

Yokkaichi City Mayor

We are sending you this confirmation letter as we expect you to be eligible for the Temporary Special Benefit for new non-taxable households and households taxed per-capita only in Yokkaichi City in FY 2024.

Please check the details and then proceed with the application.

Yokkaichi City Living Support Benefits Office

Confirmation form for the new temporary special benefit for non-taxable households and households taxed per-capita only in Yokkaichi City for the FY 2024

Submission deadline: October 31, 2024 (Thursday)
Postmark valid on the same day

How to apply Please apply using one of the following methods.

Online Application Please apply online using the ID and password below.

Your ID

Input field for ID

Enter your date of birth in 8 digits (4 digits for the year + 2 digits for the month + 2 digits for the day) as your password. (For example, January 2, 1985 would be "19850102")

Benefit application form

https://area31.smp.ne.jp/area/switch/00051c0005H2HCt0KG/yokkaichi_city_hikazei_application



If you have a smartphone or tablet, you can also apply using the QR code on the right.

Application status inquiry website

https://area31.smp.ne.jp/area/switch/00051c0005H2edmEc4/yokkaichi_city_hikazei_situation



Enter the confirmation number on the above website to check the processing status. (This service is also available to those who applied by mail.)

Online application is not available for confirmation (receipt) by someone on your behalf.

- Application by mail
Confirmation form with all necessary information filled in
Photocopies of verification documents

多言語によるご案内は、右記のQRコードよりご確認ください。 关于本通知的中文版介绍，请扫描右边二维码确认。

다국어 안내는 우측 QR 코드를 통해 확인해 주십시오.

Please scan the QR code on the right to get information about this form.

Para obtener información multilingüe sobre este formulario, escanee el código QR de la derecha.

Favor escanear o código QR para obter informações sobre este documento em várias línguas.

chi tiết cụ thể bằng các ngôn ngữ khác được hướng dẫn trong đường link này(đọc mã QR)



※QRコードは(株)デンソーウェーブの登録商標です

Inquiries

Yokkaichi City Living Support Benefits Office

059-354-8241

Open hours 8:45 am - 5:00 pm Excluding Saturdays, Sundays, and holidays

Please provide your confirmation number

when you call.

1 Confirmation of the eligible person and the benefit amount

Table with 4 columns: Name, Date of birth of the eligible child, Head of household, Child bonus. Includes a row for Expected total amount.

2 Pledge/Consent

As of June 3, 2024

- 1. No member of the household is dependent on any relatives who are subject to residential tax.
2. No member of the household who has income subject to the residential tax income levy has failed to file it.
3. This household was not eligible for the subsidy for households exempt from residential tax in FY 2023 (70,000 yen) or the subsidy for households subject to only the residential tax on a per capita basis in FY 2023 (100,000 yen + an additional 50,000 yen per child), including from other municipalities.

*If any person has filed a notification of exemption from resident tax under a tax treaty, they will not be eligible for the benefit.

*If the confirmed information is incorrect, you may be asked to return the benefit received. If you are unsure whether you are considered a dependent for residential tax purposes, please check with your family. Additionally, if you intentionally make a false statement, you may be charged with fraud for improper receipt of benefits.

*If we do not receive a reply by the submission deadline (October 31, 2024), we will assume that you have declined to receive this benefit.

*If you do not wish to receive this benefit (decline), please enter ✓ in the checkbox (☐) on the right.

My household does not wish to receive this benefit. ☐

3 Confirming and signing by the recipient [Pledge and consent]

- The head of the household should confirm the pledge and consent in 2 before signing his/her name (can be signed on your behalf).
By signing your name, you are pledging and confirming that you are eligible for the benefit.

I have confirmed the contents of 2 and would like to claim the benefit. Form with fields for Date of confirmation, Signature of head of household, Furigana, and Daytime contact information.

4 How to receive the benefit

- Please enter ✓ in the checkbox of the method of receipt of your choice (a) or (b).
If neither of the checkboxes has "✓" or if they both have "✓", we will transfer the money to the public funds receiving account registered in the eligible person's name on My Number Portal or other such sites (a).
If only the checkbox for (a) has "✓" and there is account information attached that is different from account information for (a), account information for (a) will be used.

Form with two options (a) and (b) for receiving the benefit, including checkboxes and text boxes for account information.

Continued on the back

5 Designated financial institution account

Please fill in your financial institution account information and **enclose a photocopy of the passbook of your financial institution account.**

***If you have entered the financial institution account of someone other than the eligible person (head of household), be sure to fill in ⑥ and check and enclose the necessary supporting documents specified on Side C.**

If you do not have a financial institution account, please consult us.

Financial institution name		Account type		Account holder name (katakana)	
		1. Savings account 2. Checking account			
Branch code (branch number) *Other than Japan Post Bank		Account number *Other than Japan Post Bank			
Account code *Japan Post Bank		Number *Japan Post Bank			

6 If you wish the deposit to be made to your agent's financial institution account on Side B ⑤

Please place your signature below. The spouse, parents, or children of the head of the household are also considered to be agents. If your relationship to the head of the household is "Other," please enter the relationship inside the parentheses.

