

Applying for Certificates of Income / Taxation and Tax Payment by Mail

1 Required Documents

① City Tax Certificate Application Form

Print out from city homepage

OR

Use another form with all bolded section information

② Fee (fixed amount money order)

350 yen per certificate

Fixed Amount Money Order
350 yen

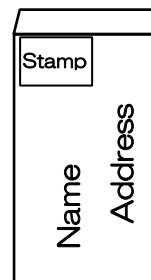
Purchase at the post office and include with application. Do not write anything. Stamps or cash will not be accepted.

③ Identity Verification Document of Requestor

Copy of My Number Card, Driver's License, Residence Card, etc.



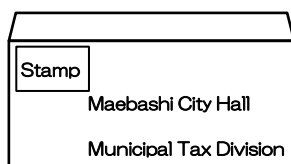
④ Return Envelope



Fill out your address and attach a stamp.

※Use express mail for urgent requests.

※Write your current address.



Where to Send:

371-8601
Gunma-ken Maebashi-shi Ote-machi 2-12-1
Maebashi City Hall Municipal Tax Division Tax Section

2 Important Notes When Completing

Confirm the fixed amount money order.

A fee of 350 yen per certificate is required. If requesting 2 certificates, please prepare exact change for two 350-yen fixed amount money orders (700 yen total).

※Certificates of "6. Light Vehicle Tax/Tax Payment for Vehicle Inspection" and "8. National Health Insurance Tax Payment Confirmation (For Declaration)" on the application form are free of charge.

Double check the required year before applying.

The most recent fiscal year is Reiwa Year 5 (For income / taxation certificates, one's income from January to December of Reiwa Year 4 and taxed amount for Reiwa Year 5 will be shown).

※Please inquire by phone first to confirm if issuance is possible.

Income deductions on income / taxation certificates:

Normally, income deductions will be shown on income / taxation certificates. If a certificate without income deductions is required, check the "I wish for income deductions to not be shown" box in the Certificates of Income / Taxation section on the City Tax Certificate Application Form.

※For whether or not income deductions should be shown, please check with who you are submitting the certificate to.

Applications for multiple different certificates:

For certificates listed on the City Tax Certificate Application Form (For Mail Use), one can receive multiple different certificates at the same time. For each certificate, write the required year and purpose of use. Send with the appropriate number of fixed amount money orders according to how many copies are needed.

※Only one identity verification document and return envelope is necessary.

3 Inquiries

For certificates of income / taxation:

371-8601
Maebashi-shi Ote-machi 2-12-1
Maebashi City Hall Municipal Tax Division
Tax Section

TEL: 027-898-6202 (Direct)
Fax: 027-224-1321
E-mail: siminzei@city.maebashi.gunma.jp

For certificates of tax payment:

371-8601
Maebashi-shi Ote-machi 2-12-1
Maebashi City Hall Tax Collection Division
Tax Collection Management Section

TEL: 027-898-6226 (Direct)
Fax: 027-221-3125
E-mail: syunou@city.maebashi.gunma.jp

City Tax Certificate Application Form (For Mail Use)

Addressed to the Mayor of Maebashi City

Reiwa Year Month Day

NO.

Requestor (Proxy)	Address				交付番号
	Furigana			Date of Birth	
	Name	Taisho・Showa・Heisei・Western Year Month Day			
	Phone Number				
Applicant (Person requiring a certificate)	New Address	New address moved to from Maebashi City			金額
	Current Address (of corporation)	Current residing address			確認欄
	Furigana			Date of Birth (for individuals)	
	Name (of corporation and representative)	Taisho・Showa・Heisei・Western Year Month Day			免・在・個・保・従・補 その他()司・行 券付 発行 照会 レン
	Phone Number				里検証 紙・IC (済・ブ) 同一世帯 相縁権 シ・電 シ・戸

Certificates of Income / Taxation		Certificates of Tax Payment / Completed Payment	
Required Year	Reiwa Year 5 (Reiwa Year 4 Income)	Required Year	Reiwa Year 5
	Reiwa Year 4 (Reiwa Year 3 Income)		Reiwa Year 4
	Heisei Year (Heisei Year Income)		Heisei Year
Purpose of Use		5. Tax Payment	6. Light Vehicle Tax/Tax Payment for Vehicle Inspection
1. Income / Taxation	Copies	1 Individual Municipal and Prefectural Tax	Copies
2. Tax Exemption()	Copies	2 National Health Insurance Tax	Copies
3. Address	Copies	3 Other() Tax	Copies
4. Other()	Copies	Circle the Purpose of Use	7. Completed Payment (no tax amount remaining)
		Laon	Copies
		Guarantor	Copies
		Bid / Nomination	Copies
		Submit to a Public Office	Copies
		Other	Copies
			8. National Health Insurance Tax Payment Confirmation (For Declaration)
			Copies
			Paid year for ()
			※This application form cannot be used to apply for certificates of land / buildings (Evaluation, Public Charges, Nayosecho (Name Directory), etc).

