

# Request Form for Mailing of Moving out Certificate

※This procedure is for address holder in Okinawa City.

Application Date		令和	年	月	日
		Year	Month	Day	
Current Address				Current Head of House	
(Building Name · Room Number)					
Move-out date		令和	年	月	日
		Year	Month	Day	
Former Address				Former Head of House	
沖縄市					
(Building Name · Room Number)					
Permanent Address or nationality				Head of Family Registration	
Name (Person who move out)		Date of Birth		Sex	Relationship
		年	月	日	M · F
		Year	Month	Day	
		年	月	日	M · F
		Year	Month	Day	
		年	月	日	M · F
		Year	Month	Day	
		年	月	日	M · F
		Year	Month	Day	

※Please write your name and include your personal seal (inkan) below.

Applicant	Applicant's Name	Contact Number *Required
	印	TEL : (      )      —

Does anyone who is moving out have a valid My Number Card or Basic Resident Registration Card?	Yes	No
<p>☆If "Yes," It will be a " Special moving out procedure" by using the card. Please enclose a copy of the card. As a general rule, a "Moving-out Certificate" will not be issued. We will contact you by phone when transfer-out process is completed. Please bring your card and complete transfer-in procedures at the municipality where you will move in.</p> <p>※If you need a paper "Moving-out Certificate" for some reason, please check <input checked="" type="checkbox"/> and write down the reason. In that case, please enclose a return envelope with postage stamp.</p> <p><input type="checkbox"/> I would like to receive a paper moving-out certificate. Reason</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>		

※ **Please enclose the following documents:**

This request form.

Your ID :

**A copy of one of your photo IDs (My number card, driver's license, etc.)**

Return envelope (standard-size with ¥84 postage stamp)

※Your new address must be written on the front. In the case of Special moving out procedure, return envelope is not required.

National health insurance card (For NHI holders only.)

※Please contact below for questions:

沖縄市役所市民課記録係 Residential Division

[TEL:098-939-1212 \(Ext.3115・3116\)](tel:098-939-1212) Weekdays 8:30-17:15

**【Please mail to the following address】**

〒904-8501

沖縄県沖縄市仲宗根町 26 番 1 号

沖縄市役所市民部市民課 記録係宛