【Example】 Form1 Confirmation Form for Taxation Households Subject to Only Per Capita Resident Tax (Front)

９１５－８５３０
越前市府中一丁目１３－７
越前　太郎　様

The head of household eligible for the benefit is listed.

発行日

越前市長

【Deadline】 If you miss the submission date, you will not be eligible to the benefit.

・The account ＊ for the most recently received the benefit is listed.
＊ Only the last 4 digits of the account number should be listed.

・If there is no account corresponding to the above, this field will be left blank. In this case, the receiving account needs to be specified. Please fill in the blue box on the reverse side of this form.

越前市令和５年度住民税均等割のみ課税世帯に
支給要件確認書

貴世帯は、令和５年度の住民税課税状況に基づき、支給対象に該当するため、以下の
り支給予定額をお知らせします。
　以下の内容を確認（記入）して、令和６年８月３１日までに、本書を返送してくださ

Estimated payment amount is "100,000yen per household + the number of eligible children in the household x 50,000yen. Benefit amount will be decided after confirmation of the same livelihood by submission of this form. Please confirm the benefit amount by checking your bank account.

支 給 方 法	口座振替
支 給 口 座	○○銀行○○支店　普通　＊＊＊＊5678 エチゼン タロウ
支 給 見 込 額	＿＿２００，０００円（世帯１０万円＋対象児童１人当たり５万円）

■世帯状況の確認欄（以下の項目を確認し、チェック欄にレ点を入れてください）

- ☑ My household is a taxation household subject to only per capita resident tax.
- ☑ My household has not received support from other relatives, etc. , who are required to pay resident tax.
- ☑ No one in the household has received similar benefits from other municipalities.

Entry①
Confirm that all the requirements ,①〜③,are met and mark a ☑ for each.

※ 上記の全てにチェックがある場合に限り、支給対象として給付金が受け取れます。
※ 受給辞退は、右欄　　　　　　　　　【私の世帯は本給付金を受給しません　□】

If you **decline to receive this benefit**, put "x" in the box and send back this form.

■こども加算の確認　　　　　　　　月１日）時点で、世帯内で扶養している（生計同
一である）児童であることを確認して、生計同一確認欄にレ点を入れてください。）

Entry
(Only the household who has eligible children)

No.	加算対象となる児童氏名	生計同一確認欄	No.	加算対象となる児童氏名	生計同一確認欄
1	越前　都	☑	2	越前　紫	☑
3			4		□
5			6		□
7		□	8		□

対象となる児童がいる世帯のみ、本欄に記載があります。

・Children who meet the payment conditions are listed as of the reference date.
・Please confirm that children listed in this field are in the same livelihood and put ☑ in the box.
・Only children who are marked ☑ are eligible for Additional Child Benefit.

※ 生計同一確認欄にレ点がある児童に限り、児童１人当たり5万円を加算して給付します。
※ こども加算の受給辞退は　　　　　　　　　　　ださい。【私の世帯はこども加算分を受給しません　□】

If you **decline to receive Additional Child Benefit**, put "x" in the box and send back this form.

上記の記入内容に間違いがないことを確認しました。

世帯主氏名	越前　太郎	確認日	令和 ６年○月○日	電話番号	0*0-1234-5678

Entry②
・ The head of household is the person whose name is on the top left of the form.
・ The confirmation date is the date the form was completed.
・ Write the phone number at which you can be easily reached.

The following children are additionally eligible for Additional Child Benefit. In order to receive the benefit for the applicable child, a separate application form(Form2) must be submitted. Please confirm the details on Echizen City Home Page.
【Additionally Eligible Children】
・Children who were born after the next day of the reference date.
・Children who are not in the household but currently reside in a student domitory etc, and are supported by parents.

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Fill in only if "the payment account" field on the front is blank or if you want to change the transfer account.
＊If you do not change the account, the entries in the blue frame are not required.

In the case of ① account ⇒ Attach " **Applicant's Identification documents** ".
In the case of ② account ⇒ Mark a ☑ on your desired account among those registered in the city.
Attach " **Applicant's Identification documents** ". If you have some accounts registered in the city, fill in transfer account entry field to clarify your account information.
In the case of ③ account ⇒ Fill in your account information in transfer account entry field. Attach **applicant's identification documents** and **applicant's account confirmation documents**.

■表面の支給口座に代えて（または口座欄が空欄の場合）、次の口座への振込を希望します。
※次の①〜③のいずれかのうち、希望する振込口座に

希望口座に☑

□ ① 申請者（世帯主）名義の公金受取口座【必要書
※ 利用にはマイナポータル等から公金受取口座を

□ ② 本市で現に使用している世帯主（申請者）名義
（希望口座）□ 水道料引落口座 □ 住民税等の引
※ 上記の記入（レ点）により税部局等への口座照会

☑ ③ 申請者（世帯主）名義のその他口座【必要書類：本人確認書類・通帳等の写し】

【振込口座記入欄】 ※長期間入出金のない口座を記入しないでください

【 One of **your identification documents** 】
My Number card, driver's license card, passport, health insurance card, etc.

【 **Account confirmation documents** 】
bankbook or cash card
(The page where the financial institution name, branch name, your account number and your katakana name can be confirmed.)

金融機関名		支店名	分類	口座番号 ※右詰め記入	口座名義（カナ）
○○	1.銀行 4.信連 2.金庫 5.農協 3.信組 6.その他	○○ 本・支店 本・支所 出張所	1 普通 2 当座	4567123	エチゼン タロウ
金融機関番号 ００＊＊		店番号 ００＊			

ゆうちょ銀行	通帳記号 6桁目がある場合は ※欄に記入		通帳番号 ※右詰め記入	口座名義（カナ）
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 ※			

■世帯主に代わって代理人が確認・受給を行う場合にのみ記入してください。

代理人	フリガナ 代理人氏名	世帯主 との関係	代理人 生年月日	代理人住所	
	エチゼン キクコ 越前 菊子	妻	明・大・昭・平 50年6月1日	越前市府中一丁目13-7 電話番号 0＊0 （5678 ）1234	

上記の者を代理人と認め、 本給付金の 確認・請求 受給 確認・請求及び受給 を委任します。 ←法定代理の場合は、	世帯主 氏名	署名（又は記名押印） 越前 太郎 (印)

確認・請求(Confirmation, Request): A proxy applies on behalf of the head of household and the head of household receive the benefit.
受給(Receipt): The head of household applies and a proxy receive the benefit on behalf of the head of household.
確認・請求及び受給(Confirmation, Request and Receipt): A proxy is responsible for the entire process from application to receipt of the benefit on behalf of the head of household.

【注意事項】

Fill in the form only if you confirm and receive the benefit on behalf of the head of household.
Only the following people may confirm and receive the benefit as a proxy.

① Household memebers ② A relative , etc
③ A legal representative(An adult guardian or a conservator, etc., who has granted the right to act on behalf of the head of household.

Required additional documents when a proxy confirm and receive the benefit on behalf of the eligible head of household.
Attach identification documents both the head of household's and a proxy's.

＊ If it can be confirmed that a proxy is a youth guardian through a registration matters certificate based on the Youth Guardian Registration System, a proxy can submit a copy of the certificate in place of filling in the proxy field on the form.
＊ If it can be confirmed that a proxy is a conservator or an assistant, and a proxy has been granted proxy regarding receipt of public benefits through a registration matters certificate based on the Youth Guadian Registration System, a copy of the certificate can be substituted instead of filling in the proxy field on the form.