Signature of head of household	I hereby acknowledge the person listed below as my agent and authorize him/her to confirm and receive the Temporary Special Benefit on my behalf.		Name of head of household	
Signature of agent	Name of agent (title)	Furigana	Agent address (Location)	Daytime contact information () -
	Agent date of birth	(mm)/ (dd)/ (yyyy)	Relationship to head of household	Same household Adult guardians, etc. Other (Relationship:)

	Relationship to head of household		
	Same household	Adult guardians, etc.	Other
Those who can confirm/receive on behalf of the eligible person	<ul style="list-style-type: none"> A person listed on the same resident record as the head of the household 	<ul style="list-style-type: none"> Adult guardian Curator whose authority of representation has been granted Assistant whose authority of representation has been granted 	<ul style="list-style-type: none"> Relatives or other people who regularly take care of the eligible person

Example of how to fill out the form if you wish the deposit to be made to your agent's financial institution account

6 If you wish the deposit to be made to your agent's financial institution account on Side B ⑤

Please place your signature below. The spouse, parents, or children of the head of the household are also considered to be agents. If your relationship to the head of the household is "Other," please enter the relationship inside the parentheses.

Signature of head of household	I hereby acknowledge the person listed below as my agent and authorize him/her to confirm and receive the Temporary Special Benefit on my behalf.		Name of head of household	Taro Yokkaichi
Signature of agent	Name of agent (title)	Furigana	Agent address (Location)	XXXXXX, Yokkaichi City
	Agent date of birth	(mm)/ (dd)/ (19yy)	Relationship to head of household	Same household

Please fill out the form clearly and accurately using a black ballpoint pen. Do not use erasable pens or pencils.

Documents to be attached [Important]

Please be sure to check and enclose the necessary documents.

How to receive the benefit (designated account)	Documents to be attached
Those who have written their own account information on Side B ⑤	<ul style="list-style-type: none"> Photocopy of the identity verification document of the eligible person Photocopy of the passbook of your financial institution account *If you specify the public funds receiving account in the eligible person's name registered on My Number Portal or other such sites as the account to which the benefit is to be deposited, the above documents need not be attached.
Those who have written the account information of their agent on Side B ⑤	<ul style="list-style-type: none"> Photocopy of the identity verification document of the eligible person Photocopy of the identity verification document of your agent Photocopy of the passbook of your financial institution account *If the agent is an adult guardian, etc., attach a copy of the certificate of registered information, a copy of the judicial settlement, etc.

Photocopy of the identity verification document

① For those with Japanese nationality

*For any one of the following documents that is still valid, the part with the name and date of birth and the part with any changes

- Driver's License
- Health Insurance Card
- Passport
- Physical Disability Certificate
- Rehabilitation Certificate
- Long-term Care Insurance Certificate
- Pension Handbook, etc.
- Basic Resident Register Card (with photo)
- My Number Card (photo side only)
- *My Number Notification Card (without photo) cannot be used.

② For those who do not have Japanese nationality

*Among the documents listed below, those within the expiration date, or documents listed in ① (issued within Japan)

- Residence Card (front/back)
- Special Permanent Resident Certificate (front/back)

Photocopy of the passbook of your financial institution account The bank account specified in ⑤ on Side B

○ In the case of Japan Post Bank

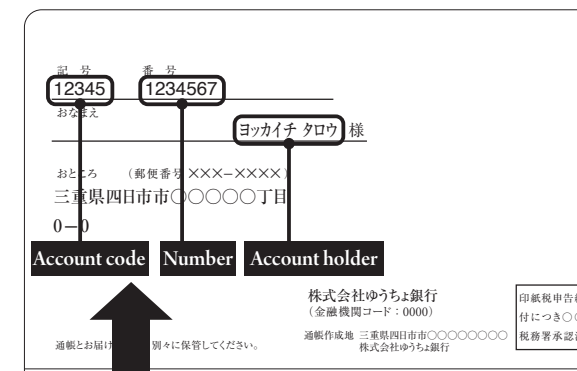
- Photocopy of passbook two-page spread (Page where you can see the "account code," "account number," and "account holder" for transfer)

○ In the case of banks other than Japan Post Bank (a photocopy of one of the following)

- Photocopy of passbook two-page spread
- If the account is without a passbook, a photocopy of the ATM card (front and back)

*If the "financial institution name," "deposit type," "account holder," "branch number," and "account number" are not printed on the two-page spread, please also enclose a photocopy of the passbook cover.

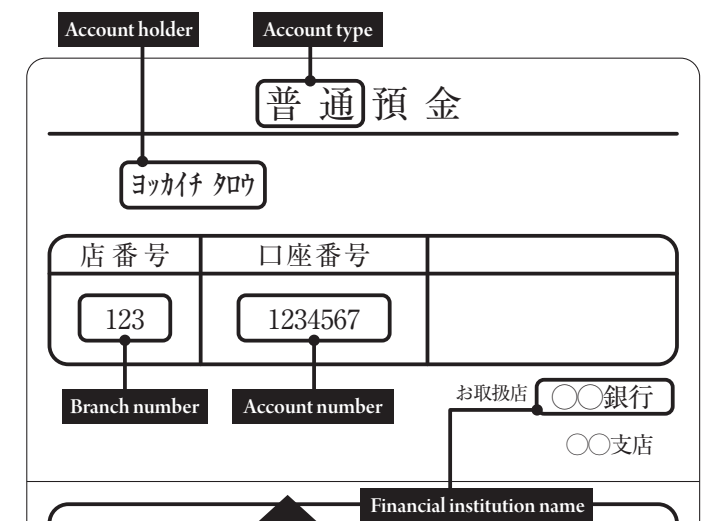
Example of a passbook photocopy (in the case of Japan Post Bank)



Please make a photocopy so that the "account code," "account number," and "account holder" are clearly visible.

- Please make photocopies of your identity verification document and the passbook of the financial institution account on A4 size paper (portrait).
- Please do not cut out the photocopied documents; fold the A4-sized photocopies in thirds or fourths, and return them in the return envelope together with the Confirmation Form.

Example of a passbook photocopy (for institutions other than Japan Post Bank)



Please make a photocopy so that the "financial institution name," "deposit type," "account holder," "branch number," and "account number" are clearly visible.