

營業稅媒體申報聯絡資料(變更)單

Contact Information (Change) Form for Filing Business Tax via Electronic Media

營業人統一編號：

Business entity's Business Administration Number:

營業人名稱：

Name of business entity:

以下資料自民國\_\_年\_\_月(期)開始適用。

The following information is applicable from \_\_\_\_ (month) \_\_\_\_ (year) (business tax filing period).

項 目 Item	首次申請(變更前資料) Initial application (information prior to the change)	變更後資料 Information after the change
稅務代理人統一編號 Tax agent's Business Administration Number		
稅務代理人名稱 Name of tax agent		
聯絡電話(含分機) Telephone number (including extension)		
傳真電話 Fax		
聯絡人 Contact person		
媒體種類： Type of media：	1. <input type="checkbox"/> 進項 Input tax 2. <input type="checkbox"/> 銷項 Output tax 3. <input type="checkbox"/> 申報書、採直扣法相關附表、零稅率銷售額清單 Declaration form, related attachments list for the application of the direct deduction method, and zero-tax-rate sales	1. <input type="checkbox"/> 進項 Input tax 2. <input type="checkbox"/> 銷項 Output tax 3. <input type="checkbox"/> 申報書、採直扣法相關附表、零稅率銷售額清單 Declaration form, related attachments list for the application of the direct deduction method, and zero-tax-rate sales amount

	<p>amount list</p> <p>4. <input type="checkbox"/> 其他 Other_____</p>	<p>list</p> <p>4. <input type="checkbox"/> 其他 Other_____</p> <p>5. <input type="checkbox"/> 撤銷上開媒體種類</p> <p>Cancel the aforementioned media type:</p> <p>第<input type="checkbox"/>1, <input type="checkbox"/>2, <input type="checkbox"/>3, <input type="checkbox"/>4 項</p> <p>Item <input type="checkbox"/>1, <input type="checkbox"/>2, <input type="checkbox"/>3, <input type="checkbox"/>4</p>
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此致 To

財政部\_\_\_\_\_國稅局\_\_\_\_\_分局(稽徵所、服務處)

\_\_\_\_\_ Branch (Office or Service Station), National Taxation Bureau of \_\_\_\_\_,  
Ministry of Finance

營業人： (蓋章)

Name of business entity : (Seal)

負責人： (蓋章)

Responsible person : (Seal)

中華民國 年 月 日

\_\_\_\_\_ (month) \_\_\_\_\_ (day), \_\_\_\_\_ (year)