	Disaster Damage Notification & Certification Form
Sample	<u> </u>
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For properties other than inhabited houses

To the Mayor of Komatsu City(あて先)小松市長

Date (y/m/d): 2024年 1月 4日

Applicant (person requiring certification	Address 住所又は所在地	〒 923 — △△△△ Komatsu-shi, ○○-machi, ○-chome, ○○banchi
for damages incurred) 申請者	Name 氏名又は名称 (representative)	Lucy Smith
証明が必要な方 (被災された方)	Birthdate 生年月日	1970 年 9 月 20 日 (year) (month) (day)
	TEL 電話番号	0761 - 456 - 789

I request certification of my notification of the damages detailed below:

Cause of damage 被災原因	Noto Earthquake on 1 Jan 2024			
Location of damage 被災物の所在地又は被災し た場所(アパート名等)	小松市 Doihara 町 304 月 1 番地 Komatsu-shi -machi -chome banchi (Name of building etc. ) □ Same as applicant address 申請者住所と同じ			
Type of property 被災物の種類	☑Building 建物 □Structure (fence, carport etc.) 構築物 □ Land 土地 □ Personal effects (cars, household goods etc.) 動産 □ Othersその他(			
Relation to damaged property 被災物の所有区分	☑ Owner 所有者 ☑ User 使用者 □ Others その他(   )			
State of damage 被災の状況	**Do not include human cor damage costs  Tick just "Owner" if renting out property,			
Supplementary documents (*optional) 添付書類(※任意)	☑ Photos of damage 被害の状況がわかる写真 □ Map and layout of property 物件の位置図及び配置図 □ Others その他( )			
Additional Notes 備考				
(leave below blank)(以下	、市記入欄) 【Continues on next page	]		

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上記のとおり届け出があったことを証明します。

第

年 月 日

小松市長

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## [Important Notes]

- This certificate serves as proof of notification to the city hall of damage status. It cannot be used as proof of degree of damage, or as damage certification.
- This certificate holds no authority in matters of civil rights and duties.

XPlease fill in the authorization letter behind if a representative is coming on behalf of the applicant.

## ▶ Method & location of certificate collection 証明書を受け取る方法・場所 □ Post 郵送【to applicant's address detailed on front page 表面記載の申請者の住所地又は所在地へ送付】 □ Post 郵送 【to representative in authorization letter 委任状の代理人宛へ送付】 ☑ Collect at service counter 窓口での受け取り Method & location of □ Post 郵送【to dif certificate collection Immediate collection possible at service counter 証明書を受け取る Ŧ 方法•場所 (Building name & unit no. 方書: Letter of Authorization Fill in this section if someone other than a family member from the **◆** Details of representative coming to service counter same household is Address 住所 Furigana フリガナ Name 氏名 月 Date: Birthdate 生年月日 Year: 年 Month: В Relation to applicant 委任者との関係 TEL 電話番号 I hereby appoint the above representative to submit disaster damage notification and collect the disaster damage notice certificate on my behalf.

To the Mayor of Komatsu City(あて先)小松市長

Date (y/m/d): 年 月 日

■ Applicant (requiring certification for damages) 申請者:証明が必要な方

Address 住所又は所在地 Name 氏名又は名称(代表者)