附件5

 地（州、市）新购新能源城市冷链配送货车汇总表

**地（州、市）（加盖公章）：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 联系人：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 联系电话：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 企业名称 | 车牌号码 | 车辆识别代号 | 道路运输证号 | 品牌型号 | 车辆类型 | 排放阶段 | 新能源类型 | 注册登记日期 | 补贴资金 |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| ... |  |  |  |  |  |  |  |  |  |  |

填表说明：1.“企业名称”：与营业执照企业名称保持一致。

2.“车辆类型”：请填写中型或重型