

BY MAIL

Notification of move-out

(incl. an application for issuance of move out certificate)

To the mayor of Machida

Request date	令 . .	Applicant	Name	
Moving date	令 . .		Contact No.	※Day phone No. ()
New Address				
Previous Address	Machida-city	Head of household		
	Names of those who are moving		Date of Birth	Sex
1			Year /Month/Date . .	M · F
2			Year /Month/Date . .	M · F
3			Year /Month/Date . .	M · F
4			Year /Month/Date . .	M · F

EXAMPLE

Date you start residing in the new address.

Name of person moving

※Please directly sign here

Request date	令 Y · M · D	Applicant	Name	TURNER ELIZABETH
Moving date	令 Y · M · D		Contact No.	※Day phone No. ○○○ (△△△△) □□□□
New Address	Kanagawa, Sagamihara Chuo-ku, Chuo △chome Xban □gou Sagamihara Apartment ○○○			
Previous Address	Machida-city	Head of household	Morino 2chome 2ban 22gou ○Xapart 1 0 1	
	Names of those who are moving		Date of Birth	Sex
1	ターナー	ジョン	Year /Month/Date 1985 · 12 · 31	(M) · F
2	ターナー	エリザベス	Year /Month/Date 1984 · 11 · 22	M · (F)
3	ターナー	トム	Year /Month/Date 2015 · 6 · 4	(M) · F
4	Write all the names who are moving			M · F

Documents required to be mailed

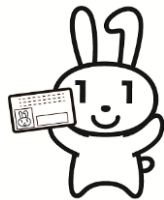
① Notification of move-out

(incl. an application for issuance of move out

Notification of move-out

(incl. an application for issuance of move out certificate)

(BY MAIL)



② Copy of personal identification documents

Residence card
町田 一郎
昭和○年△月□日
東京都○○市～

健康保険被保険者証
(Health insurance card)
町田 一郎
昭和○年△月□日

年金手帳(Pension book)
町田 一郎
昭和○年△月□日

★ Please submit a copy of any personal identification documents indicated in (A). In case (A) is unavailable, you can substitute with 2 documents from (B), or 1 each from (B) AND (C) instead.

(A) Government-issued identification with your photo.
Residence card (Zairyu card), Passport, Individual Number Card, Physical Disability Notebook, Driver's license, etc.

(B) Government-issued identification without your photo.
Health insurance card, Pension book, Long-Term Care Insurance Card, etc.

(C) Corporation-issued identification.
Employee ID, Student ID, Hospital card, Bank book, Credit card, etc.

※ If you are submitting Health insurance card, cover the ID numbers up.

▷ Return envelop with a stamp

Return envelop

Stamp □□□-□□□□
××県○市△町□番地
Machida Ichiro

Addressee's name must be same as the moving applicant.

This will be used to send you the move-out certificate (free of charge). Write the moving applicant's name and address, and the stamp (84yen) MUST

【The address】*The move-out certificate can only be sent to either of the addresses

Before move-out : Previous address (in Machida city)

After move-out : New address

*The name on the envelope must be the

※ If you would like to receive your move out certificate at new address, we will mail you after the moving date.

Mailing address	〒194-8580
	2-2-22, Morino, Machida-city
	Machida City Hall
	Mailing reception, Resident register, Civil section.

Please note that we will not be able to process your moving-out unless the documents above are provided.