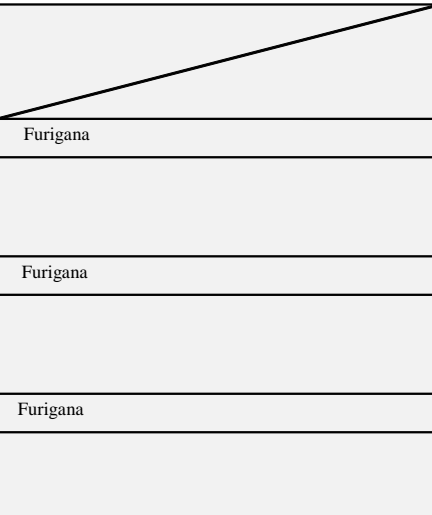


Comprehensive Support Fund Special Case Loan Application Form

Receipt number		Received		Municipal Council of Social Welfare	Reiwa	Y	M	D	
				Prefectural Council of Social Welfare	Reiwa	Y	M	D	
Applicant	Furigana	Stamp/sign	Gender	<input type="checkbox"/> M <input type="checkbox"/> F	Date of birth	Taisho · Showa · Heisei Y M D (_____ years old)			
	Full name					Phone number (contact number)			
	Furigana	Zip code		Landline:					
	Address			Cell phone:					
	Workplace or occupation			Work address	Zip code		Tel: ()		
Members of applicant's household	Full name		Relationship	Age	Date of birth		Workplace /school name, etc.		
	1			Applicant	(Note) Taisho = T, Showa = S Heisei = H, Reiwa = R				
	2			Furigana	Husband / Wife / Child / Father / Mother / Other	T · S · H · R Y M D			
	3			Furigana	Husband / Wife / Child / Father / Mother / Other	T · S · H · R Y M D			
	4			Furigana	Husband / Wife / Child / Father / Mother / Other	T · S · H · R Y M D			
Other		People							
Reason for loan									
Requested loan amount	Monthly loan amount	Yen		Total loan amount		Yen			
	Duration of loan	Reiwa		Y	M	to	Reiwa	Y	M
Deferral period	<input checked="" type="radio"/> A. 12 months B. Other: () months			Repayment period		<input checked="" type="radio"/> A. 120 months B. Other: () months			
	Financial institution	Branch name		Account type		<input type="checkbox"/> Regular (futsu) <input type="checkbox"/> Checking (toza)			
Loan to be paid to	Account no.	Account holder (in katakana)							
Usage record of emergency petty cash fund special case loans	<input type="checkbox"/> A. I have used this loan (loan amount ___yen) <input type="checkbox"/> B. I have not used this loan								
To the Chair of the Tokyo Council of Social Welfare, ○ I agree to the points below and wish to apply for a comprehensive support fund special case loan as above. ○ After receiving this loan, I will endeavor to swiftly become self-reliant. ○ I am not currently receiving social welfare benefits. ○ I am not currently in the process of applying for personal bankruptcy. ○ This loan will not be used as working capital for business. ○ No other members of my household are taking out this special case loan. ○ I consent to the sharing of any personal information that I provide with third parties to the extent necessary for this system. ○ I consent to your Council of Social Welfare making inquiries of and providing my personal information to relevant organizations, such as the National Council of Social Welfare, other prefectural Councils of Social Welfare, local governments, Public Employment Security Offices, independent consultation support organizations, and household finances consultation support organizations, to the extent necessary for this loan. ○ Neither I nor any member of my household are members of a gang, nor will we become members of a gang for the duration of this loan. I consent to your Council of Social Welfare requesting the provision of information pertaining to me or a member of my household in connection with a gang from government authorities as necessary. {A “gang” refers to “a group that may foster collective or habitual violent and illegal acts, etc. by members of said group (including members involved in the organization of the group),” as in Article 2, Paragraph 2 of the Act on Prevention of Unjust Acts by Organized Crime Group Members (Act no. 77 of 1991).} ○ If my loan is disapproved after a loan review, I consent to the reason not being disclosed.									
Reiwa		Y	M	D	Applicant _____ (stamp/sign)				