

Application for Copy of Resident Register

To: Mayor of Kanazawa City

① Whose resident card do you require? (month) (day), Reiwa (Year)

Address			
Katakana reading		Date of birth	(month) (day), (Year)
Name			
Names of other people if you are applying for part of the household			
<Purpose / Addressee> <input type="checkbox"/> Driver's license <input type="checkbox"/> Pension application <input type="checkbox"/> Purchase of a car, etc. <input type="checkbox"/> Registration <input type="checkbox"/> Public organization <input type="checkbox"/> Immigration bureau, embassy, etc. <input type="checkbox"/> Other organization	Resident register (<input type="checkbox"/> Deletion of residence)	Entire household: copy (copies)	Yen
		Part of household: copy (copies)	Yen
	Certificate of entries on resident register		Yen
	Notification of resident register code		
			Yen
	【Total fee】		

② Who has come to submit the application? [Tel — —]

Address	<input type="checkbox"/> Same as in ① above
Name	<input type="checkbox"/> Same as in ① above

<input type="checkbox"/> The person himself/herself or a member of the household <input type="checkbox"/> Authorized representative <input type="checkbox"/> National or regional government <input type="checkbox"/> Other (Please provide details about the relationship with the applicant and the reasons for application)

*If you are applying on behalf of the applicant, a letter of attorney is necessary. Please use the following section or prepare a separate letter of attorney.

For trust	I will select the person specified in ② above as my attorney and entrust him/her with the power of application and receipt of the copy of my resident register.		
	Applicant	Address	
		Name	seal

Note: You will be punished according to the law if you receive a copy of your resident register through falsification or other unfair means.

受付		記載事項	<input type="checkbox"/> 無し <input type="checkbox"/> 続柄 <input type="checkbox"/> 全記載	(日本人) <input type="checkbox"/> 本籍	<input type="checkbox"/> 個人番号 <input type="checkbox"/> 住 <input type="checkbox"/> コ <input type="checkbox"/> 備考
			<input type="checkbox"/> (外国人) <input type="checkbox"/> 国籍・地域等 <input type="checkbox"/> 第 30 条の 45 区分 <input type="checkbox"/> 在留カード番号等 <input type="checkbox"/> 在留資格等 <input type="checkbox"/> カタカナ表記 <input type="checkbox"/> 通称履歴		
本人確認		免・個・住 B・旅・保・障・在・職・聴・他 ()			資・補