

Application Form for Archive Application of Tainan City Government and Affiliated Agencies

Number of Application Form :

Name	Date of Birth	National Identification Card Number	Residential Address and Contact Telephone Number
Applicant			Address: _____ Telephone : (H) _____ (O) _____ e-mail : _____
※ Relationship of the Agent and Applicant ()			Address : _____ Telephone : (H) _____ (O) _____
※Name of Legal Person, Organization, Firm or Office: _____ Address: _____ (Please fill information of person in charge or representative in the field of Applicant.)			
Item Number	Please search archive category before filling in.		Application Item (multiple choices allowed) 【 review and copy 】 【 duplicate 】
	Archive Number	Archive Name or Content Description	
1			<input type="checkbox"/> <input type="checkbox"/>
2			<input type="checkbox"/> <input type="checkbox"/>
3			<input type="checkbox"/> <input type="checkbox"/>
4			<input type="checkbox"/> <input type="checkbox"/>
5			<input type="checkbox"/> <input type="checkbox"/>
6			<input type="checkbox"/> <input type="checkbox"/>
7			<input type="checkbox"/> <input type="checkbox"/>
8			<input type="checkbox"/> <input type="checkbox"/>
9			<input type="checkbox"/> <input type="checkbox"/>
10			<input type="checkbox"/> <input type="checkbox"/>
※Serial Number _____ has /have the need to use the original copy of the archive because of :			

Application purpose: ☐ historical investigation ☐ academic research ☐ proof ☐ business use
☐ right protection
☐ others (please describe) : _____

This is made to (full name of the agency)
Signature of the Applicant : _____ ✕ Signature of the Agent : _____ Date of Application
: _____

Please read the attached Points of Attention to fill the application form.

Points of Attention

1. ※ is optional according to the need of applicant, and other fields shall be filled with complete information.
2. Please fill in either National Identification Card Number or Passport Number for the field of National Identification Card Number.
3. The agent should be authorized with a proxy letter; if it is the legal agent, please submit relevant document proofs. For applications involving individual privacy, please bring proof documents of identification.
4. Legal persons, organizations, firms or offices should submit a duplicate copy of business registration.
5. Archive application for government documents should be determined according to Article 18 of the Archive Act.
6. Reviewing, copying or duplicating any archive should be conducted at designated time and venue of each agency.
7. Reviewing, copying or duplicating any archive should follow points governing archive application of Tainan City Government and affiliated agencies. No following behaviors should be found:
 - a. Adding, amending, changing, replacing, circling or tarnishing archive;
 - b. Dismantling bounded archives; and
 - c. Damaging or altering archive contents in other methods.
8. Fees collected for reviewing, coping or duplicating archive: According to standard fees of reviewing, coping and duplicating archive.
9. When archive application is found to infringe others' copyright or privacy, the applicant should take full responsibilities.
10. After filling the application form, the applicant is allowed to send to the competency agency in written communication way (To search full name of the agency, please log on the website of Tainan City Government: <http://www.tainan.gov.tw/>.)
11. If the applicant is found with information non-compliance or incomplete, it should re-submit within seven days after notification. Those who fail to amend or submit information within required time will end in rejected applications.