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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 机动车变更登记/备案申请表 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 号牌种类 | | | |  | | | | | | | | | | | | 号牌号码 | | | | | |  | | | | | | |
| 申请事项 | | | | 变更后的信息 | | | | | | | | | | | | | | | | | | | | | | | | |
| □变更机动车所有人姓名/名称 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □共同所有的机动车变更所有人 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □住所在车辆管理所辖区内迁移 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □变更联系方式 | | | | 邮寄地址： | | | | | |  |  |  |  |  |  |  |  | 手机号码： | | | | | |  |  |  |  |  |
| 邮政编码： | | | | | |  |  |  |  |  |  |  |  | 固定电话： | | | | | |  |  |  |  |  |
| □住所迁出车辆管理所管辖区域 | | | | 转入： 省(自治区、直辖市) 市（地、州） | | | | | | | | | | | | | | | | | | | | | | | | |
| □变更后的使用性质 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □公路客运 | | | | □公交客运 | | | | | □出租客运 | | | | | □旅游客运 | | | | | □租赁 | | □货运 | | □教练 |  |
| □营转非 | | | | □出租营转非 | | | | | □危险货物运输 |  |  |  |  | □警用 |  |  |  |  | □消防 |  | □工程救险 |  |  |  |
| □救护 | | | | □接送幼儿 | | | | | □接送小学生 | | | | | □接送中小学生 | | | | | | | □接送初中生 | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □更换发动机 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 变更后的信息： | | | | | | | | | | | | | |  |  |  |  | 机动车所有人及代理人对申请材料的真实有效性负责。 | | | | | |  |
| □更换车身/车架 | | | |  |  |  |  |  |
| □变更车身颜色 | | | |  |  |  |  |  |
| □更换整车 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □重新打刻发动机号码 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □重新打刻车辆识别代号 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □变更身份证明名称/号码 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| □加装肢体残疾人操纵辅助装置 | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 代理人 | 姓名/名称 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 机动车所有人（代理人）签字： | | | | | |  |
| 邮寄地址 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 邮政编码 | |  | | 手机号码 | | | | | | | |  |  |  |  |  |  |  |  |  |  |  | 年 月 日 | | | |  |