Application Process



Fill out and submit the application

Review these contents and fill out the required sections. Enclose the below "Required Documents" along with the application form.



Verification

The City of Yokosuka will verify your application. If there are any errors on your application, it may be sent back to you.

• It may be determined that the applicant does not qualify for the benefit.



Payment of the benefit

If it is determined that the applicant qualifies, the benefit will be transferred to the bank account designated in your application. Once your application has been received, the transfer will be processed after about four weeks.

You will not receive a notification about the payment of the benefit, so please check your bank account to see if the benefit was transferred.

• Be aware that a missing document could lead to a late payment.

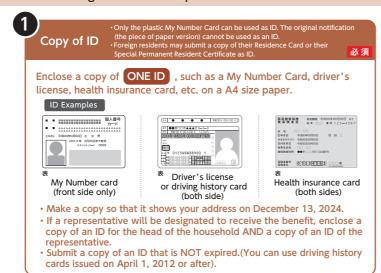
Deadline

The application must be postmarked by Friday, May 30, 2025

Required Documents • The benefit will not be granted if the required documents are not submitted.

1 and 2 are REQUIRED.

Enclose copies of documents verifying the identity of the head of household (applicant) and the bank account for the transfer.





Scan the code to view English HP

Copy of proof of bank account Enclose a copy of **ONE** of the following on a A4 size paper. The account holder MUST be the head of the household or the representative designated in your application bank book Japan Post If you do not have a bank book and must submit a copy of a cash card, please make sure that this copy displays the full name associated with the account(including any middle names, etc).

Inquiries in English for the Temporary Special Benefit

Come to the Temporary Special Benefit Help Desk[臨時特別給付金窓口] on the first floor of City Hall Or call the Temporary Special Benefit Call Center **6 0 1 2 0 - 9 3 4 - 5 7 3**

HOURS: Weekdays 8:30-17:00

Scan barcode for more information.

横須賀市 非課税世帯等給付金 検索

How to Complete Application Form

Head of household (designated person to receive the benefit)

Read the "Pledge and Terms of Agreement" and then write your name, the date of application, and a daytime phone number.

Read statements 1 and 2 and verify the content.

A household will be considered eligible ONLY IF ALL statements

1 and 2 are applicable.

(If any of the statements is not applicable, your household is not eligible and you will not receive the benefit).

Bank account information

Write your bank information here. The account must belong to either the head of household or their representative. (Please do not submit an account which has not been used to make deposits or withdrawals for a long time).

Additional Benefits for Households with Children

If you have any children that would make your household eligible for additional benefits, please confirm the contents of the table on the right. Please add any children born on or after December 14, 2024.

If you wish to designate a representative

Complete this section if you wish to designate a representative. The head of household must clearly write their own name by hand (this serves as a signature). There are three options you can choose for your representative: "1. Confirm and Request," "2. Receive," "3. Confirm, Request, and Receive." Please check one of these boxes to indicate which responsibilities you delegate to your representative.

1 Head of household (designated person to receive the benefit) I hereby declare the following information is true and correct. I have confirmed and agree to the Pledge and Terms of Agreement. ヨコスカ タロウ Name of head of household 横須賀 太郎 written by head of household Date of application 令和 00 年 00 月 00 日

Read and verify the following statements 1 and 2.

Contact Phone number 000 - 000

OThe household is not composed solely of individuals who are dependent on others who are subject to resident tax for the 2024 fiscal year.

OThere is no one in the household who has income subject to resident tax for the 2024 fiscal year, but has not yet filed a return.

·A household will be considered eligible ONLY IF ALL

statements ① and ② are applicable.

(If any of the statements is not applicable, your household is not eligible and you will not receive the benefit).

nformation Name of representative

If your application turns out to be incorrect, you may be required to return the benefit. For Resident Tax for the fiscal year 2024. if you are not sure whether you are a dependent, please check If you are not sure whether you are a dependent, please check with your parents, children, or other family members. Furthermore, if you intentionally make a false entry, you may be charged with fraud for unfair receipt of benefits. A "dependent" refers to someone who is declared a financial dependent on tax returns, year end tax adjustments, etc.

