Y M D

Application for Moving-out Notification

To Mayor of Gifu City

Name and address of person completing this form		
Full Name	Relationship	Daytime contact information (TEL)
		☐ Home ☐ Mobile ☐ Other ( )
Address		Apartment or building name ( )

※If you are not an applicant or a member of household, You need a power of attorney.

Date that the person(s) above moved , or scheduled date of move	Y M D	
New Address ☐ Same as requester's address		Head of Household
Previous Address 岐阜市		Head of Household

【Person who is moving out】※Please write down the full names of all individuals who are moving out.

	Full Name	Date of Birth Y M D	Gender	Relationship	Card
1		Y M D	M・F		☐
2		Y M D	M・F		☐
3		Y M D	M・F		☐
4		Y M D	M・F		☐
5		Y M D	M・F		☐

☐ I would like to move out using my individual My Number Card.

・As no certificate of moving out will be issued in this case, no reply envelope or stamp is required.

・Please complete the process of moving in at the local government of your new address within 14 days from the day you move in. You will need your individual My number card and a 4-digit PIN number for the procedure.

【Enclosure】(Please enclose the following articles with this application form)

☐ A copy of the applicant indentification document

Photo ID ☐ Yes・・・1item Driver's license, Residence card, Passport, and other

☐ No ・・・2 or more Item Health insurance eligibility confirmation document, Pension book, etc.

☐ Self addressed stamped envelope (SASE)

(A stamped self address ed envelope. If you wish to use your Individual My Number Card for moving out, it is not necessary.)

☐ National Health Insurance eligibility confirmation document (Issued by Gifu City)

Remark [ ]