【Important Notes】

- When requesting on behalf of another party, a letter of proxy is required.
- If the authorizer is an individual, provide either a signature or both a printed name and a seal.
If the authorizer is a corporation, provide the address, corporation name, and representative name.
Stamp the registered seal of the corporation representative.

Letter of Proxy

(For the authorizer to complete)

Reiwa Year Month Day

Addressed to the Mayor of Maebashi City

Address (of corporation)

Authorizer Name (of corporation and representative)

Date of Birth Taisho・Showa・Heisei・Western Year Month Day

Phone Number ※You may be contacted to confirm the information on this form.

Write the certificate(s) to be delegated to the proxy.

_____ I hereby delegate the following person to request the certificate(s) on my behalf.

Address

Proxy Name

Date of Birth Taisho・Showa・Heisei・Western Year Month Day

City Tax Certificate Application Form (For Mail Use)

Addressed to the Mayor of Maebashi City

Reiwa Year Month Day

NO.

Requester Proxy	Address	東京都〇〇区△△2丁目4-5		交付番号
	Furigana	クニマ ハナコ	Date of Birth	
	Name	群馬 花子	Taisho <input type="text"/> Showa <input type="text"/> Heisei <input type="text"/> Western <input type="text"/> <input type="text"/> Year <input type="text"/> Month <input type="text"/> Day	
	Phone Number	080-0000-XXXX		
Applicant Person requiring a certificate	New Address	New address moved to from Maebashi City 東京都〇〇区〇〇1丁目2-3		金額
	Current Address (of corporation)	Current residing address 同上		
	Furigana	マエバシ タロウ	Date of Birth (for individuals)	
	Name (of corporation and representative)	前橋 太郎	Taisho <input type="text"/> Showa <input type="text"/> Heisei <input type="text"/> Western <input type="text"/> <input type="text"/> Year <input type="text"/> Month <input type="text"/> Day	
	Phone Number	090-0000-XXXX		

確認欄

免・在・個・保・従・補
その他()司・行
受付 発行 照会 レン

里検証

紙・IC (済・ブ)

同一世帯 相縁権

シ・電 シ・戸

Certificates of Income / Taxation		Certificates of Tax Payment / Completed Payment	
Required Year	<input checked="" type="radio"/> Reiwa Year 5 (Reiwa Year 4 Income)	Required Year	<input checked="" type="radio"/> Reiwa Year 5
	<input type="radio"/> Reiwa Year 4 (Reiwa Year 3 Income)		<input type="radio"/> Reiwa Year 4
	<input type="radio"/> Heisei Year (Heisei Year Income)		<input type="radio"/> Heisei Year
Purpose of Use	ビザの更新、〇〇の申請	6. Light Vehicle Tax/Tax Payment for Vehicle Inspection	
1. Income / Taxation	1 Copies	(License Plate No. 群馬・前橋)	Copies
<input type="checkbox"/> I wish for income deductions to not be shown		7. Completed Payment (no tax amount remaining)	Copies
2. Tax Exemption()	Copies	<input type="checkbox"/> General Use <input type="checkbox"/> Public Interest Corporation Use <input type="checkbox"/> Liquor Tax Use	
3. Address	Copies	8. National Health Insurance Tax Payment Confirmation (For Declaration)	Copies
4. Other()	Copies	Paid year for ()	
		※This application form cannot be used to apply for certificates of land / buildings (Evaluation, Public Charges, Nayosecho (Name Directory), etc).	

【Important Notes】

- When requesting on behalf of another party, a letter of proxy is required.
- If the authorizer is an individual, provide either a signature or both a printed name and a seal.
If the authorizer is a corporation, provide the address, corporation name, and representative name.
Stamp the registered seal of the corporation representative.

Letter of Proxy

(For the authorizer to complete)

Addressed to the Mayor of Maebashi City Reiwa Year Month Day

Address (of corporation) 東京都〇〇区〇〇1丁目2-3

Authorizer Name (of corporation and representative) 前橋 太郎 Refer to 2 in [Important Notes]

Date of Birth Taisho Showa Heisei Western Year Month Day

Phone Number ※You may be contacted to confirm the information on this form.

Write the certificate(s) to be delegated to the proxy.

所得・課税、納税証明

I hereby delegate the following person to request the certificate(s) on my behalf.

Address 東京都〇〇区△△2丁目4-5

Proxy Name 群馬 花子

Date of Birth Taisho Showa Heisei Western Year Month Day