·If you have reported exemption from resident tax for the fiscal year 2024 due to a tax treaty, you are not eligible for the benefit.

Deadline: if the application form is not POSTMARKED by Friday, May 30, 2025, or if the form is incomplete and the necessary corrections are not made by the date specified

(続柄:

2 Bank account information

- • In principle, the account must belong to the head of household designated in [] Head of household
- (unless you must designate a representative).

 Enclose a copy of proof of the account with your application
- · Please do not submit an account which has not been used to make deposits or withdrawals for a long time, because it may not be able to accept wire transfers.

Account holder savings 1 0 - ** If you choose a Japan Post Bank account, please enter the code and nu book or on your cash card.

②Transfer to Bank Account other than Japan Post Bank

Account holder name				
Bank name		3.信組)(5.農協)(7.信漁連) 4.信連)(6.漁協)	Branch name	(本·支店)(出張所) (本·支所)
Account type	Bank code	Branch code	Account number	
(Savings) (Checking)				

If you are unable to receive payments via bank account due to unavoidable circumstances, such as not being able to open an account at a financial institution, come to the first floor of City Hall for help in English at the Temporary Special Benefit Help Desk(鹽時特別給付金窓口), or contact the Yokosuka Temporary Special Benefit Call Center (0120-934-573).

3 Additional Benefits for Households with Children

Households with children 18 years old or younger are eligible for an additional 20,000 yen per child.

- Children who are 18 years old or younger (born on or after April 2, 2006) and were a member of the household on December 13, 2024, are listed in the table below. Please add any children born on or after December 14, 2024. If any children are dependents of a different household, you will need to submit a notification form. Please come to the first floor of City Hall for help in English at the Temporary Special Benefit Help Desk(臨時特別給付金窓口), or contact the Temporary Special Benefit Call Center (0120-934-573).

	Name	Date of Birth		Name	Date of Birth
1			6		
2			7		
3			8		
4			9		
5			10		

Read and verify the following statements (a) and (d).

None of the children listed in the table are living in a facility and have not updated their Certificate of Residence. Gall of the children listed in the table were dependents of the head of the household on December 13, 2024.

If either of these statements do not apply to your household, you may not be eligible for any additional benefit or the additional benefit amount may change. Please come to the first floor of City Hall for help in English at the Temporary Special Benefit Help Desk[臨時特別給付金窓口], or contact the Temporary Special Benefit Call Center (0120-934-573) to inquire.

4 If you wish to designate a representative

Representative's name	フリガナ	Relation to head of household	Representative's date of birth Phone number	yyyy/mm/dd
Representative's address	〒 - 都道 府県			
is my rep	nfirmed that the person I list- resentative, and I delegate the onfirm and Request $\boxed{\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ }_2$ Receivonfirm, Request, and Receive. resentatives do not need to ch	nem to	Head of household	Signature (write name clearly)

If a legal representative is applying on your behalf, the necessary documents may differ depending on their relationship with the head of household, please come to the first floor of City Hall for help in English at the Temporary Special Benefit Help Desk(臨時特別給付金窓口), or contact the Temporary Special Benefit Call Center (0120-934-573).

Pledge and Terms of Agreement

- *Read the entire following Pledge and Terms of Agreement and then sign section 1 of the application form
- If the information I provide cannot be confirmed by the basic resident register information, tax information, or other public records, etc., I will submit the relevant documents.
- ② I agree that if, after the City of Yokosuka has made a payment decision, payment is not completed for reasons such as inability to transfer funds due to incomplete confirmation, and the recipient (designated party, etc.) cannot be contacted or confirmed by the date specified by the City of Yokosuka, the benefit will not be paid.
- **3** I agree that if after the payment of the benefit, it is found that any of the information in the application form is false or otherwise does not meet the eligibility requirements for the payment of the benefit, I will return the benefit to the City of Yokosuka.
- **4** I understand that there may be an unavoidable delay in payment due to issues such as incomplete documentation.
- **3** No members of my household were eligible to receive from any other municipalities any "temporary special benefit for households exempt from resident tax."