
3			<input type="checkbox"/> 閱覽 <input type="checkbox"/> 抄錄 <input type="checkbox"/> 複製 <input type="checkbox"/> Read <input type="checkbox"/> Transcribe <input type="checkbox"/> Make a Copy

※序號_____有使用檔案原件之必要，事由：

※Serial No. _____ Reasons for the necessary use of the original copy of the documentation:

申請目的：歷史考證 學術研究 事證稽憑 業務參考 權益保障

其他 (請敘明目的)：_____

Application Purpose:

Research on historical records

Academic research

Verification of facts and evidence

Business reference

Protection of rights and interests

Other (please specify the purpose):

此致 臺灣臺中地方檢察署

TO Taiwan Taichung District Prosecutors Office

申請人簽章：_____※代理人簽章：_____申請日期：_____年_____月_____日

Signature of Applicant: _____※Signature of Representative: _____ Application Date: _____(month) _____(date) _____, (year)

(詳背面填寫說明)

(Please read instructions on the other side)

填 寫 說 明

Instructions for Completion

一、※標記者，請依需要加填，其他欄位請填具完整。

1. Any field marked ※ is to be filled out as applicable. Other fields shall be filled out as required.

二、身分證明文件字號請填列身分證字號或護照號碼。

2. The ID document No. shall be the national ID No. or passport No.

三、代理人如係意定代理者，請檢具委任書；如係法定代理者，請檢具相關證明文件影本。申請案件屬個人隱私資料者，請檢具身分關係證明文件。

3. If the representative was given authorization, please submit the power of attorney. If the representative has the statutory authority, please submit the copy of any supporting document. If the application is for any personal privacy information, please submit the supporting document of relationship identity.

四、輔佐人係指協助申請人閱覽檔案者。

4. The assistant is a person who assists in the application by reading the documentation.

五、法人、團體、事務所或營業所請附登記證影本。

5. A corporation, association, firm or business entity shall submit the copy of the registration certificate.

六、申請機關檔案有檔案法第十八條所定情形之一者，本署得予駁回。

6. Our Office may reject the application for any agency's records set forth in Article 18 of the Archives Act.

七、閱覽、抄錄或複製檔案，應於本署所定時間及場所為之。

7. The reading, transcribing or making copies of the documentation must take place at the time and location specified by our Office.

八、閱覽、抄錄或複製檔案，應遵守檔案應用有關規定，並不得有下列行為：

8. The reading, transcribing or making copies of the documentation must comply with the regulations for using the documentation and shall not violate the following prohibitions:

(一) 添註、塗改、更換、抽取、圈點或污損檔案。

(1) Do not write, alter, replace, extract, circle or deface any document.

(二) 拆散已裝訂完成之檔案。

(2) Do not break up bound documents.

(三) 以其他方法破壞檔案或變更檔案內容。

(3) Do not destroy or change any contents in the documents in any manner.

九、閱覽、抄錄檔案，每 2 小時 20 元，不足 2 小時，以 2 小時計費；複製之收費標準如下：

9. The reading or transcribing of documents is charged at the rate of NT\$20 per 2 hours. The minimum time chargeable is 2 hours. The copying fees are charged as follows:

(一) 影印機紙張黑白複印，B4 (含) 尺寸以下，每張新臺幣 2 元；A3 尺寸，每張新臺幣 3 元。彩色複印，以黑白複製收費標準 5 倍計價。

(1) Black and white copy on the copy machine: NT\$ 2 per B4 size paper (or smaller). NT\$ 3 per A3 size paper. A color copy is 5 times the applicable rate of the black and white copy.

(二) 電子檔紙張黑白列印，B4 (含) 尺寸以下，每張新臺幣 2 元；A3 尺寸，每張新臺幣 3 元。彩色複印，以黑白複製收費標準 5 倍計價。

(2) Black and white printing of electronic documents: NT\$ 2 per B4 size paper (or smaller). NT\$ 3 per A3 size paper. A color copy is 5 times the applicable rate of the black and white copy.

十、申請書填具後，得以親自持送或書面通訊方式送達本署。

10. The completed application form may be submitted to our Office in person or by the method of written communication.

地址：臺中市西區自由路一段 91 號；電話：(04) 22232311 轉 5806。

Address: No.91, Sec. 1, Ziyou Rd., West Dist., Taichung City 40342; Tel. (04)

22232311 ext. 5806.

本署帳號臺灣銀行臺中分行帳號 010036070213。戶名：臺灣臺中地方檢察署 301 專戶。

The Office's Account in the Taichung Branch ,Bank of Taiwan, Account No. 010036070213. Account Name: Taiwan Taichung District Prosecutors Office 301 Account

十一、本署檔案應用閱覽處所：

11. Place for reading the documentation in our Office:

地址：臺中市西區自由路一段 91 號，本署為民服務中心；電話：(04) 22232311 轉 5806。

Address: No. 91, Sec. 1, Ziyou Road, West District, Taichung City, Service Center of the Office ;

Tel. (04) 22232311 ext. 5806.

開放時間：週一至週五上午 9 時至 12 時及下午 14 時至 17 時；國定例假日不開放。

Opening Hours: 9AM-12PM, 2PM-5PM, Monday to Friday. Closed on public holidays.

十二、本表檔案申請欄如不敷使用，請另紙書寫並裝訂於申請書後。

12. If the fields of this form are insufficient, please write on a separate paper and bind it to the application form.