

# Notification of Special Cash Benefit

Based on the Shizuoka City Special Cash Benefit (hereafter, Special Cash Benefit) Implementation Guidelines, all residents who are listed on the Basic Resident Register of Shizuoka City as of 27<sup>th</sup> April 2020 will be compensated ¥100,000 per person.

In order to receive the benefit, application must be made by the deadline of 7<sup>th</sup> September 2020.

If the Application Form for Special Cash Benefit on the right-hand page is not submitted, you will not be able to receive the Special Cash Benefit.

## How to fill out the application form [Example] ※For application by householder

特別定額給付金 申請書兼請求書

お問い合わせ番号

申請日 令和2年6月1日

1 世帯主 (申請・受給者)

住所 静岡市葵区追手町5番1号

フリガナ シズオカ タロウ 生年月日 昭和53年1月1日

氏名 静岡太郎 連絡先 054-221-0000

私は裏面の「誓約・同意事項 (1) ~ (6)」に誓約・同意の上、特別定額給付金を申請します。

2 振込先金融機関

下記の金融機関口座 (申請・受給者ご本人名義の口座に限る) への振込を希望します。

金融機関名	支店名	分類	口座番号 (お振込先を必ずご確認ください)
あおい	追手町	1	2 3 4 5 6 7

口座名義人 (カナ) シズオカ タロウ

※ゆうちょ銀行を選択する場合は、「銀行コード9900」、「振込用の店名・店番・預金種目・口座番号 (7桁) (通帳見開き下部に記載)」をご記入ください。

3 給付対象者 特別定額給付金を希望されない方は、お名前を二重線で消してください。

氏名	生年月日	氏名	生年月日
静岡太郎	昭和53.1.1		
静岡清美	昭和55.2.2		
静岡清太郎	昭和58.3.3		

4 代理申請・受給を行う場合 代理申請ができる方についての説明は、裏面をご確認ください。裏面の「誓約・同意事項 (1) ~ (6)」に誓約・同意の上、署名 (又は記名捺印) してください。

代理人氏名	代理人生年月日	代理人住所
	大正、昭和、平成 年 月 日	

申請者 (受給者) との関係 代理人連絡先

1. 同一世帯 2. 法定代理人

3. その他 (具体的に記載: )

上記の者を代理人と認め、特別定額給付金の申請書兼請求書・受給を委任します。

世帯主氏名

裏面に必要書類 (本人確認書類、振込先口座確認書類など) を添付してください。

### Precautions for filling out the application form

Precautions for filling out the application form

- Use a black pen to fill out the form.
- Write in large, bold print. ※The application cannot be processed if there are mistakes on the form.

1. Fill out the date of application.

2. Fill out the name (signature) or stamp the seal.

3. Fill out a daytime contact phone number where you can be contacted.

4. Fill out the bank account details of the householder (applicant/recipient).

5. Cross out the names of family members who wish to waive the receipt of the Special Cash Benefit with double lines.

6. If the householder is filling out the application, leave this box empty.

※Explanations on who can apply in proxy can be found on the back of this sheet.

7. Attach the relevant documents to the back of the application form.

※Check that all information is correct, then post in the return envelope included (no stamp required).

※Please keep this form in a safe place until the benefit has been deposited into your account, as you will need it when calling for inquiries and until the benefit has been deposited into your account.

Application Deadline (Mon.) 7<sup>th</sup> September 2020 (valid if postmarked)

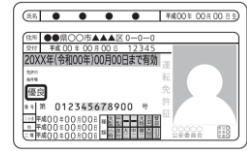
[Inquiries] Shizuoka City COVID-19 Consultation Line  
0570-08-0567 Everyday 9:00~20:00

Please read the [Frequently asked questions] section on the back for more details.

Form of Identification of Householder (Applicant)

◎One of the following forms of identification must be attached.

- Driver's License
- My Number Card
- Health Insurance Card
- National Health Insurance Card
- Medical Insurance Card for Elderly over 75
- Pension Passbook
- Resident Card
- Alien Registration Card
- Special Permanent Resident Certificate



- (1) If the householder is applying: a copy of a form of ID of the householder
- (2) If a proxy is applying: a copy of a form of ID of the householder, a copy of a form of ID of the proxy, and some form of document that proves the relationship between the householder and the proxy.

