

【Example】

Form2 Confirmation Form for The Households Exempt from Resident Tax(Additional Child Benefit) (Front)

Red: Required
Green: Explanatory notes

越前市令和5年度住民税非課税世帯に対する支援給付金(こども加算)

- ★The Eligible households must have received the benefit(additional benefit)(70000yen per household) for households exempt from resident tax for 2023.
- ★This application form is for the households who have eligible children outside the household or the households who have children born after the next day of the reference date. (After receiving the benefit(Additional Benefit), children identified by the city as of the reference date are individually notified.
- ★ The deadline of this benefit is August 31, 2024

また、【誓約・同意事項】(本紙裏面)を全て確認し、誓約・同意の上、申請します。

Entry②

Fill in the name , etc of children applying for Additional Child Benefit.

| | | |
|--------------|----------------|------------------------------|
| 申請日 | 令和 6 年 〇 月 〇 日 | |
| 申請者 (世帯主) | フリガナ | エチゼン タロウ |
| | 氏名 | 越前 太郎 |
| | 現住所 | (〒915- 8530) 越前市府中一丁目13-7 |
| | 連絡先 | 0*0 (1234) 5678 |

Entry①

Fill in the head of household on your certificate of residence as of December 1, 2023.
The applicant(the head of household) may differ from the person who is actually responsible for supporting the children .

児童の状況

○この申請における「児童」とは、基準日(令和5年12月1日)時点において、世帯内で扶養(同一生計である)している18歳以下(平成17年4月2日生まれ以降)の者を指します。ただし、基準日の翌日以降に出生した児童を含みません。

| | (フリガナ) 児童氏名 | 申請者 との続柄 | 生年月日 | 児童の状況 | 生計同一 確認欄 |
|---|--------------------|-------------|--------------------|--|-------------------------------------|
| 1 | エチゼン イチロウ 越前 一郎 | 子 | 平成 令和 21年 5月15日 | <input checked="" type="checkbox"/> 同一世帯でないが扶養している(別居監護等) <input type="checkbox"/> 基準日(令和5年12月1日)の翌日以降に出生 | <input checked="" type="checkbox"/> |
| 2 | エチゼン ハナコ 越前 花子 | 子 | 平成 令和 6年 1月14日 | <input type="checkbox"/> 同一世帯でないが扶養している(別居監護等) <input checked="" type="checkbox"/> 基準日(令和5年12月1日)の翌日以降に出生 | <input checked="" type="checkbox"/> |
| 3 | | | 平成 年 月 日 | <input type="checkbox"/> 同一世帯でないが扶養している(別居監護等) <input type="checkbox"/> 基準日(令和5年12月1日)の翌日以降に出生 | <input type="checkbox"/> |
| 4 | | | | <input type="checkbox"/> 同一世帯でないが扶養している(別居監護等) <input type="checkbox"/> 基準日(令和5年12月1日)の翌日以降に出生 | <input type="checkbox"/> |
| 5 | | | 令和 | <input type="checkbox"/> 同一世帯でないが扶養している(別居監護等) <input type="checkbox"/> 基準日(令和5年12月1日)の翌日以降に出生 | <input type="checkbox"/> |

Entry③

Please mark a on the status of a child.
• In the case of having dependent children who are not in the same household(separate custody etc, a petition must also be submitted.

Entry④

Please confirm that children listed in this field are in the same livelihood and put in the box.

*Children with different livelihoods are not eligible.

振込口座 ※次の口座のうち、本給付金の振込を希望する口座にレ点を入れてください。

- ① 越前市令和5年度住民税非課税世帯に対する支援給付金(追加給付)の受給口座
- ② 申請者(世帯主)名義の公金受取口座
※ 利用にはマイナポータル等から公金受取口座を登録している必要があります。
- ③ 下記の現に使用している申請者(世帯主)名義の口座
(希望する口座) 水道料引落口座 住民税等の引落口座 児童手当等の受給口座
※ 上記の記入(レ点)により税部局等への口座照会を承諾したものとします。
- ④ 申請者(世帯主)名義のその他口座
【振込口座記入欄】 ※長期間入金のない口座は指定しないでください。

Entry⑤

Please mark a on your desired transfer account.
*Please specify the account in the applicant's(the head of Household) name.

