

〈郵便番号〉
 〈住所〉
 〈借受人姓〉〈借受人名〉

〈貸付コード〉
 〈バーコード〉

Saitama Prefectural Council of Social Welfare
 Repayment and Exemption of COVID-19 Special Loan Section

Special loans such as emergency small amount funds due to the impact of the COVID-19 pandemic
Notice of Repayment Balance and Application for FY2024 Repayment Forgiveness

for ‹‹ 資金名称 ››

【Notice of Repayment Balance of Special Loans for Emergency Small Amount Funds】

We hereby inform you of the current repayment balance (as of the creation reference date) of ‹‹ 資金名称 ››, which is currently in its repayment period, as shown below. Please note that the repayment balance may differ if any repayments have been made after the creation reference date.

In addition, those who were subject to inhabitants tax in FY2023 can apply for repayment forgiveness in FY2024 if they meet the requirements. For details, please refer to the enclosed information booklet and submit the application form on the right.

Details

[Creation reference date: ‹‹ 令和 yy 年 mm 月 dd 日 ››]

Fund Name	‹‹ 資金種類 ››
Borrower's Name	‹‹ 借受人姓 ›› ‹‹ 借受人名 ››
Loan Code	‹‹ 貸付コード ››
Loan amount	‹‹ 貸付額 ››
Repayment period	‹‹ yy 年 mm 月 ››
Repayment start date	‹‹ 償還開始日 ››
Repayment deadline	‹‹ 償還期限日 ››
Amount already repaid	‹‹ 償還済額 ›› yen
Outstanding amount to be repaid	‹‹ 償還残額 ›› yen
Amount in arrears out of the outstanding amount to be repaid	‹‹ 滞納額 ›› yen

◆ Documents sent this time (enclosed items)

- ① Notice of Repayment Balance and Application for FY2024 Repayment Forgiveness, and Application form for repayment forgiveness (this document)
- ② "Special loans for which repayment forgiveness will be applied in FY 2024" information booklet *Please see P.4 for instructions on how to fill out the application form.
- ③ Return envelope

[For Applications and Inquiries]

**Saitama Prefectural Council of Social Welfare,
 Repayment and Exemption of COVID-19 Special Loan Section**

[Telephone Number] 050-2018-1839

[Reception Time] Weekdays 9:00 am to 5:00 pm

https://www.fukushi-saitama.or.jp/site/problem_33.html



Application Form for Repayment Forgiveness for Special Loans for Comprehensive Support Fund

For <<資金名称>>

* Please fill in all fields in the bold frame.

Type of fund	<<資金名称>>		
Borrower's Name	<<借受人姓>> <<借受人名>>		
Loan amount	<<差し込み>> yen	Amount of exemption applied for	Maximum amount of repayment forgiveness for the type of fund in question
Reason for exemption application	I am exempt from both per-capita and per-income inhabitants tax.		

Household status * Please indicate your household status by adding a <input checked="" type="checkbox"/> to any one of the following	<input type="checkbox"/> I (the borrower) am currently the head of the household <input type="checkbox"/> Someone other than the borrower is currently the head of the household, and the current head of the household was in a separate household from the borrower at the time of loan application <input type="checkbox"/> A person other than the borrower is currently the head of the household, but I (the borrower) cannot obtain an income certificate for the head of the household as I have evacuated due to domestic violence, etc.	<input type="checkbox"/> If none of the statuses on the left applies to the borrower
	Required documents * Prepare the documents and add a <input checked="" type="checkbox"/> to the box	All three documents below are required <input type="checkbox"/> Exemption application form (this document) <input type="checkbox"/> An original of the certificate of residence showing all members of the current household (Bearing the name of the head of the household and relationship to the head of the household) <input type="checkbox"/> An original of the borrower's FY 2024 certificate of inhabitants tax exemption * Which states that the borrower is exempt from both the "per-capita" and "per-income" portions of inhabitants tax

To the Chair of the Saitama Prefectural Council of Social Welfare I agree to the following six items and hereby apply for an exemption.

- ① If repayment forgiveness is approved, I agree to my personal information being provided to a self-reliance support consultation agency for the purpose of utilizing it in the performance of the organization's duties.
- ② I agree to my personal information being provided to third parties to the extent necessary for this program.
- ③ I agree that the Saitama Prefectural Council of Social Welfare may query the National Council of Social Welfare, other prefectural councils of social welfare, municipal councils of social welfare, local governments, public employment security offices, self-reliance support consultation agencies, household financial improvement support organizations, and other related organizations to receive my personal information to the extent necessary for this program.
- ④ Neither I nor any members of my household are members of an organized crime group. I agree that the Saitama Prefectural Council of Social Welfare may request, as necessary, information from government and other public offices pertaining to my, or my household members', membership in an organized crime group. (Organized crime group is defined in Article 2, Item 2 of the "Act on Prevention of Unjust Acts by Organized Crime Group Members," as "An organization that is likely to encourage its members (including members of the organization's constituent organizations) to engage in violent unlawful acts, etc. collectively or habitually.")
- ⑤ I agree that if repayment forgiveness is rejected as a result of the screening, the reason for the rejection will not be disclosed.
- ⑥ I have not changed the head of the household for the purpose of receiving repayment forgiveness. I also agree that the repayment forgiveness will be revoked if any of the information in this application is found to be false or if any of the requirements for repayment forgiveness are found to be not applicable after the decision for repayment forgiveness has been made.

/ / * Write the date you filled out this form * Please sign your name exactly as it appears above.

Borrower's Name (Signature) _____

Borrower's Name (Signature) _____

Telephone Number: - _____ * Provide a telephone number where you can be reached during the day.

* The information below is not to be filled by the applicant.

*	Fund Code	Loan Code	Receipt No.	Saitama Prefectural CSW Reception	Barcode <<差し込み>> Fund Code <<差し込み>>
	SX	<<差し込み>>		/ /	