WYKAZ

POJAZDÓW SAMOCHODOWYCH DO LICENCJI NA PRZEWÓZ OSÓB

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| Lp. | Marka, typ pojazdu | Numer rejestracyjny | VIN | DMC | Tytuł prawny do dysponowania pojazdem |
| Ilość miejsc |
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Ostróda, dnia ……………………. …………………………

 Podpis przedsiębiorcy