## Application Form for the Fiscal 2023 Cash Handout Program for *Kintowari* Taxpayers and Low-Income Families With Children

(100,000 yen per households subject to *Kintowari* resident tax / 50,000 yen per qualifying child )

給付市区町村 (※令和5年12月1日時点の住民票所在市区町村)				
(次7和3年12月1日时息00任民景別任中区町刊)				
彦根市長	様			

I hereby acknowledge that I have read and fully understood all the eligibility criteria and a list of consent specified on this form by checking all the boxes.

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受付印	
$\Delta$	

**Submission Date:** 

## 1. Applicant's Information (Head of Household)

(Katakana) Name	Date of Birth	Current Home Address

## 2. Household Information \*As of December 1, 2023

	Katakana						
	Name	Relations hip	Date of Birtin	Is the home address the same as the one as of Jan 1 2023?	If living in a different place, please write an address.		Child eligible for 50,000 yen
1	Applicant's Name	Applicant him//herself		□Same □Different		□Tax Exempt □Haven't done taxes yet	
2				□Same		☐Tax Exempt	
2				□Different		☐Haven't done taxes yet	
				□Same		☐Tax Exempt	
3				□Different		☐Haven't done taxes yet	
4				□Same □Different		□Tax Exempt □Haven't done taxes yet	
5				□Same □Different		□Tax Exempt □Haven't done taxes yet	

- 3. Consent \*Be sure to read the all the following conditions, and check the box only after fully understanding and agreeing to them.
- ☐ I Hereby acknowledge that I have ready, understood and fully agree to all the conditions.
- 1. Your household can meet all the following eligibility criteria for this cash handout program.
  - · Households where all household members are not subject to fiscal 2023 Shotokuwari resident tax.
  - · All your household members are NOT a dependent of someone who is subject to fiscal 2023 resident tax.
  - · None of your household members is a beneficiary of tax exemption under the tax treaty.
- 2. All your household members have done taxes properly.
- 3. Your household has not received any handout payment provided under this program yet.
- 4. By checking the box above, your household will be considered to have given consent to the city to look into your household's tax information, etc. registered with its Resident Register Network System and acquiring necessary information on your household from other authorities as part of the screening process.
- 5. By checking the box above, your household will be considered to have agreed to provide additional information to the city accordingly.
- 6. This application form will be kept by the city and treated as proof of handout payment once your household receives the money.
- 7. By checking the box above, if the handout payment cannot be provided due to any error or lack of requirements in your application, and the city cannot get ahold of the head of the household to notify him/her about it for a certain period of time, the application will be automatically considered to have been withdrawn.
- 8. The amount of the handout payment must be returned to the city immediately if false and/or misleading claims have been made to receive the money, or your household turns out not to qualify even after the money was provided.

## **4. Bank Account Information**

Date:

- \*The householder's bank account is required. Avoid registering a bank account you have not used for a while.
- \*Do not forget to submit a photocopy of the page of the bankbook showing bank account details.

*If you want to receive the handout payment in cash, please call the Hikone City Cash Handout Program Call Center.								
	Bank Name	Office Name	Туре	Account Numb		Account Holder's Name in Katakana elow must match the one printed on the bankbook/card.		
	Bank Code	Office Code	Chec king Savin gs					
	Japan Post Bank	Account Code *The 6th number goes into the box marked by  **  1  0	+ / <b>⊢</b>	Account No. Write from right to	left. *It n	Holder's Name in Katakana nust be the one registered with the bank		
:	5. Only If You Want To Appo	int Someone As You	ır Power (	Of Attorney, l	Please Fill In	The Table Below.		
Prox	Katakana Name	Relationship to the Householder	Date	of Birth		Address		
v's In			yyyy/mm/dd		Postal Code —			
Proxy's Information				7	Гel:			
•	signing, I acknowledge that I entrust the n apply for and/or to receive) my household	•		The householder is required to sign in the right box.  Householder's Name and/or Name Seal  FI				
Checklist for What to Submit *Ensure to double-check whether you have prepared all the required documents before you submit your application.  □ This Application Form For the Fiscal 2023 Cash Handout Program for Kintowari Taxpayers and Low-Income Families With Children  □ A Photocopy Of A Bankbook  *Please submit a photocopy of the page showing bank account details such as the bank name, bank account number, bank holder's name, etc.  □ A Photocopy Of The Householder's Photo Identification  *Acceptable forms of identification are a residence card, My Number card, driver's license, passport, etc.  □ A Tax Certificate Issued By The Municipality Where Your Home Address Was Registered As Of Jan 1, 2023.  *Be sure to submit tax certificates for each of your household member.								
	If you appoint someone as a poensure to submit his/her identif  A Photocopy Of A Proxy's P  * If you want to appoint one of your h  * Acceptable forms of proof of relation	ication as well as prohoto ID And Proof Cousehold members as a po	oof of relat  Of Relation  ower of attor	ionship between ship As Addit ney, no need to su	en the househousehousehousehousehousehousehouse	older and that person.  tion f proof of relationship.		
*Have You Checked Whether You Prepared All The Required Documents And Completed The Application Form With No Missing/Wrong Information? If There Is Any Error Or Lack Of Any Requirement, You May Not Be Able To Receive The Handout Payment.								
	By signing, I hereby declare that the information provided in my application is accurate.							

Householder's Name:

Tel:

\*Write the full name and/or stamp the name seal at the end if you have one.