附件2

莆田市2024年电动自行车以旧换新活动参与企业旧车交接登记表

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **回收时间** | **车主姓名** | **身份证号** | **联系电话** | **车架号** | **车号牌****（登记或蓝牌）** | **电池类型** | **回收企业****名称**  | **回收经办人签名** | **备注** |
| 1 |  年 月 日 |  |  |   |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |