

様式1号 (第5条関係)

堺市ウクライナ避難民支援一時金支給申請書 (現金)

Application Form for Sakai City Ukrainian Refugee Cash Assistance (for cash handover)

Year Month Date

堺市長 殿 (To Sakai City Mayor)

申請者住所 (Applicant's address) _____

氏名 (Name) _____

電話番号 (Phone no.) _____

堺市ウクライナ避難民支援一時金について下記の通り申請します。

I, hereby, apply for the Sakai City Ukrainian Refugee Cash Assistance as described below.

また、堺市ウクライナ避難民支援一時金支給要綱第3条に規定する要件を満たしていることを申し立てます。なお、虚偽の申請その他不正の手段により支援一時金を受給したときは、当該支援一時金を返還することを誓約します。

I declare that I meet the conditions under Article 3 of the Sakai City Ukrainian Refugee Cash Assistance. I vow to return the full amount in the case that I falsely or illicitly apply for the cash assistance.

記

1 避難民氏名 (List of refugees)

氏名 (Name)	続柄 (Relationship with the recipient)	備考 (Notes)

2 避難民住所 (Refugees' address)

3 添付書類 (Documents to be attached)

- (1) 在留資格を証するもの (Copies of proof of residence status for all those listed above)
- (2) 住所地を証するもの (Copy of proof of address for all those listed above)
- (3) その他市長が必要と認める書類 (Other documents deemed necessary by the mayor)

4 支給を受ける金額 (Amount to be provided)

¥ _____ ※第4条関係 控除額 ¥ _____

※Amount to be deducted.

(Please be notified that in case you have received cash assistance from the government of Japan as well, you may be obliged to return part or all of the Sakai City cash assistance, depending on the amount you received from the Japanese government)