第５号様式（第５条関係）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 安全運転管理者等資格認定申請書  　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　年　　月　　日  　三重県公安委員会　様  申請者（使用者）  事業所の所在地　〒  事業所の名称  代表者の氏名  連絡先（電話番号　　　　－　　－　　　　）  次のとおり自動車運転代行業の業務の適正化に関する法律の施行に伴う道路交通法施行規則の規定の読替えに関する内閣府令により読み替えて適用される道路交通法施行規則第９条の９第１項第２号又は第２項第２号に規定する認定を申請します。 | | | | | | | | | | | | | | | 自動車の  使用の  本拠 | 事業所の名称 | | | |  | | | | | | | | | | 使用の本拠  の　位　置 | | | |  | | | | | | | | | | 電話番号 | | | |  | | | | | | | | | | 認定を受  けようと  する者 | □　安全運転管理者　　　　□　副安全運転管理者 | | | | | | | | | | | | | | ふ り が な | | | |  | | | | | | | | | | 氏　　　　名 | | | |  | | | | | | | | | | 生年月日 | | | | 年　　月　　日生（　　　歳） | | | | | | | | | | 職務上の地位 | | | |  | | | | | | | | | | 運転管理経験 | | | | * 有　　　□　無 * 期間　 　.　 .　 ～　　 . 　.　 （　 年 　月）   部署名　　　　　　　　職務上の地位 | | | | | | | | | | 運転免許関係 | | | | * 有　　　□　無   免許の種類  交付公安委員会　　　　　　　　　　　　公安委員会 | | | | | | | | | | 認定を受  けるに足  りる理由 |  | | | | | | | | | | | | | | 管理車両  台　　数 | 車　種 | | 大型 | 中型 | | 準中型 | 普通 | 軽 | 大型特殊 | 小型特殊 | 大型二輪 | 普通二輪 | 計 | | 種別 | 乗用 |  |  | |  |  |  |  |  |  |  | 台 | | 貨物 |  |  | |  |  |  | | 全 従 業  員　 数 | 名 | | | 運転免許  保有者数 | | | | 名 | | 自家用車  通勤者数 | | | 名 |   注　該当する□にチェック（レ印）をしてください。 |

　　（規格Ａ４）