象山县科技人才金融专项资金补助申请表

申请日期： 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **企业名称(公章)** | |  | | | | | | | | |
| **开户银行** | |  | | | **帐 号** | |  | | | |
| **单位负责人** | |  | | | **联系电话** | | |  | | |
| **申请资金补助类别** | | | **□ 保证保险费 □ 保费 □ 贴息** | | | | | | | |
| **序号** | **科技贷款银行名称** | | **贷款类型** | **贷款金额（万元）** | | **保证保险费（万元）** | | | **保费（万元）** | **贴息（万元）** |
| **1** |  | |  |  | |  | | |  |  |
| **2** |  | |  |  | |  | | |  |  |
| **3** |  | |  |  | |  | | |  |  |
| **合计** |  | |  |  | |  | | |  |  |
| **申请补助金额（万元）** | | | |  | | | | | | |
| **审核意见：经审核，符合科技金融专项资金补助条件，本期贴补金额为：人民币（大写） 元。**    **（单位公章）**  **年 月 日** | | | | | | | | | | |