**税務証明書交付申請書（郵送用）Request Form for Tax-related Certificates**

（あて先）小松市長To: Mayor of Komatsu　　　　Date:　　　　 年(yyyy)　　 月(mm)　　　 日(dd)

* **申請人　Applicant**

|  |  |  |
| --- | --- | --- |
| 現住所Current Address |  | |
| (前住所 Prior Address) | 石川県　小松市　　　　　　町(-machi/cho)　　　　　　番地(-banchi) | |
|  |  | 生年月日Birthdate(yyyy/mm/dd) |
| 年　　 月　　 日 |
| 昼間の連絡先 Daytime Phone No. | 自宅Home・携帯HP・勤務先Work　（　　　　　）　　　　　　－ | |

* **どなたの証明書が必要ですか Whose certificates are needed?** (leave blank if requesting your own)

**代　理　人　選　任　届 Notification of Appointment of Representative**

（あて先）小松市長 To: Mayor of Komatsu　　　Date 　　　年(yyyy)　　　月(mm)　　　日(dd)

I hereby appoint the requester above as my representative in handling the request and collection of the certificates indicated on the back of this form.

|  |  |  |
| --- | --- | --- |
| 住所〈所在地〉Address |  | |
| 〈名称 title〉 | ㊞ | 生年月日 Date of Birth（yyyy/mm/dd） |
| 年　 　月　　 日 |
| (前住所 Prior Address) | 石川県　小松市　　　　　　町(-machi/cho)　　　　　番地(-banchi) | |

* **使用目的 Purpose (what are you requesting the certificate(s) for?)**

|  |
| --- |
|  |

* **証明書の種類を選び、必要事項を記入して下さい Fill in the details for certificates required**

|  |  |  |
| --- | --- | --- |
| 1. **所得課税証明書**   **Income Tax Certificate**（reflecting income, taxable income & Resident Tax amount）  ※Select items you wish to omit, if applicable:  　□　所得控除の内訳、市・県民税課税金額  Breakdown of income tax deductions, Resident Tax amount  　□　市・県民税課税金額 Resident Tax amount | （　　　　　）年度  fiscal year  （　　　　）年中  calendar year  （　　　）枚 copies | |
| 1. **課税（非課税）証明書**   **Tax Declaration/Tax Exemption Certificate** (reflecting Resident Tax amount) | （　　　　　）年度 fiscal year  （　　　）枚 copies | |
| 1. **納税証明書 Certificate of Tax Payment** (choose fromア～オ）   **※you may be required to produce receipts etc. for recently paid taxes**  ア　市・県民税 Resident Tax　イ　固定資産税 Fixed Assets Tax  ウ　国民健康保険税National Health Insurance Tax  エ　軽自動車税 Light Vehicle Tax (category based)  オ　法人市民税 Corporate Resident Tax（ref month:　　月決算） | （　　　　　）年度 fiscal year  （　　　）枚 copies | |
| 1. **完納証明書 Certificate of Settled Tax Payment** (proof of no outstanding city taxes) | | ( )枚copies |
| 1. **車検に必要な納税証明書** Certificate of Tax Payment for vehicle inspection   【ナンバーlicense no.:　石川　　　　　　　　　　　】 | | （　　　）枚  copies |
| 1. その他証明書Others（　　　　　　　　　　　　　　　　　　　　　　　　　　）   **【同封するもの Please check that all of the following are enclosed】**  □申請書　Request form  □切手を貼った返信用封筒 Self-addressed return envelope with stamp attached  □定額郵便小為替Postal order for application fees/“Teigaku Kogawase”（Amount:　　　　円分 yen）  □申請人の本人確認できる書類の写しCopy of applicant’s identification document (zairyuu card etc.) | | ( )枚copies |

