Application Requesting Support Measures Regarding the Clerical Handling											反訓	R】
	of the Basic Resident Re					0 0			Municipality		Received	Communi- cation
											/	1
	(00	I hereby request that support measure regarding the clerical handling of the lead to receive protect domestic violence and/or stalking, etc.					pepu /				1	/
The Mayor of	f						Forwarded				1	1
	the re							E[year]	月[month]	日[day	1	,
	(Name	-[year]	73 funquini	□ [uay		ites
Applicant	Name					Contact		_ 6				
	(Date of birth)		Address			infor- mation		Identity verification				
Perpetrator (if identity is known)	,	(年[year] 月[month] 日[day])	Address									
	Name (Date of					Misce- llaneous						
	birth)	(年[year] 月[month] 日[day])				iiaiieous						
Condition of applicant (please check one of the following)	on the Prevention of Spousal Violence and the Protection of Victims, and the victim is at risk of fit the victim is at risk of either losing their life or receiving bodily harm from harassment, etc. Furthermore, there is a							further, a risk t	repeated stalking, hat the perpetrator(s) w			
Additional documents (please check the documents that apply)		Written decision of a protection order (copy)				Miscellaneous						
		Written warning, etc., that has been executed in accordance with the Anti-Stalking Act										
	(If the applicant is consulting with police or a spousal violence consultation assistance center, etc., please list the date and time of consultation, name of the police station, etc., and section in charge, etc., to the best of your knowledge)											
	年(year) 月(month) 日(day) (Organization consulted:) (Section in charge:)			
Support measures that are requested (limited to items that list your current address)	Please check the desired	ase check Clerical items you desire support measures			Current address, etc.							
	items	to be implemented for			Current							
		Inspection of the Basic Resident Registration			address		Same as above					
		Issuance of a copy of Resident Record, etc. (for current address)			Curren address		Sa	Same as above				
		Issuance of a copy of Resident Record, etc. (for previous address(es))			Previou address(e							
		Issuance of a copy of supplementary record of family register (registered domicile)			Registered domicile							
		Issuance of a copy of suppleme register (for previous registe		tary record of family	Previou registere domicile(ed						
Other individuals also requesting assistance		Relationship to Name applicant		Date of birth		p to	Name		Date of birth			
	арріісаі	II.			applican	ı						
(limited to individuals						+						
residing at the same												
address)												
(riease IIII ou	t the following if you have no additional documents to present) 1 We hereby certify that the conditions stated by the aforementioned applicant are true and Date											
	correct. 2 We hereby certify that the other individuals requesting a				accictano	a ac ctat	ad ahova ara als	0				
Opinions given by police, etc.	in need of assistance provided to protect the applicant.					z, as stat	eu above, ale als		Person(s) in charge	÷		
	3 For cases where the aforementioned 1 and 2 do not apply, we provide the following Counterpart											
		description of circumstances that have been specifically identified by the police, etc. ("the granting of temporary protection, period of consultation, etc.).										
	in need of assistance provided to protect the applicant. 3 For cases where the aforementioned 1 and 2 do not apply, we provide the following description of circumstances that have been specifically identified by the police, etc. ("the granting of temporary protection, period of consultation, etc.). [Circumstances that have been identified:											
	「平成 年[year] 月[month] 日[day]											
	Chief: (Seal) (Section: Office in charge:)											
tes								<u> </u>	1			
Notes												

(Caution)

- Please fill out the items contained within the thick lines.

 When applying, the applicant will have to undergo identity verification.

 Regarding application, there are cases where its contents will be verified with police, etc.

 After support measures are implemented, even in cases where the applicant is requesting issuance of a copy of their own Resident Record, etc., the applicant will be required to provide documents to verify his/her identity.
- Support measures cannot be used to prevent such requests that are deemed to be performed for legitimate purposes (such legitimacy is determined based on a rigorous screening process).
 The period that such assistance is provided will be limited to 1 year after support measures commence. Applications to renew support measures can be accepted from 1 month
- before the expiration date of the support measures. If no application is received, assistance will end at the expiration date of the support measures. ullet If changes occur to the contents of the application, please re-apply at the municipality you first applied at.