

## Application for Tainan Government and Subsidiary Bodies Files

Application Number :

Name	Birth Date	ID card Number	Residence and contact information
			Address : _____ _____ Telephone number : (H)_____ (O)_____ e-mail : _____
Agent's relationship with the applicant (            )			Address : _____ _____ telephone number : (H)_____ (O)_____

※Name of legal person, group, firm or business office :

Address : \_\_\_\_\_

(Manager or representative data please fill in the applicant box above)

Number	Please fill in information on applied files		Actions on Files Applied ( can be multi-checked )
	File number	File name or main content	
1			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
2			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
3			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
4			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
5			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
6			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy

7			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
8			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
9			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy
10			<input type="checkbox"/> to read/transcribe <input type="checkbox"/> to copy

※Original File Number \_\_\_\_\_ is necessary for use,  
for the purpose of :

Purpose of Application :  History research     Academic Research     Evidence  
 Business reference     Rights Protection  
 Others ( Please write down your purpose ) :

To: ( full name of the official )

Applicant sign : \_\_\_\_\_ ※Agent sign : \_\_\_\_\_

Application date :    Y    M    D

**Please read the details and attached notes below**

## NOTICE

1. Spaces with the sign ※, are to be added according to your need, others are all necessary to be completely filled in.
2. Please fill in the ID card number or passport number.
3. If you are the agent, the letter of appointment is required.  
If you are the legal agent, the relevant supporting document copies are required.  
If application case concerns personal privacy data, the relationship certification documents are required.
4. A copy of the registration certificate shall be attached to a legal person, group, firm or business office.
5. The application of quasi-rebuttals in the archives of this organ shall be handled in accordance with the provisions of Article 18 of the Archives Law.
6. Reading, transcribing or copying of archives shall be done at the time and place designated by the bodies.
7. Applicants when reading, transcribing or copying archives, shall comply with the relevant provisions on the application of files of Tainan Municipal Government and its subsidiary bodies, and shall not engage in the following acts:
  - (1) Adding, altering, replacing, extracting, circling or impairing files.
  - (2) Dispersing the completed archives.
  - (3) Destroying or changing the contents of an archive by other means.
8. Reading, transcribing or copying file fee are to be accorded to the standard of reading and copying fee.
9. Applicant is responsible if there should be infringement on copyright or privacy using the files.
10. After the application is filled in, a printed copy should be sent to the related subsidiary bodies. ( please go to the Global Information Network of Tainan Government: <http://www.tainan.gov.tw/> for full title and address of the body ) .
11. If there should be non-complying or incomplete data when the receiving body inspects the application, please make corrections within seven days after notice: application may be rejected if the correction period expires or necessary information can't be corrected.