**Take Note when Filling in the Following Sections**

* **申請人 Applicant**
* 証明書請求者の住所、氏名、生年月日を記入してください。（申請人の分が必要な場合で、以前、小松市に居住していた方は、その時の住所も記入してください。）Please fill in the address, name and birthdate of the person requesting the certificate(s). (If the applicant is requesting their own certificates, and have moved out of Komatsu City, they should enter their previous Komatsu address as well.)
* 日中に連絡可能な電話番号を記入してください。Please provide a phone number that is contactable in the day.
* **どなたの証明書が必要ですか Whose certificates are needed?**
* 証明書が必要な方（納税義務者、物件の所有者等）の住所、氏名、生年月日を記入の上、押印してください。（以前、小松市に居住していた方は、その時の住所も記入してください。）The person whose certificates are being requested (tax payer, property owner etc.) should fill in their own address, name and birthdate, and press their own seal (those who have moved out of Komatsu City should enter their previous Komatsu address as well).
* 代理人選任届書に押印できない場合、別紙で委任状を添付してください。If you are not able to provide a seal for the “Notification of Appointment of Representative”, please draft and attach a Letter of Authorization as well.
* 法人の分が必要な場合、所在地、名称を記入の上、代表者印を押印してください。If certificates for a corporation (legal entity/organization) are being requested, please enter the corporation’s address and name, and press with the corporate representative’s seal.
* **使用目的 Purpose**
* 証明書の使用目的、提出先等を記入してください。 Please enter the purpose of the certificates and who they will be submitted to etc.
* **証明書の種類を選び、必要事項を記入してください Fill in the details for certificates required**
* 提出先によって証明書の名称が異なる場合があるので、注意してください。The name of the certificates (i.e type of certificate) differs according to who you are submitting the certificates to, so be sure to request the correct certificates.
* １～３は必要な年中又は年度を記入してください。（注意：令和7年度所得証明書は令和6年中（令和6年1月～令和6年12月）の所得の内容です。申請書には令和6年中と記入してください。）For items 1~3, please enter the relevant calendar AND fiscal year. (Note: In general, all applicants should enter “Reiwa 7” for fiscal year and “Reiwa 6” for calendar year. Income Tax Certificate for the fiscal year of Reiwa 7 reflects the income details for the calendar year of Reiwa 6, i.e Jan-Dec 2024.)
* １で所得控除額の内訳の記載が不要な場合、□にチェックしてください。For item 1 (Income Tax Certificate), please check the first box if you do not require the breakdown of income tax deductions to be included.
* ３は必要な税目を選んでください。For item 3 (Certificate of Tax Payment), please select the required taxes.
* ５は車両番号を記入してください。Please enter the license plate number for item 5 (Certificate of Tax Payment) for vehicle inspection

**Items required when applying by mail**

**≪Table of Fees≫**

|  |  |
| --- | --- |
| 証明の種類 Type of Certificate | Application Fee（yen） |
| 1. 所得課税証明書　１枚 Income Tax Certificate (/copy) | 300 |
| 1. 課税証明書 １枚 Tax Declaration/Exemption Certificate (/copy) | 300 |
| 1. 納税証明書１年度１枚 Certificate of Tax Payment (/copy per fiscal yr) | 300 |
| 1. 完納証明書　１枚 Certificate of Settled Tax Payment (/copy) | 300 |
| 1. 車検用納税証明書Certificate of Tax Payment for vehicle inspection | 無料 Free |
| 1. その他証明書 Other certificates | 300 |

* 申請書 Request Form
* 切手を貼った返信用封筒

Self-addressed return envelope with stamp attached.

* 手数料分の定額小為替

Postal order covering certificate application fees (pay at post office, according to fees on the right 🡪).

　※you cannot use stamps for this

・申請人の本人確認できるものの写し

Copy of applicant’s ID (e.g driver’s license, health insurance card)

**Mail applications/enquiries to:**

Taxation Division

Komatsu City Hall

91 Konmade-machi

Komatsu City, Ishikawa Pref

923-8650

TEL 0761-24-8029