| 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) ※通帳のカナ表記に合わせて下さい |
|-----------------------------------|-----------------------|----|-----------------|------------------------------|
| 〇〇 ①銀行 5農協 2金庫 6漁協 3信組 7信漁連 | 〇〇 本支店 本・支所 出張所 | 普通 | 1234567 | エチゼン タロウ |

【Transfer Account】

- In the case of ① account ⇒ Attach "Applicant's Identification documents "
- In the case of ② account ⇒ Attach "Applicant's Identification documents "
- In the case of ③ account ⇒ Mark a on your desired account among those registered in the city.
Attach "Applicant's Identification documents ".
*A registered account that is not in the name of the head of household may not be used.
If you have some accounts registered in the city, fill in transfer account entry field to clarify your account information.
- In the case of ④ account ⇒ Fill in your account information in transfer account entry field.
Attach applicant's identification documents and applicant's account confirmation documents.

【Example】Form2 Application Form for Households Exempt from Resident Tax(Additional Child Benefit)(Back)

【誓約・同意事項】 ※必ず全ての項目を確認してください。

My household meets the requirement* to receive the support benefit(Additional Child Benefit) for households exempt from resident tax for 2023. *In order to be eligible to receive the benefit(additional Child Benefit), you are required to meet all conditions below.

- ① ·All household members must be registered as residents in Echizen City as of the reference date, December 1, 2023.
·All household members must be exempt from resident tax for 2023 based on income from January to December ,2022.
· All members of the household are not receiving support from the tax payer(relatives , etc.) in 2023.
· No one in the household has reported exemption from tax under tax treaties.
· Eligible households must have dependent children(under 18 years old, born in April 2,2005 and after) within the same household.

- ② No one in the household has received similar benefit(50,000yen per eligible child) from other municipalities.

- ③ I agree that the City may confirm necessary information such as basic resident register information or tax information, or request or provide other administrative agencies , etc. necessary materials to examine whether the requirements for payment of support benefit(Additional Child Benefit) are met. If the information cannot be confirmed by public record,etc. the relevant documents will be submitted.

- ④ I agree that this application form (including attached documents)will not be returned.

- ⑤ I agree that , after the city has made a payment decision, if payment is not completed for reasons such as failure to transfer benefit due to incomplete application forms, and the city is unable to contact or confirm the applicant, the benefit(Additional Child Benefit) will not be paid.

- ⑥ If, after the payment of benefit(Additional Child Benefit), any information in this application is found to be false , or if it is found that the applicant does not meet requirements for the payment of benefits, the benefit(Additional Child Benefit) will be returned.

Please be sure to verify and agree to the following before applying.

提出書類



『令和5年度住民税非課税世帯に対する支援給付金(子ども加算)申請書』(本書)

※ 必要事項をご記入ください。

This Form



“ A copy of applicant’s(the head of household) identification document “

* Please prepare one of a copy of the applicant’s driver’s license, health insurance card, My Number card(My Number notification card is not accepted.), pension book, nursing care insurance card, passport, etc.



“ A copy of document to confirm applicant’s receiving account” (Only the person whose receiving account is ④,“Other accounts in the name of the applicant(the head of household)” on the front side, is eligible.)

*Please prepare one of a copy of your bankbook or cash card to confirm financial institution’s name , account number and account holder of the receiving account.



“A petition”(Form2 separate sheet) (In the case of having dependent children who are not in the same household(separate custody,etc.)

Do not forget to attach required documents.

※記入漏れや、添付書類の不備がないか申請前に再確認してください。
(記入漏れや添付書類の不備がある場合、給付が遅くなる又は給付が受けられ

If the applicant would like to apply to include dependent children who are outside household(in the same livelihood) ,the submission of a petition is also required.

【公金受取口座が未登録の方】

マイナンバーカードがあれば、マイナポータルから簡単に公金受取口座を登録いただけます。

※ 登録は本給付金の支給要件ではありません。

※ 公金受取口座の登録は、利用可能になるまで数日かかる場合があります。



Additionally, the submission of "A letter of attorney"* is required, if you apply on behalf of the head of household.

Only the following people may apply as a proxy.

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

*The details of proxy application and examples of a letter of attorney is posted on the special page of Echizen City Support Benefit.

*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 Guardian Registration System, a copy of the certificate can be substituted instead of filling in the proxy field on the form.