


Change of Address Notice

* Fill in the fields framed by thick line and bring this form with valid identification to the counter

Reason of Address Change	1. Move-in (from other municipality) 2. Move-out (to other municipality) 3. Move (within the city)
	4. Change of Head of Household New / Old 5. Separation of Household 6. Union of Household 7. Change of Household Composition

Date Submitted	MM/DD/YYYY
Date Moved	

Submitter		Phone reachable during daytime — —	1 Principal (Mover) 2 Former Household Member 3 Spouse / Sibling / Lineal Relative (Except No.2) 4 Other	Submitter's Address
	* If the submitter is the mover, sealing is omissible.		Home / Office / Mobile	

New Address	Apartment (Building) Name						Householder			Place of Work:	

Mover's Name	Hiragana	Relationshi	Re	Hiragana	Relationsh	Re	Hiragana	Relationship	Re	Have National Pension?	Yes / No
	1			2			3			Have Elementary or Junior High School Student?	Yes / No
										Have Preschool child?	Yes / No
	Hiragana	Relationship	Re	Hiragana	Relationship	Re	Hiragana	Relationship	Re	Have 65-years-old and above?	Yes / No
	4			5			6			Have Expectant or Nursing Mother?	Yes / No
										Have Certification of Long-term Care Need?	Yes / No

Previous Address <small>(Change of Address only)</small>	Apartment (Building) Name						Householder			Have Child Allowance / Child-rearing Allowance?	Yes / No
										Have Physical Disability Certificate / Intellectual Disability Certificate?	Yes / No
										Multiple Nationality Household?	Yes / No
										Have Basic Resident Card?	Yes / No

異動者氏名	ふりがな	続柄	ふりがな	続柄	ふりがな	続柄	同居人承認欄 私は、()を同居人として認める。 世帯主 (印)
	1		2		3		
	ふりがな	続柄	ふりがな	続柄	ふりがな	続柄	
	4		5		6		

事務処理欄											
受付	照合	区分	全部・一部	方書マスタ	有・無	住民票	有・無	本人確認	免許証	保険証	パスポート
			編入・発生	新築確認	済・未	印鑑登録	有・無		年金手帳	年金証書	住基カード(B)
		備考							その他()	調査	