he Mayor o Applicant	f Iruma City Application Form for Certificate	e of Resider	nt Registration	Date (Y/M/D): / / 4. How many?	
Address		Telephone Number		Certificate of all	
Name		Date of Birth	(Y/M/D): / /	Certificate of part of the household Copies	
Whose cer	tificate do you need?	□Date □Date (	of Move of Death	5. Check paticular matters to be included in the certificate  □ Permanent domicile	
Name		Date of Birth	(Y/M/D): / /	☐ Relationship to the head of the household	
Relation of the Applicant above	□Self □Family Member in the Same Household □Others( ) (husband, wife, child, parent, grandparent)			Foreigners only  Article 30-45  Nationality/region  Status of residence  History of nickname(s) in  Japan	
Purpose	Be sure to specify the purpose, if you checked "Others" above.				
Person wh	o is submitting this form (Leave blank if the persor	is the same a	s the applicant)	☐ Resident record code  * The City Office will not accept as	
Address		Telephone Number		false application that leads to an invasi of privacy.  * If you acquire a certificate throu fraud or in any other unlawful mann shall be sentenced to a fine.  * A power of attorney letter is necessa when a proxy makes an application.	
Name		Relationship to the Applicant			
受 付	作成 交付 野数料	円 (	本人 免・パ・住力・在・代 通・キャ・クレ・診・聞・そ	確認 R·年·学·身·補	