世帯主氏名 現住所

東浦町長

東浦町電力・ガス・食料品等価格高騰緊急支援給付金支給要件確認書

HIGASHIURA TOWN ELECTRICITY, GAS, FOOD ETC. PRICE INCREASING EMERGENCY SUPPORT BENEFIT CONFIRMATION FORM

Regarding the Higashiura Town Electricity, Gas, Food etc. Price Increasing Emergency Support Benefit, based on the situation of the residential tax on the year Reiwa 4 Nendo, we would like to inform that you are eligible for the amount of grant written below.

PROCEDURE OF PAYMENT:

Bank remittance

Payment will be made on the last day of the following month after the approval date of the confirmation form.

ACCOUNT NO. Name of Bank: XXBank Branch name: OOBranch Type of account: Futsu

AMOUNT 50,000 Yen

■ The head of the household should fill in this form.

Confirmation column (Confirm the matters below and put a check inside the box (□) after confirmation.)

- All households are not a dependent of other relatives who are subject to residence tax.
- ☑ There is no person in the household who has undeclared income that is subject to residence tax.
- Mouseholds that have not received emergency assistance benefit due to soaring prices of electricity, gas, food etc.

%Limited to ①∼**3that are all checked ,corresponds to eligible person to be paid and can receive the benefit.**

(Even if one check is missing, the persn will not be eligible and will not be able to receive the benefit.)

*Person who have submitted a residential tax exemption will not be eligible for the grant.

XIIf the confirmation details are incorrect, you may be asked to return the benefit.

If you are not sure if you are dependent on the treatment of residence tax, please confirm your parents, child, family etc.

And also intentionally, if you make a confirmation of falsehood, you may be charge of fraud.

XIf you do not reply by the above deadline, the town will consider that you have declined to receive the benefit.

If you do not want to receive this benefit, please check the column on the right . [My household will not receive the benefit.]

That the above written contents are true and correct.

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monoment made				CONTACT TELEPHONE NUMBER	_

If you wish to transfer funds to an account different from the above account due to reasons such as having already cancelled the listed account or if the above account column is blank, please put a check inside the box. Instead of the account above (or in case the above account column is blank),

 $\ \square$ I would like to make a transfer to the following account.

(Copy of bank account is necessary. Please do not use an account without transactions for a long time.)

【Transfer account column】 ※Please attach a copy of financial institution account for transfer.

FINANCIAL INSTITUTION	BRANCH NAME	TYPE	ACCOUNT NUMBER ※右詰めでお書き下さい	ACCOUNT NAME (KANA) ※通帳の表記に合わせて下さい
1.銀行 4.信連 7.信漁連 2.金庫 5.農協 3.信組 6.漁協 Financial Institution Code	本·支店 本·支所 出張所 Branch Number	1普通 2当座		
YUUCHO GINKO	ACCOUNT CODE (6桁目がある場合は※欄に ご記入下さい		ACCOUNT NUMBER ※右詰めでご記入下さい	ACCOUNT NAME (KANA) ※通帳の表記に合わせて下さい
ゆうちょ銀行を選択された場合は、貯金通帳の見開き左上またはキャッシュカードに記載された記号・番号をご記入下さい。	1 0 *	$/$ Γ		

⁽注) 金融機関で口座が作れない等、どうしても口座による受け取りが出来ない方は、東浦町 (0562-83-3111)までお問い合わせください。

[In case the proxy will confirm · receive.]

代	FURIGANA NAME OF PROXY	RELATION WITH THE APPLICANT	DATE OF BIRTH (PROXY)	ADDRESS OF THE PROXY			
理	ひがしうら はなこ		明治・大正 昭和 平成	Higashiura Cho Ooaza Ogawa Aza Mandokoro 20 Banchi			
人	HIGASHIURA HANAKO	WIFE	○○ 年 〇 月 〇 日	Possible contact during day time. *** (xxxx) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\			
1	の者を代理人と認め、 語時特別給付金の <u>確認・請求</u> 受給 確認・請求及び受		ます。 元理の場合は、 5法の選択は不要です。	NAME OF HOUSEHOLDE R HIGASHIURA TAROU			

振込先金融機関口座確認書類

(Copy of bank account book or ATM card that show the name of the financial institution, account number, account name (Kana).

In case that you wish to transfer the funds to the account you have written and is different from the account stated at the upper part of front side, please submit a copy of new account for confirmation.

X In case that you will use the same account written above the front side, bank account copy is not necessary to submit.

Documents for confirmation Person itself • (**Proxy**)

*My Number Card (front page) , Driver's License, Passport copy, etc. (which one of this)*In case of proxy, attach an identification card copy of the applicant and identification card copy of the proxy.

<u>Please submit this in case that you wish to transfer the funds to a different account or</u> in case the proxy will do the confirmation (receive).