Health insurance Qualification

Notification of the Acquisition of

(1) Business establishment reference code		(2) Business establishment number		Qualification Employees' Pension Insurance Qualification		Notification	of the Ac	equisition of								
(3) * Person insured referenc number	Name of p	person insured	(5) Date o	f birth	Classifica	(7) Acquisition category	(8) Basic Pension Number	Reasons for issue	(15) Date of acquisitio of insurance qualification	a) Monthly amount	mount in	(16) * Standard monthly remuneration	(e) Presence or absence of dependent	(18) * Necessity or non-necessity for Health Insurance Identification Certificate	(19) * Designation of forced numbering	* Necessity or non- necessity for Pension booklet
	Phonetic transcrip (Last name) (10) Zip code *Address code	(First name)	Taisho 3 Showa 5 Heisei 7	ar month day	2 6 	Newly 1 • Mutual 3 Reacquisition 2 •Mariner 4 Prefecture		Submit	Heisei month da	(b) (c) (d)	yen F	Health in thousands of yen Pension n thousands of yen	Absence • Presence	(f) Remarks		Submit
	Phonetic transcrip (Last name) (10) Zip code * Address code	(First name)	Meiji 1 Taisho 3 Showa 5 Heisei 7 (11) Address of person insured	ar month day	2 6 	Newly 1 • Mutual 3 Reacquisition 2 • Mariner 4 Prefecture		Submit	Heisei Month da	(b) (c) (d)	yen _F	Health in thousands of yen Pension n thousands of yen	Absence • Presence	(f) Remarks		Submit
	Phonetic transcrip (Last name) (10) Zip code * Address code	tions in katakana (First name)	Meiji 1 Taisho 3 Showa 5 Heisei 7 (11) Address of person insured	ar month day	2 6 	Newly 1 • Mutual 3 Reacquisition 2 •Mariner 4 Prefecture		Submit	Heisel month da	(b) (c) (d)	yen F	Health in thousands of yen Pension n thousands of yen	Absence • Presence	(f) Remarks		Submit
	Phonetic transcrip (Last name) (10) Zip code * Address code	tions in katakana (First name)	Meiji 1 Taisho 3 Showa 5 Heisei 7 (11) Address of person insured	ar month day	2 6 	Newly 1 • Mutual 3 Reacquisition 2 •Mariner 4 Prefecture		Submit	Heisei month da	(b) (c) (d)	yen _P	Health in thousands of yen Pension n thousands of yen	Absence • Presence	(f) Remarks		Submit

Address of business establishment	Zip code	-			
Name of business establishment					
Name of business owner					Seal
Telephone number			(Area code)	number

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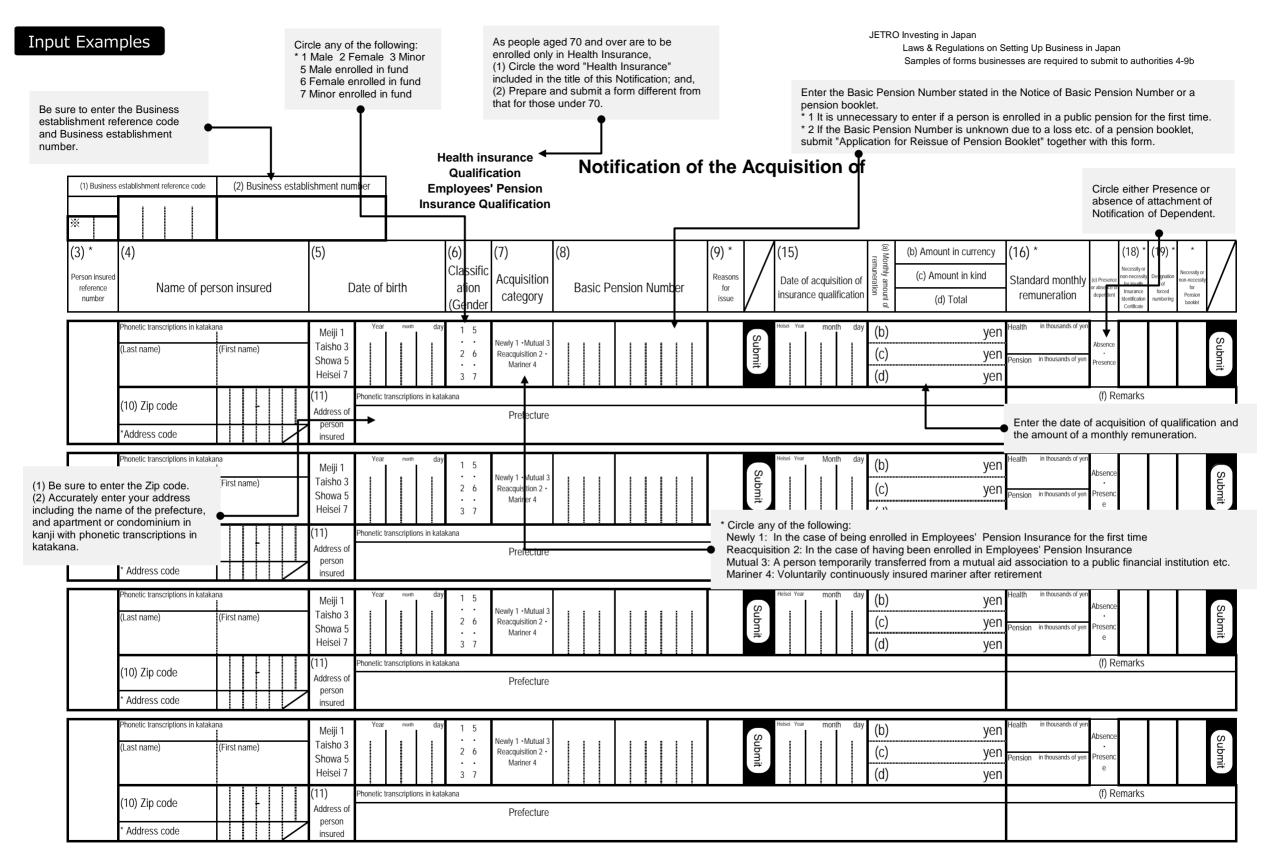
Laws & Regulations on Setting Up Business in Japan
Samples of forms businesses are required to submit to authorities 4-9b

•••• Reception date stamp

These sample application forms indicate the essential points and descriptive examples of registration, visa, taxation, and personnel and labor affairs that are necessary when a foreign company establishes a corporation etc. in Japan. These documents are not published by competent authorities and therefore are not official. Therefore, when going through the official procedures consult a specialist or download the official documents from the competent authorities.

The competent authorities relating to these documents: Ministry of Internal Affairs and Communications URL: http://www.nenkin.go.jp/service/kounen/jigyosho-hiho/hihokensha1/20150422.files/0000002415.pdf

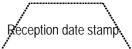
The use of the information provided in these sample documents is based on your own responsibility. While JETRO makes every effort to ensure that we provide accurate information, we will not be held liable for any loss or damage incurred by your use of the contents of such information.



Address of business establishment	Zip code -	Affix bu If an bu affixatio		
Name of business establishment				
Name of business owner			<u> </u>	→ Seal
Telephone number		(Area code)	number

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As details to be filled out in this notification are essential for giving health insurance benefits and pension benefits, fill out accurately and carefully.