

To Individuals Expected to Be Subject to FY2024 Income Tax/Income-based Individual Resident Tax

A Guide to the FY2024 Hino City Subsidy for Priority Assistance in Response to Rising Prices (Adjustment Benefit)

In association with the tax reduction in income tax and individual resident tax based on a flat amount (flat-amount cut) to be implemented in light of the increased burden on residents stemming from rising prices, for residents unable to receive the full tax reduction due to reasons such as the taxable amount being less than the amount of available tax reduction, this subsidy provides the difference to effect an equal reduction in taxes.

! An application is required to receive this subsidy.

● Individuals eligible for the subsidy

Individuals who are registered as residents of Hino City as of January 1, 2024, have at minimum paid either income tax or the income-based individual resident tax, and for whom it is anticipated that the available flat-amount cut exceeds either the FY2024 estimated income tax (FY2023 income tax) or the FY2024 income-based individual resident tax of the applicable taxpayer.

Available flat-amount cut
(¥40,000 × number of eligible individuals)

(1) Income tax cut (¥30,000 × number of eligible individuals)
(2) Tax cut for income-based individual resident tax
(¥10,000 × number of eligible individuals)

Number of eligible individuals
(eligible for the tax cut)

Number of taxpayer + same-household spouse + dependents
(including dependents under age 16)

*The "same-household spouse" who is eligible for the tax cut refers to a spouse of a taxpayer living in the same household whose total income in the previous calendar year did not exceed ¥480,000.

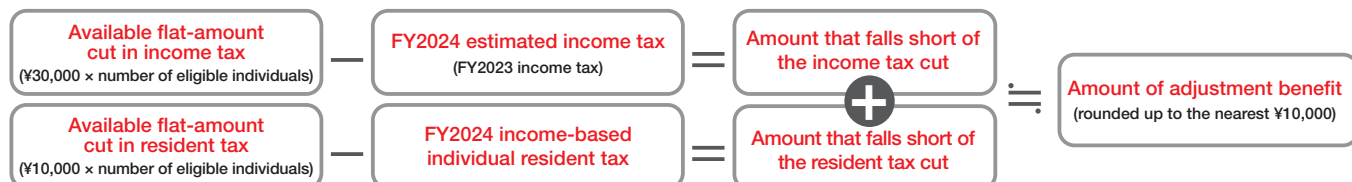
● Amount of subsidy payment

The adjustment benefit is calculated according to the following method.

***The total amount that falls short of the tax cut to be paid out is rounded up to the nearest ¥10,000.**

E.g.: If the total amount that falls short of the tax cut is ¥25,000, the adjustment benefit is ¥30,000.

Adjustment benefit calculation method



The total amount that falls short of the tax cut, calculated by subtracting FY2024 estimated income tax + FY2024 income-based individual resident tax from the available flat-amount cut (¥40,000 × number of eligible individuals), is the adjustment benefit.

*When it is ascertained that there is a shortfall in the subsidy due to corrections to the FY2024 income tax return or FY2024 individual resident tax, the amount of the shortfall will be provided in FY2025.

● Application deadline

**Postmarked by
October 31,
2024 (Thur.)**

Provide your user name (login ID) and password below that appear on the confirmation form, and retain this document until the transfer of funds is complete.

◎ You can check the review status by entering the following (use the 2D code on the back of this document).

User name (login ID)	Password



Beware of bank transfer scams and identity fraud.

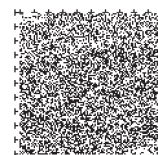
- ATMs are never used for the application process.
- Home visits are never made for the purpose of the subsidy.
- If you receive a suspicious phone call or visit from someone purporting to be an employee of Hino City, etc., please contact the nearest police station or call the dedicated police line (#9110).



Information provided by voice guidance

Uni-Voice

This is a Uni-Voice code providing audio guidance for the blind and other persons needing assistance. The special app for reading codes can be downloaded for use.



A Guide to Filling Out the Confirmation Form of Requirements for Payout of the FY2024 Hino City Subsidy for Priority Assistance in Response to Rising Prices (Adjustment Benefit)

Notes on filling out the form

- Use a black ballpoint pen, etc. to clearly and accurately fill in the pertinent fields.
- Do not use an erasable ink pen or pencil.

1

Fill in your name and telephone number.
Provide a telephone number where you can be reached during the day.

