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| **FORMULARZ ZGŁOSZENIA**  **UDOSTĘPNIENIA INFRASTRUKTURY I POJAZDÓW WORD W BIAŁYMSTOKU**  **W CELU ODBYCIA JAZD PRÓBNYCH PRZEZ KANDYDATÓW NA INSTRUKTORÓW** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CZĘŚĆ A – WYPEŁNIA WNIOSKODAWCA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Białystok, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | - | | |  | | |  | | | - | | |  | | | |  | | | | |  | | | | |  |
| **Wojewódzki Ośrodek**  **Ruchu Drogowego w Białymstoku**  **ul. Wiewiórcza 64, tel. 85 743-26-24**  **nr konta: 04 8769 0002 0390 1166 2000 0010** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *WYPEŁNIJ DRUKOWANYMI LITERAMI* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DANE OSOBOWE** | | | | | | | | | | | | | | | | | | | | | | | | | **ADRES ZAMIESZKANIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PESEL | | | | |  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | | Kod pocztowy | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | - | | | |  | | |  | | |  | | | |
| Nazwisko | |  | | | | | | | | | | | | | | | | | | | | | | | Miejscowość | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ulica | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Imiona |  | | | | | | | | | | | | | | | | | | | | | | | | Nr budynku | | | | | |  | |  | |  | |  | | |  | | | Nr lokalu | | | | | | | | | | | |  | | |  | | | |  | | |  | | |  | | | |
| Nr telefonu | | | | | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | | |  | | |  | | |  | | | |
| E-mail |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Zwracam się z prośbą o udostępnienie placu manewrowego i pojazdu[[1]](#footnote-1) w zakresie kategorii** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | | |  | |
| **Prawa jazdy w dniu** | | | | |  |  | - | |  | |  | | - | |  | |  | |  | |  | | **w godzinach** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Proszę o wystawienie faktury VAT na:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dane płatnika: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| NIP |  |  |  |  |  |  |  | |  | |  | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Oświadczam, że powyższe dane są zgodne ze stanem faktycznym. * Oświadczam, iż posiadam uprawnienia do kierowania pojazdami w zakresie kategorii udostępnienia * Oświadczam, że zapoznałem/am się treścią Regulaminu odpłatnego korzystania z placu manewrowego oraz pojazdów należącego do Wojewódzkiego Ośrodka Ruchu Drogowego w Białymstoku przez kandydatów na instruktorów w celu przeprowadzania jazd próbnych przed egzaminem sprawdzającym kwalifikacje kandydatów na instruktorów, w całości akceptuję jego treść i zobowiązuję się do przestrzegana jego postanowień.   …………………………………………………………….  (czytelny podpis osoby korzystającej z infrastruktury i pojazdów WORD w Białymstoku) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CZĘŚĆ B – WYPEŁNIA OŚRODEK** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Potwierdzam wpłatę na kwotę | | | | | | | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |  | |  | |  | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |
| Marka i rodzaj pojazdu | | | | | | | |  | | | | | | | | | | | | | | Termin jazdy próbnej wyznaczono na dzień  i godzinę | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Faktura nr | |  | | | | | | | | | z dnia | | | | | |  | | | | | | | | | | | | | | na kwotę | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| …………………………………………………………….  (pieczątka i podpis osoby przyjmującej wniosek) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1. Niewłaściwe skreślić [↑](#footnote-ref-1)