**Załącznik nr 4 do OWU**

**

**CBOK**

ORLEN S.A.

ul. Chemików 7

09-411 Płock

Tel: (024) 365 22 44

Fax: (024) 367 70 90

e-mail: cbok@orlen.pl

**Zgłoszenie/odwołanie Przewoźnika**

*UWAGA: Pola w rubrykach należy wypełniać czytelnie* ***pismem drukowanym, wielkimi literami****.*

**1. Nr SAP Klienta**

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| zgłoszenie |  | odwołanie |  |  |  |  |  |  |  |  |  |  |  |  |

**2. Nazwa Klienta**

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**3. Numer NIP Klienta**

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**4. Nazwa Przewoźnika** **5. Telefon do Przewoźnika**

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**6. Numer NIP Przewoźnika**

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| **7. Lista kierowców\*** | |  | **wszyscy** |  | |
| **L.p.** | | **NAZWISKO** | | | | **IMIĘ** | | **Numer dowodu osobistego** | | | | | | | | |
| **1** | |  | | | |  | |  |  |  |  |  |  |  |  |  |
| **2** | |  | | | |  | |  |  |  |  |  |  |  |  |  |
| **3** | |  | | | |  | |  |  |  |  |  |  |  |  |  |
| **4** | |  | | | |  | |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **8. Lista pojazdów\*** | |  | **wszyscy** | |  |
| **L.p.** | | **Nr rejestracyjny pojazdu** | | | **Typ pojazdu\*\*** | | |
| **1** | |  | | |  | | |
| **2** | |  | | |  | | |
| **3** | |  | | |  | | |
| **4** | |  | | |  | | |

**\*- w przypadku dłuższej listy należy wymienić w załączniku**

**\*\* - C-ciągnik**

**N- naczepa**

**A-autocysterna**

**P-przyczepa**

……………….. ……………………………………………………….

**Data** **Firma** (pieczątka i czytelny podpis osoby upoważnionej)