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| 農 藥 販 賣 業 變 更 登 記 申 請 書 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 󠆵負責人身分證明文件影本 | | | | | | | | | 󠆵土地分區使用證明影本 | | | | | | | | | | | | | | | | | | | |
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| 承辦人 |  | | | | | | | 股長 | |  | | | | | | | | | | | | | | 機關首長 | |  | | | | | |
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| 󠆵管理人員身分證明文件影本 | | | | | | | | | | | | | | | | | | | 󠆵其他： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 農 藥 販 賣 業 變 更 登 記 申 請 書 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 姓名 | | | |  | | | | | | 蓋章 |  | | | | | | 性別 | | | |  | | | | | 出生年月日 | | | | | | | | | | | | 年 月 日 | | | | | | | | | | | | | | 農藥管理人  員證書號碼 | | | | | |  | | | |
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| 商號名稱 | | | | |  | | | | | | | | | | | | | | | | | | | | | | 蓋章 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業所住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 倉儲住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業種類 | | | | | |  |  |  | | --- | --- | --- | | 󠆵 輸出入󠆵 󠆵󠆵 批發󠆵 󠆵󠆵 零售 󠆵 | 農藥種類 | 󠆵成品農藥󠆵 󠆵󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 變更登記事項 | | | 負  責  人 | 姓名 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 出生年月日 | | | | | | | | | |  | | | | |
| 住址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | |
| 電話 | | | |  | | | | | | | | | | | | | 蓋章 | | | | | | |  | | | | | | | | | | | | | 性別 | | | | |  | | | | | 教育程度 | | | | | | | | | |  | | | | |
| 管  理  人  員 | 姓名 | | | |  | | | | | | | | | | | | | 蓋章 | | | | |  | | | 性別 | | | | | |  | | | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | | |  | | | | | | | | |
| 住址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | | | | | |
| 姓名 | | | |  | | | | | | | | | | | | | 蓋章 | | | | |  | | | 性別 | | | | | |  | | | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | | |  | | | | | | | | |
| 住址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | | | | | |
| 姓名 | | | |  | | | | | | | | | | | | | 蓋章 | | | | |  | | | 性別 | | | | | |  | | | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | | |  | | | | | | | | |
| 住址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | | | | | |
| 商號名稱 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | 蓋章 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業所住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 倉儲住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業種類 | | | | | 󠆵 輸出入󠆵 󠆵󠆵 批發󠆵 󠆵󠆵 零售 󠆵 | | | | | | | | | | | | | 農藥種類 | | | | | | | | | 󠆵成品農藥󠆵 󠆵󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 檢附文件 | | | | | 󠆵原販賣業執照 | | | | | | | | | | | | | | | | | | | | | | | 󠆵管理人員資格之證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵公司或商業登記證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | 󠆵建物合法使用證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵負責人身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | 󠆵土地分區使用證明影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵管理人員身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | 󠆵其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 審查結果  及意見 | | | | | | | | 󠆵准予變更  󠆵不准予變更。原因\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  󠆵其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 承辦人 | | |  | | | | | | | | | | | | | | 股長 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | 機關首長 | | | | |  | | | | | | | | | | | | | |
| 說 1.本申請表共三聯，第一聯由申請人送各縣市政府審查後留存，第二聯送各縣市公會，第三聯申請人自行留存。  明 2.「變更登記事項」只須填寫變更部分，其餘免填。  : 3.申請停業、歇業及換發農藥販賣業執照應檢附原證並填寫原登記事項欄；申請補發販賣執照應檢附刊登作廢之新聞紙一份，並填寫原登記事項欄。  4.請依據各縣市農藥販賣業執照申請及核發辦法檢附相關文件。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | 花蓮縣農藥販賣業執照號碼 | | | | | | | | | | | | | | | | | | | | | | 農藥販字第 號 | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| 農 藥 販 賣 業 登 記 申 請 書 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 商號名稱 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 蓋章 | | | | | |  | | | | | | | | | | |
| 營業所住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 電話 | | | | | |  | | | | | | | | | | |
| 倉庫住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 電話 | | | | | |  | | | | | | | | | | |
| 負  責人 | | | | | | | 姓名 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 出生年月日 | | | | | | | | | | |  | | | | |