2

Fill in information for the account to which you want the payout to be transferred.
Please also send by post (1) a copy of an identification document and (2) a copy of a document by which the bank account for transfer can be verified.
*As a rule, you should provide an account held in the name of the applicant. If you wish the payout to be transferred to an account held by a person other than the applicant, you must fill in the "If a proxy is to receive the payout" section.

3

Fill in if a proxy is to receive the payout.
*If a proxy is to receive the payout, documents (1)–(4) are required. Please send them by post with this form.
(1) A copy of the applicant's identification document
(2) A copy of the proxy's identification document
(3) A copy of the proxy's account verification document
(4) A copy of a document by which the proxy's relationship to the applicant can be discerned (not required if the proxy is living in the same household)

Confirmation form [back side]

How to apply by post

Please fill in all the fields below and return the following 3 items by post.

(This form + a copy of an identification document + a copy of an account verification document)

This is being returned as there are no discrepancies with the contents of the front side. *Please check the back side for details on required documents.

氏名 Name	Taro Hino	電話番号 Telephone number	080 - 0000 - 0000
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*Provide a telephone number where you can be reached during the day.

金融機関コード Financial institution code				金融機関名 Name of financial institution											
0	1	2	3	日野銀行											
支店コード Branch code				支店名 Name of branch				種別 Type		口座番号 Account number					
1	2	3	日野支店				(普通) 当座		0	1	2	3	4	5	6
口座名義 Name of account holder (katakana) *Use the spelling written on the passbook.															
ヒノ タロウ															

If applying by post, you must send this form and one of the following required documents for each category.

<p>(1) A copy of an identification document</p> <ul style="list-style-type: none"> • Driver's license • Individual Number Card • Residence card <p>E.g.: •Basic resident registration card •Passport •Health insurance card •Physical disability certificate •Pension book •Long-term care insurance card •Welfare recipient certificate •Certificate of mental disorder, etc.</p>	<p>(2) A copy of an account verification document</p> <ul style="list-style-type: none"> • ATM card • Passbook page (inside of the front cover) • ATM card with credit card functionality <p>*Please copy the portion by which the name of the financial institution, account number, and account holder name written in katakana can be verified.</p>
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*If your name has changed, please submit an identification document by which the name change can be discerned (a document on which your name before and after the name change appears).
E.g.: Front and back of your driver's license, Individual Number Card, etc.

*As a rule, the payout is provided via bank transfer, but if you are unable to receive it by bank transfer, please contact us using the contact information on the front side. When the payout is provided in a manner other than bank transfer, the payout period will be delayed.

If a proxy is to receive the payout If the bank account for transfer is held by a proxy rather than the applicant, please fill out the fields for the proxy.

代理人氏名 Name of proxy	代理人生年月日 Birthdate of proxy	代理人住所 Address of proxy (not required if the proxy is living in the same household as the applicant)
Hanako Hino	西暦 1900 年 1 月 1 日	東京都日野市神明0-0-0号
代理人電話番号 Telephone number of proxy	ご本人との関係性 Relationship to the applicant	<p>If a proxy is to receive the payout, please send the required documents (1)–(4) noted below by post with this form. *Document (4) is not required if the proxy is living in the same household.</p>
090-0000-0000	<input type="checkbox"/> 同一世帯 <input type="checkbox"/> 法定代理人 <input checked="" type="checkbox"/> その他 (子)	

Required documents (1) A copy of the applicant's identification document (2) A copy of the proxy's account verification document (3) A copy of the proxy's identification document (4) A document by which the relationship to the applicant can be discerned (official copy of the family register, certificate of registered information, etc.)

Application Deadline: Postmarked by October 31, 2024 (Thur.)

<p>To apply online, please use the 2D code on the left.</p> <p>*This subsidy cannot be received if the application is not returned by the deadline. *If you decline to receive this subsidy, you do not need to apply online or return the confirmation form by post.</p>	<p>[Send to (if applying by post)] 〒191-0016 東京都日野市神明 1-11-12 日野神明郵便局 2 階 日野市調整給付事務処理センター</p> <p>*The confirmation form can also be submitted at the reception desk. [Reception desk] Western side of Hino City Hall 1F, next to the Property Tax Division [Hours] 8:30 a.m.–5:00 p.m. on weekdays (closed on Sat., Sun., and holidays)</p>
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For inquiries, please contact the call center noted below.

2D code for checking the review status

You can check the review status with the 2D code on the right.



Inquiries

Hino City Adjustment Benefit Call Center
Tel. 050-3490-6980

Hours: 8:30 a.m.–5:00 p.m. on weekdays (closed on Sat., Sun., and holidays)