Form No. 1

Consent form regarding facility (business) use

*** Please read the confirmation items below carefully before signing.**

Checklist	
1	In examining the payment authorization and determining the user's burden, we will investigate and inquire about the resident registration related information and the municipal tax taxation status of the child and those living with the child.
2	We will inquire about the receipt status of the livelihood protection and child-rearing allowance, etc., as necessary for the payment authorization examination and the determination of the user's burden
3	For the payment certification examination, if necessary, we will confirm the delivery status etc of the physical disability certificate, nursing certificate, mental disability certificate, health and welfare certificate, with the related organizations of the city. Also, if necessary, we will check the status of receiving long-term care insurance. (*)
4	We will check with your employer and other related parties as necessary to check the employment status. (*)
5	After applying for use, if you move out of the city or if you can confirm that the need for childcare is gone, the usage requirements will not be met, so even if the selection result is unofficial, the unofficial decision will be cancelled.
6	After the informal decision, the documents you submitted for the application will be sent to the nursery center, etc. (*)
7	In case of moving to another nursery school after entering, the records related to the child such as a child's card will be sent to the transfered school.(Including the case of moving to a nursery school by changing the payment authorization from No. 1 child to No. 2 child)

(*) Excluding No. 1 certified children (3-5 year olds who are educated in kindergartens or certified children's schools)

(Destination) Mayor of Chiba

I agree to the above confirmation items when using the facility (business).

(Signature line)

Date of consent **Year** **month** **Day**

Address Chiba City **Ward** _____

Name (parents of children and all living together over 15 years old) _____

*** Signature or seal of the person who live with the child.**

_____ _____

_____ _____

*** Even if you consent, we may ask you to submit the relevant documents depending on the situation.**