（様式３）

個人登録用

口　座　振　替　申　出　書

（債権債務者登録申出書）

年　　月　　日

佐賀県知事　　様

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 申請区分（○で囲む） | | | | | | | | 債権債務者番号  （変更時にのみ記入） | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| １：新規　　２：変更 | | | | | | | |  | |  | |  | |  | |  | |  | |  | | |  | | | | | | | | | | | | | | | | |
| 【申 出 者】 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| カ　　ナ | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 個人氏名  又は  屋号・代表者氏名 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **※個人事業主の方は、屋号もご記入ください。**  【住　　所】 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 住　　所 | 〒　　　　　　　　　― | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
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| 電　　話 | ―　　　　　　　　　― | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| 【振替口座】 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 金融機関名 | | 銀行　　　　　　　　　　　　　　　　　　支店  　　　　　　　　　　　　　　　　（　　　　）　　　　　　　　　　　　　　　所 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 預金種別(○で囲む) | | １：普通預金（総合口座を含む）　　　２：当座預金　　　　３：納税準備預金 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 口　座　番　号 | | | | | | | | |
|  | |  | |  |  |  |  |  |
| 口座名義人  **（カナ）** | |  |  |  | |  |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  |  |  |  |  | |  |  |  |  |  |  | |  | |  |  |  |  |  |
| **振替口座通帳の口座名義人（カナ）が表記されているページ（表紙裏面等）を確認の上、ご記入ください。** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| １．口座振替申出書の有効期限は申出日の属する年度とし、特別な事情がない限り年度ごとに自動更新されます。  ２．お預かりした個人情報は、適正な事務処理のためのみに使い、ご本人の承諾なしに第三者に提供することはありません。  詳しくは、佐賀県プライバシーポリシーをご参照ください。（https://www.pref.saga.lg.jp/web/privacy/privacypolicy.html） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | 〔受付所属〕  〔担当者〕  〔連絡先〕 | | | | | | | | | | | | | 所属受付印 | | | | | | | |