※Attach a copy of the section where Name and Date of Birth can be confirmed.

※If an expiry date exists on the card, use a card that is still valid.

Bank Account details for Deposit Transaction

◎One of the following items must be attached

- a copy of your bank passbook
- a copy of your cash card
- a copy of your internet banking page



※Attach a copy of the page where the bank name, branch name, account number, account holder(in Katakana) can be confirmed.

Who qualifies as a proxy

Those who can apply as a proxy are limited to those who fulfill the criteria below.

- (1) He/she is a member of the household of the householder (applicant/member who qualifies to receive the special benefit) as at 27th April 2020.
- (2) A legal proxy (an adult guardian, curator or assistant who have been granted the right of proxy through trial, etc.)
- (3) A relative of the family or someone who looks after the householder (applicant/member who qualifies to receive the special benefit) on a regular basis, etc. whom Shizuoka City recognizes. Residents suffering from dementia or senior citizens living in senior welfare rest homes also apply. Depending on the case, documents that need to be submitted and items to be confirmed differ depending on the case, so please inquire with the Shizuoka City COVID-19 Consultation Line (0570-08-0567).

Information from Shizuoka Chuo, Shizuoka Minami, Shimizu  
Police Stations & Shizuoka City

Watch out for Cash Benefit Fraud!

If you feel something is suspicious, do not hesitate to consult.



Shizuoka Chuo Police Station (Aoi ward)	054-250-0110
Shizuoka Minami Police Station (Suruga ward)	054-288-0110
Shimizu Police Station (Shimizu ward)	054-366-0110
Shizuoka City Consumer Center	054-221-1056

## Frequently asked questions on the Special Cash Benefit

## [Information on Special Cash Benefit]

Q1. Why is a special cash benefit being granted?

A1. As a part of the COVID-19 Emergency Economic Measures (decided by the Cabinet 20<sup>th</sup> April 2020) while paying caution to the prevention of the spread of infection, it has been decided that ¥100,000 will be paid to everyone, equally, in order to support households promptly and accurately through a simple mechanism.

Q2. Who qualifies as a recipient for the cash benefit?

A2. Those who are registered with the Basic Resident Registration System as of 27<sup>th</sup> April, 2020.

## [Information on How to fill out the application form]

Q3. If the householder signs the application form, can the stamp seal be omitted?

A3. Yes, the stamp seal can be omitted if the form is signed.

Q4. Can the cash payment be deposited into any account?

A4. The account holder into which the cash payment is deposited must be the same as the householder.

- The cash payment cannot be deposited into the account of anyone other than the householder (spouse, child, company, etc.)
- Please provide the bank account details of the proxy who is applying instead(excludes legal proxy).

Q5. Is it necessary to attach a copy of my bank passbook and cash card with the application? If so, why?

A5. • It is necessary to submit a copy of the passbook so that the account details of the account that the benefit will be deposited into can be confirmed.

- If the passbook or cash card has a stamp on it, the cash card has a credit card function on it with the credit card number, please color those sections black before sending in the copy.
- Please do not send the original copy of your passbook or cash card.
- If you do not hold a bank account with any financial institution, please inquire with the Shizuoka City COVID-19 Consultation Line (0570-08-0567) for what to do.

Q6. I'm concerned that there is a high risk that my personal information will be leaked from the application form and bank details included in the attached documents.

A6. Personal information such as account details, etc. for the application of the special cash payment by residents will be used solely for the purpose of the benefit payment, and will be strictly managed then disposed of.

Q7. What should I do if I make a mistake filling out the form? How can I correct it?

A7. If you make a mistake on the form, draw two lines through it and rewrite it.

## [How to submit the application form]

Q8. Can I submit the application form directly to the office at the city hall?

A8. Please post the application by mail in the return envelope provided (no stamp required). Please cooperate in the prevention of spreading the virus.

## [Information on the payment]

Q9. When will it be deposited into my account?

A9. Once the application has been reviewed, a postcard of notification will be posted to you before the benefit is deposited.