

# 委任状 Letter of Authorization

年year 月month 日day

This letter of authorization must be filled out entirely by the authorizing person using a non-erasable pen.  
When preparing the form using a computer, be sure to sign in the space for the authorizing person's name.

**必要な証明にチェックを入れ、必要通数を記入してください。**  
**Please check the required certificates and enter the necessary number of copies.**

所得証明書Income Certificate ( )通copies  課税(非課税)証明書Certificate of Taxation (or Non-Taxation) ( )通copies

納税証明書Tax Payment Certificate ( )通copies  完納証明書Certificate of Full Payment ( )通copies

\* 納税証明が必要な場合は税目に○をつけてください。

If a tax payment certificate is required, please mark the applicable tax items.

税目 Tax Item: ( 法人市民税Corporate (Resident) Tax \* 市県民税Individual Resident Tax (or Municipal/Prefectural Resident Tax) \* 固定資産税Fixed Asset Tax (or Property Tax) \* 国民健康保険税National Health Insurance Tax \* 軽自動車税Light Vehicle Tax )

評価証明書(評価額)Certificate of Assessment (Assessed Value) ( )通copies

公課証明書(税額・評価額)Certificate of Public Charges (Tax Amount / Assessed Value) ( )通copies

住宅家屋証明書Certificate of Residential Building ( )通copies

名寄帳(課税台帳)Tax Roll/Tax Register ( )通copies

その他Others ( ) ( )通copies

※必要な物件の所在地Location of the required property

土地 land /property

家屋 house/building

伊賀市 Iga City

伊賀市 Iga City

<b>委任者</b> <b>(依頼する方)</b> <b>Principal</b> <b>(the person making the request)</b>	住所Address
	氏名(署名)Full Name (Signature)
	生年月日 Date of birth      年year      月month      日day
	電話 Tel.no.      -      -
	昼間連絡がつく連絡先を記入してください。 Please provide a contact number that can be reached during the day.
	※委任状の内容確認のため連絡する場合があります。 There may be cases where we contact you to confirm the contents of the letter of authorization.

私は、下記の者を代理人として選任し、上記の証明の交付申請及び受領に関する権限を委任します。

I hereby appoint the following person as my representative and delegate the authority to apply for and receive the above-mentioned certificate.

<b>代理人</b> <b>(窓口に来られる方)</b> <b>Representative</b> <b>(the person who will come to the counter)</b>	住所Address
	氏名Name
	生年月日Date of birth      年year      月month      日day

**※裏面の注意事項を必ず確認してください。**  
**please Be sure to check the notes on the back.**

1. 受任者(窓口に来られる方)は、本人確認書類を提示してください。  
(公的機関発行の顔写真付きの本人確認書類は1点確認、顔写真が無いものは、2点での確認が必要です。詳しくはお問い合わせください。)  
The authorized person (the one coming to the service window) must present identification documents.  
(One official photo ID issued by a public agency is sufficient; if there is no photo, two forms of identification are required. Please inquire for more details.)
2. 不正に作成された委任状の行使は、刑罪の対象となります。(刑法第159条、第161条)  
Using a fraudulently created letter of authorization is subject to criminal penalties.  
(Criminal Code Articles 159 and 161)
3. 記載内容に不備がある場合は受付できません。  
Applications with incomplete or incorrect information will not be accepted.
4. 委任状は必ず委任者自筆の原本が必要です。コピーや写真では受付できません。  
The letter of authorization must be the original handwritten document by the principal.  
Copies or photos will not be accepted

# 委任状(記入例) Letter of Authorization (example)

〇〇年year 〇〇月month 〇〇日day

This letter of authorization must be filled out entirely by the authorizing person using a non-erasable pen.  
When preparing the form using a computer, be sure to sign in the space for the authorizing person's name.

**必要な証明にチェックを入れ、必要通数を記入してください。**  
Please check the required certificates and enter the necessary number of copies.

所得証明書Income Certificate ( )通copies  課税(非課税)証明書Certificate of Taxation (or Non-Taxation) ( 2 )通copies

納税証明書Tax Payment Certificate ( 2 )通copies  完納証明書Certificate of Full Payment ( )通copies

\* 納税証明が必要な場合は税目に○をつけてください。  
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税目 (法人市民税Corporate (Resident) Tax 市県民税Individual Resident Tax (or Municipal/Prefectural Resident Tax)  
Tax Item: \* 固定資産税Fixed Asset Tax (or Property Tax) \* 国民健康保険税National Health Insurance Tax  
\* 軽自動車税Light Vehicle Tax)

評価証明書(評価額)Certificate of Assessment (Assessed Value) ( )通copies

公課証明書(税額・評価額)Certificate of Public Charges (Tax Amount / Assessed Value) ( )通copies

住宅用家屋証明書Certificate of Residential Building ( )通copies

名寄帳(課税台帳)Tax Roll/Tax Register ( )

その他Others ( ) ( )

※必要な物件の所在地Location of the required property  
土地 land /property 家屋 house/building  
伊賀市 Iga City 伊賀市 Iga City

<b>委任者 (依頼する方) Principal (the person making the request)</b>	住所Address <i>Mieken Iga City Shijuku Machi 〇banchi 〇〇mansion 〇room no.</i>
	氏名(署名)Full Name (Signature) <i>Iga Jirou</i>
	生年月日 Date of birth <i>2000年year 01月month 01日生day</i>
	電話 Tel.no. <i>000 - 0000 - 0000</i>
	屋間連絡がつ Please provide a contact num ※委任状の内容確認のため連絡する場合があります cases where we contact you to con 委任者の氏名は必ず本人の 直筆で署名してください。 Please make sure principal's name is signed by
	私は、下記の者を代理人として選任し、上記の証明の交付申 I hereby appoint the following person as my representative and delegate the authority to apply for and receive the above-mentioned certificate.

<b>代理人 (窓口に来られる方) Representative (the person who will come to the counter)</b>	住所Address <i>Mieken Iga City Ueno Marunouchi 〇banchi 〇〇apartment 〇room no.</i>
	氏名Name <i>Ninja Tarou</i>
	生年月日 Date of birth <i>1990年year 5月month 1日生day</i>

※裏面の注意事項を必ず確認してください。  
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