

表四
Form 4

<p>(機關全銜) 災害防救法案件舉發單 (Name of Establishment) Report for Disaster Prevention and Rescue Act Violation Cases</p> <p>中華民國○○年○○月○○日 Date: _____ 發文字號: ○○○○○○○○○○○○○○○○○ Document no.: _____</p>							
被舉發人姓名 Accused		性別 Sex		出生年月日 Date of Birth		國民身分證統一編號 ID Card No.	
地址 Address				聯絡電話 Tel.		(公) (office) (宅) (home) (行動) (mobile)	
事實 Violations committed							
理由及法令依據 Reasons and legal grounds							
通知事項 Notices		<p>本件非屬行政罰法第四十二條但書規定情事，請於接到本舉發單次日起○日內向本府（機關）（地址：○○○○○ ○）提出陳述書陳述意見；逾期未為陳述意見，依行政程序法第一〇五條第三項規定，視為放棄陳述意見機會。 Case is not subject to the proviso to Article 42 of the Administrative Penalty Act. The accused may submit a protest to the Government (name of establishment) (Mailing address: _____) within ○ days when receiving this report on the day following that day. Failure to produce written statement within the specified period shall be deemed to be a waiver of the opportunity to make statement pursuant to Article 105, paragraph 3 of the Administrative Procedure Act.</p>					
* 填單機關 * Authority	* (請填單人填寫) * (to be filled by deliverer)	* 填單人職名章 * Seal of deliverer	* (請填單人蓋章) * (to be sealed by deliverer)	* 送達年月日 * Date of delivery	* (請簽收人填寫) * (to be filled by recipient)	* 簽收人姓名 * Name of recipient	* (請簽收人填寫) * (to be filled by recipient)

首 長 ○ ○ ○
(Department Head)