

国民健康保険被保険者異動届(あて先)岐阜市長

世帯コード

Grid for household code

Main application form including fields for date of submission, applicant information, address, and contact details.

Table listing family members with columns for name, birth date, gender, relationship, and insurance status.

備考 (Remarks) section containing insurance certificate return information and national insurance ID number.

Table detailing insurance certificate delivery methods and conditions for different categories of insured persons.

Vertical list of receiving offices (受付) such as 西部, 東部, 北部, etc.

備考 氏名を自署する場合には、押印を省略することができる。