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To

臺北市政府消防局

Taipei City Fire Department

申請人：

(簽 章)

Applicant：

(signature and endorsement)

備註：

- 一、請附上申請人及傷病患身分證正反面影本或足資證明身分文件乙份。
- 二、郵寄請寄至「臺北市信義區松仁路1號臺北市政府消防局收」或傳真至(02)2345-6386、緊急救護科辦理。
- 三、查詢電話(02) 2729-7668 轉 6422。

Remark:

- I. Please include one photocopy of the front and backside of the applicant and the injured/patient's informed identification card.
- II. Please mail your application to "Taipei City Fire Department at No. 1, Songren Rd, Xinyi District, Taipei, 110, or fax your application to (02)2345-6386, the Emergency Medical Service (Ambulance) division for processing.
- III. Inquiry telephone (02) 2729-7668, ext. 6422.