

Notification of Incorporation/ Establishment of a Company

Receipt stamp

Month day, 20XX To: Mayor of City, Town or Village We hereby notify new incorporation/ establishment of a company.		* Reference number		
		(Phonetic transcriptions in katakana) Address of a head office or a principal place of business		Zip code _____ Building name, etc. _____ Telephone number: () -
		Place of tax payment		Zip code _____ Telephone number: () -
		(Phonetic transcriptions in katakana) Name of company		
		Corporate number		
		(Phonetic transcriptions in katakana) Name of representative		[Seal]
		Representative's contact address		Zip code _____ Telephone number: () -
(Phonetic translation in katakana) Addressee <input type="checkbox"/> Address of head office <input type="checkbox"/> Address of representative Contact address <input type="checkbox"/> Other		Zip code _____ Building name, etc. _____ Telephone number: () -		
Date of incorporation/ establishment		Month day, 20XX	Business year	Starting on Month day and ending on Month day
Amount of capital or money invested		¥ _____	Existence or nonexistence of a disposition (approval) of extension of the due date of a local tax return	Enterprise tax Yes No for a period of XX months starting on XX business year
Amount of capital etc.		¥ _____	(Statement unnecessary)	Inhabitant tax Yes No for a period of XX months starting on XX business year
Business purpose	(Those stated in the Articles of Incorporation, etc.)		Total number of employees _____	Number of local employees in city _____
	(Those actually performed or scheduled to be performed)		Branch, local office, factory, etc.	Date of establishment
			Name _____ Address _____ Telephone number: () -	. .
			Name _____ Address _____ Telephone number: () -	. .
		Name _____ Address _____ Telephone number: () -	. .	
Form of establishment		1 Reorganization to a company from an individual enterprise 2 Incorporation by merger 3 Incorporation by corporate division (<input type="checkbox"/> split-off-type, <input type="checkbox"/> spin-off-type and <input type="checkbox"/> other types) 4 Incorporation by investment in kind 5 Other ()		
The state of a private enterprise before the incorporation, a corporation dissolved by merger, a split corporation or investors, if a form of incorporation falls under any of 1 through 4		Name of business owner, name of corporation dissolved by merger, name of split corporation, or name of investor		Place of tax payment
				Content of business, etc.
Qualification category, if a form of incorporation falls under any of 2 through 4		Qualified/Other		Attached documents, etc.
Date of commencement of business		20XX, ,		
Whether or not "Notification of Establishment of an Office, Etc. Paying Salaries" has been submitted		Yes, No		
Check the checkbox <input type="checkbox"/> appropriate for the details of notification. <input type="checkbox"/> A corporation that has a head office, etc. in the ward or municipality concerned and offices, etc. in multiple wards or municipalities <input type="checkbox"/> A corporation that has a branch, etc. in the ward or municipality concerned and offices, etc. in multiple wards or municipalities <input type="checkbox"/> A corporation that has an office, etc. only in the ward or municipality concerned				In the case of using the online registration information provision system
Licensed tax accountant concerned		Name _____	Address of Office _____	Zip code _____ Telephone number: () -
A corporation incorporated is a consolidated subsidiary.	Name of consolidated parent corporation	Date of submission of "Documents containing a statement to the effect that Full Controlling Interest Has Been Obtained," etc.		Consolidated parent corporation
	Place of tax payment of consolidated parent corporation	Zip code _____ Telephone number: () -	Consolidated subsidiary	Month day, year Competent tax office Settlement term
Signature and seal of licensed tax accountant		[Seal]		
Category of business		<input type="checkbox"/> Manufacturing industry <input type="checkbox"/> Other (Specify XX industry.)	In the case of a nonprofit corporation, etc.	<input type="checkbox"/> Conduct profit-making business. <input type="checkbox"/> Do not conduct profit-making business.
In the case of a general incorporated association/ general incorporated foundation		<input type="checkbox"/> Nonprofit corporation <input type="checkbox"/> Ordinary corporation	* Processing column	

Part 3 (for submission to municipalities) * Submit notification to respective agencies.

Standardized form for National Tax Agency, Tokyo Metropolis and municipalities

These materials contain samples of documents regarding registration, visa, taxation, personnel and labor matters that are necessary when a foreign company establishes a corporation or other entity in Japan as well as descriptive examples of how to fill them out. A portion of the English content has been updated through a provisional translation. These documents are not published by competent authorities and therefore are not official. For those who are going through the official procedures, please download the latest official documents from the competent authorities and related bodies or consult a person who specializes in advising on such information and procedures.

The information contained in this documents should be used at the reader' s independent discretion. While JETRO makes every effort to ensure the accuracy of the information it provides, no responsibility is accepted by JETRO for any loss or damage incurred as a result of actions based on the information provided in these documents or provided by the external links listed on these pages.

The competent authorities relating to these documents: National Tax Agency

URL: http://www.tax.metro.tokyo.jp/shomei/houjin/01a_32-1a.pdf