#### Please Apply to Pay National Health Insurance Premiums via Bank Transfer

Payments will be automatically withdrawn from your account, so you don't have to worry about forgetting to pay

## **Procedures**

☆ To apply, please complete the necessary items of the "Bank Transfer (Automatic Payment) Request Form" (this document), and submit it to the National Health Insurance Section via post, or directly (it is also possible to submit it directly to the Tobu/Seibu ward resident's office).

- \* Please stamp the first page with the seal registered to the financial institution.
- \* Please save the third page, the applicant's copy.
- \* Before applying, please be sure to confirm the "Contract" written on the back of the Request Form.

#### **Transfer Date**

#### ☆ In principle, payments will be made on the last day of each month, starting two months after application.

- \* If the last day of the month is a holiday for financial institutions, the transfer will be made on the following business day.
- \* There are cases where the month when transfers begins changes due to the situation with procedures.
- \* A "Notification of Bank Transfer Commencement" will be sent before the first payment.
- \* You can confirm the transfer status for each month with such methods as the financial institution's bankbook.
- \* Around mid-December, a "Notification of Completed Bank Transfers" that will include the amount of paid insurance premiums between January and December of that year, will be sent.

#### **Important Points**

- Please pay insurance premiums for the period before the start of transfers by the end of the payment period with the payment slips we sent separately.
- If transfers cannot be made due to insufficient funds remaining in your bank account, a "Notification of Failure to Complete Bank Transfer" will be sent.
- Insurance premiums that cannot be paid will be added to the premiums for the following month (one time only), so please prepare the necessary funds in your account before the following month's payment day.
- Notifications relating to insurance premiums, such as the Notification of Bank Transfer Commencement will be addressed to the head of the household. If the name on the bank account and the head of the household are different, then the person whose name is on the bank account should also confirm the contents of notifications.
- Should you wish to pay your yearly insurance premiums in a single installment (no discounts available) please contact us.

	Bank Account Manager National Health Insurance Section
Inquiries	Toshima City
-	2-45-1 Minami-ikebukuro, Toshima-ku, Tokyo 171-8422
	Tel: 03-3981-1468 (Direct Transfer)

### Contract (not including Japan Post Bank account holders)

- 1. When the invoice is sent to the bank, the amount stated on the invoice will be withdrawn from the applicant's bank account within the time frame indicated by the city, without notifying the account holder. In this case, please process the payment according to the bank's prescribed method, regardless of account regulations or checking account regulations.
- 2. If the amount stated on the invoice exceeds the amount that can be refunded from the account (including the amount that can be taken from a checking account via overdraft) on the date of transfer, the invoice may be returned without notifying the account holder.
- 3. When terminating this contract, the account holder will submit a written notification to the bank. In addition, when there is a substantial reason that an invoice etc. is not sent over a long period of time, without such a notification, the bank may treat this contract as terminated. In such a case, the account holder does not need to be notified.
- 4. Even if the account holder has any questions regarding this contract, then he/she will not inconvenience the bank, except in cases where it is part of the bank's responsibility.
- 5. The account holder does not request a receipt for bank transfers.

When applying with a Japan Post Bank account, the regulations for automatic transfers will apply.



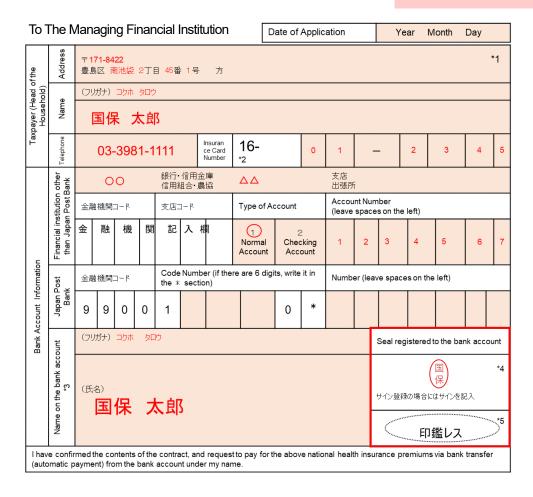
- ☆ Please firmly write the colored sections using a ball pen or similar.
- ☆ If you must correct any of the completed sections, please mark the sections with your seal.
  - \* If you have a seal registered to the bank account, please use that seal.

# Toshima City National Health Insurance Bank Transfer Request Form

(Automatic Payment)

(new/change/cancellation)

↑ (Please circle the relevant top above)



- \*1 In the "Address" section, please include details such as apartment building name/number/room number.
- \*2 The insurance card number can be confirmed on the front upper right section of the national health insurance holder's insurance card.
- \*3 The name on the bank account does not have to be the same as the head of the household. Please write the furigana (フリガナ) section using katakana, or the registered alphabet spelling.
- \*4 Please stamp the first page clearly with the seal registered to the bank account.

  If a signature was registered, please write the same signature (on the first page only).
- \*5 For those who opened a bank account without registering a seal or signature, <u>please circle the 印鑑レス (no seal)</u> section.

The third page is the applicant's copy. When submitting via the post, please remove the guidance page and the third page, fold the application flat across the middle and send it in the post.