| 住址 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | |
| 電話 | | |  | | | | | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | | 性別 | | | | |  | | | | 教育程度 | | | | | | | | | | |  | | | | |
| 管理人員 | | | | | | | (一) | | | 姓名 | |  | | | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | | 性別 | | | | |  | | | | 出生年月日 | | | | | | | | | | |  | | | | |
| 農藥管理人員證書號碼 | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | |
| (二) | | | 姓名 | |  | | | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | | 性別 | | | | |  | | | | 出生年月日 | | | | | | | | | | |  | | | | |
| 農藥管理人員證書號碼 | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | |
| (三) | | | 姓名 | | |  | | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | | 性別 | | | | |  | | | | 出生年月日 | | | | | | | | | | |  | | | | |
| 農藥管理人員證書號碼 | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | | |  | | | | |
| 營業種類 | | | | | | | 󠆵輸出入 󠆵批發 󠆵零售 | | | | | | | | | | | | | 申請販賣農藥種類 | | | | | | | | | | | | | | 󠆵成品農藥 󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 檢附文件 | | | | | | 󠆵公司或商業登記證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | 󠆵營業場所地址之土地分區使用證明、土地登記謄  本及建物使用執照影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵負責人身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | 󠆵農藥倉儲地點之土地分區使用證明、土地登記謄  本及建物使用執照影本(農藥零售業者免檢附) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵管理人員身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 審核事項 | | | | | | 項目 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 審核結果 | | | | | | 備註 | |
| (一)業者資格 | | | | | 1. 負責人符合規定資格 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
| 2. 管理人員符合規定資格 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| (二)業者資格 | | | | | 1. 管理人員是否專任 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 2. 兼營食品、飼料、人畜藥品、化妝品、有無隔間 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 3. 專營農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 4. 兼營其他行業(註明名稱) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| (三)安全措施 | | | | | 1. 營業地點之土地分區使用,是否經都計或建管或工務單位同  意准予登記(備註欄會章) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 2. 倉儲場所是否設於住宅 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 3. 有無放置劇毒農藥櫥櫃 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 4. 兼營其他業務有無將農藥隔離陳列貯存 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 5. 有無廢容器專用貯存設備 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| (四)匯票 | | | | | 1. 受款人及兌款郵局是否符合規定 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 2. 申購日期是否超過六個月 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 審查結果及意見 | | | | | | | | 󠆵合格可予核發農藥販賣業執照  󠆵審查事項第 項第 款不合󠆵格  󠆵其他 | | | | | | | | | | | | | | | | | | | | | | | | 備註 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 說 1.本申請表共三聯，第一聯由申請人送各縣市政府審查後留存，第二聯送各縣市公會，第三聯申請人自行留存。明 2.「變更登記事項」只須填寫變更部分，其餘免填。  3. 申請停業、歇業及換發農藥販賣業執照應檢附原證並填寫原登記事項欄；申請補發販賣執照應檢附刊登作廢之新聞紙一份，並填寫原登記事項欄。  4.請依據各縣市農藥販賣業執照申請及核發辦法檢附相關文件。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|  | | | | | | | 花蓮縣農藥販賣業執照號碼 | | | | | | | | | | | | | | 農藥販字第 號 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| 農 藥 販 賣 業 變 更 登 記 申 請 書 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 變更事項 󠆵󠆵管理人員󠆵 󠆵 󠆵󠆵負責人󠆵 󠆵󠆵商號名稱󠆵 󠆵󠆵補發󠆵 󠆵󠆵煥發󠆵 󠆵󠆵歇業󠆵 󠆵󠆵停業  󠆵營業所住址󠆵 󠆵󠆵倉儲住址󠆵 󠆵󠆵營業種類󠆵、農業種類 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 原  登  記  事  項 | 負  責  人 | 姓名 | | | | | |  | | | | | | | 蓋章 | | | |  | | | | | | | | 性別 | | | | | | | |  | | | | | 出生年月日 | | | | | | | | | | 年 月 日 | | | | | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | 電話 | | |  | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | |
| 管  理  人  員 | 姓名 | | | | | |  | | | | | 蓋章 |  | | | | | 性別 | | |  | | | | | 出生年月日 | | | | | | | | | | 年 月 日 | | | | | | | | | | | | | 農藥管理人  員證書號碼 | | | | | | |  | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | 電話 | | | | | | | | | |  | | | | | | | | | | | | | 身分證字號 | | | | | | |  | | |
| 姓名 | | | | | |  | | | | | 蓋章 |  | | | | | 性別 | | |  | | | | | 出生年月日 | | | | | | | | | | 年 月 日 | | | | | | | | | | | | | 農藥管理人  員證書號碼 | | | | | | |  | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | 電話 | | | | | | | | | |  | | | | | | | | | | | | | 身分證字號 | | | | | | |  | | |
| 姓名 | | | | | |  | | | | | 蓋章 |  | | | | | 性別 | | |  | | | | | 出生年月日 | | | | | | | | | | 年 月 日 | | | | | | | | | | | | | 農藥管理人  員證書號碼 | | | | | | |  | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | 電話 | | | | | | | | | |  | | | | | | | | | | | | | 身分證字號 | | | | | | |  | | |
| 商號名稱 | | | | | | |  | | | | | | | | | | | | | | | | | | | 蓋章 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業所住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 倉儲住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業種類 | | | | | | | |  |  |  | | --- | --- | --- | | 󠆵 輸出入󠆵 󠆵󠆵 批發󠆵 󠆵󠆵 零售 󠆵 | 農藥種類 | 󠆵成品農藥󠆵 󠆵󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 變更登記事項 | 負  責  人 | 姓名 | | | | | |  | | | | | | | | | | | | 蓋章 | | | | | | |  | | | | | | | 性別 | | | |  | | | | | | | | 出生年月日 | | | | | | | | | |  | | | |
| 住址 | | | | | |  | | | | | | | | | | | | 電話 | | | | | | |  | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | |
| 管  理  人  員 | 姓名 | | | | | |  | | | | | | | | | 蓋章 | | | |  | | | | | | 性別 | | | | |  | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | |  | | | | | | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | | |
| 姓名 | | | | | |  | | | | | | | | | 蓋章 | | | |  | | | | | | 性別 | | | | |  | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | |  | | | | | | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | | |
| 姓名 | | | | | |  | | | | | | | | | 蓋章 | | | |  | | | | | | 性別 | | | | |  | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | |  | | | | | | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | | |
| 商號名稱 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | 蓋章 | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 營業所住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 倉儲住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業種類 | | | | | | | 󠆵 輸出入󠆵 󠆵󠆵 批發󠆵 󠆵󠆵 零售 󠆵 | | | | | | | | | | | 農藥種類 | | | | | | | | 󠆵成品農藥󠆵 󠆵󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 檢附文件 | | | 󠆵原販賣業執照 | | | | | | | | | | | | | | | | | | 󠆵管理人員資格之證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵公司或商業登記證明文件影本 | | | | | | | | | | | | | | | | | | 󠆵建物合法使用證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵負責人身分證明文件影本 | | | | | | | | | | | | | | | | | | 󠆵土地分區使用證明影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵管理人員身分證明文件影本 | | | | | | | | | | | | | | | | | | 󠆵其他： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 審查結果  及意見 | | | | | | | | 󠆵准予變更  󠆵不准予變更。原因\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  󠆵其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 說 1.本申請表共三聯，第一聯由申請人送各縣市政府審查後留存，第二聯送各縣市公會，第三聯申請人自行留存  明 2.「變更登記事項」只須填寫變更部分，其餘免填。  : 3.申請停業、歇業及換發農藥販賣業執照應檢附原證並填寫原登記事項欄；申請補發販賣執照應檢附刊登作廢之新聞紙一份，並填寫原登記事項欄。  4.請依據各縣市農藥販賣業執照申請及核發辦法檢附相關文件。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | 電話 | | | | | | | | | |  | | | | | | | | | | | | | 身分證字號 | | | | | | |  | | | |
| 商號名稱 | | | | | | |  | | | | | | | | | | | | | | | | | | | 蓋章 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業所住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 倉儲住址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 營業種類 | | | | | | | |  |  |  | | --- | --- | --- | | 󠆵 輸出入󠆵 󠆵󠆵 批發󠆵 󠆵󠆵 零售 󠆵 | 農藥種類 | 󠆵成品農藥󠆵 󠆵󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 變更登記事項 | 負  責  人 | 姓名 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 出生年月日 | | | | | | | | | |  | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | |
| 電話 | | | | | |  | | | | | | | | | | | 蓋章 | | | | |  | | | | | | | | | | | | 性別 | | | | |  | | | | 教育程度 | | | | | | | | | |  | | | | | |
| 管  理  人  員 | 姓名 | | | | | |  | | | | | | | | | | | 蓋章 | | | |  | | | 性別 | | | | | |  | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | |  | | | | | | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | | |
| 姓名 | | | | | |  | | | | | | | | | | | 蓋章 | | | |  | | | 性別 | | | | | |  | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | |  | | | | | | | | | | |
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| 姓名 | | | | | |  | | | | | | | | | | | 蓋章 | | | |  | | | 性別 | | | | | |  | | | | | | | 農藥管理人員證書號碼 | | | | | | | | | |  | | | | | | | | | | |
| 住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | | | | | |
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| 檢附文件 | | | 󠆵原販賣業執照 | | | | | | | | | | | | | | | | | | | | | 󠆵管理人員資格之證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 󠆵管理人員身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | 󠆵其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 審查結果  及意見 | | | | | | | | 󠆵准予變更  󠆵不准予變更。原因\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  󠆵其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 承辦人 |  | | | | | | | | | | | | | | | 股長 | | |  | | | | | | | | | | | | | | | | | | | | | | | 機關首長 | | | | |  | | | | | | | | | | | | | |
| 說 1.本申請表共三聯，第一聯由申請人送各縣市政府審查後留存，第二聯送各縣市公會，第三聯申請人自行留存。  明 2.「變更登記事項」只須填寫變更部分，其餘免填。  : 3.申請停業、歇業及換發農藥販賣業執照應檢附原證並填寫原登記事項欄；申請補發販賣執照應檢附刊登作廢之新聞紙一份，並填寫原登記事項欄。  4.請依據各縣市農藥販賣業執照申請及核發辦法檢附相關文件。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | 花蓮縣農藥販賣業執照號碼 | | | | | | | | | | | | | | | | | | | 農藥販字第 號 | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |
| 農 藥 販 賣 業 登 記 申 請 書 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 商號名稱 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 蓋章 | | | | |  | | | | | | | | | | | | |
| 營業所住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 電話 | | | | |  | | | | | | | | | | | | |
| 倉庫住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 電話 | | | | |  | | | | | | | | | | | | |
| 負  責人 | | | | | 姓名 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 出生年月日 | | | | | | | | | |  | | | | | | |
| 住址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | |
| 電話 | | | | |  | | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | 性別 | | | | |  | | | 教育程度 | | | | | | | | | |  | | | | | | |
| 管理人員 | | | | | (一) | | | | | 姓名 |  | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | 性別 | | | | |  | | | 出生年月日 | | | | | | | | | |  | | | | | | |
| 農藥管理人員證書號碼號 | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | |
| (二) | | | | | 姓名 |  | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | 性別 | | | | |  | | | 出生年月日 | | | | | | | | | |  | | | | | | |
| 農藥管理人員證書號碼 | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | |
| (三) | | | | | 姓名 |  | | | | | | | | | | | | | 蓋章 | | | |  | | | | | | | | 性別 | | | | |  | | | 出生年月日 | | | | | | | | | |  | | | | | | |
| 農藥管理人員證書號碼 | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | 身分證字號 | | | | | | | | | |  | | | | | | |
| 營業種類 | | | | | 󠆵輸出入 󠆵批發 󠆵零售 | | | | | | | | | | | | | 申請販賣農藥種類 | | | | | | | | | | | | 󠆵成品農藥 󠆵劇毒性成品農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 檢附文件 | | | | 󠆵公司或商業登記證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | 󠆵營業場所地址之土地分區使用證明、土地登記謄  本及建物使用執照影本 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵負責人身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | | 󠆵農藥倉儲地點之土地分區使用證明、土地登記謄  本及建物使用執照影本(農藥零售業者免檢附) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 󠆵管理人員身分證明文件影本 | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 審核事項 | | | | 項目 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 審核結果 | | | | | | | 備註 | | |
|  | | | | | | (一)業者資格 | | | | | | 1. 負責人符合規定資格 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
| 2. 管理人員符合規定資格 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| (二)業者資格 | | | | | | 1. 管理人員是否專任 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 2. 兼營食品、飼料、人畜藥品、化妝品、有無隔間 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 3. 專營農藥 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 4. 兼營其他行業(註明名稱) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| (三)安全措施 | | | | | | 1. 營業地點之土地分區使用,是否經都計或建管或工務單位同  意准予登記(備註欄會章) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 2. 倉儲場所是否設於住宅 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 3. 有無放置劇毒農藥櫥櫃 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 4. 兼營其他業務有無將農藥隔離陳列貯存 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 5. 有無廢容器專用貯存設備 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| (四)匯票 | | | | | | 1. 受款人及兌款郵局是否符合規定 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 2. 申購日期是否超過六個月 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 審查結果及意見 | | | | | | 󠆵合格可予核發農藥販賣業執照  󠆵審查事項第 項第 款不合格  󠆵其他 | | | | | | | | | | | | | | | | | | | 備註 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 說 1.本申請表共三聯，第一聯由申請人送各縣市政府審查後留存，第二聯送各縣市公會，第三聯申請人自行留存。明 2.農藥販賣業者所聘雇之管理人員以專任為限。  3.請依據各縣市農藥販賣業執照申請及核發辦法檢附相關文件。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

第三聯