

This form can be filled out also in English.
 Please use the following guideline to write down your information.
 Make sure to write down all letters clearly. (No cursive letters)

Notification of Corporation / Branch Establishment

法人 設立 届出書

その2 (都税事務所・支所提出用)

※届出については、その機

税一様式用

受	Location of the head office or principal office	Postal code	※整理番号
	本店又は主たる事務所の所在地	Tel	ビル名等
Date of submission YY/MM/DD	納税地 (フリガナ)	Place of Tax payment	
平成 年 月 日	法人名	Corporate name	
都税事務所長 支庁長 殿	法人番号 (フリガナ)	Corporate number	
I hereby give notification on the establishment of a new domestic corporation.	代表者氏名	Representative's name	
新たに法人を設立した届け出ます。	Contact address/phone number <input type="checkbox"/> Head office <input type="checkbox"/> Residence of representative <input type="checkbox"/> Other	Telephone number of representative	
Date of establishment YY/MM/DD	連絡先 <input type="checkbox"/> 代表者住所 <input type="checkbox"/> その他	Business year From MM/DD TO MM/DD	
設立年月日 平成 年 月 日	事業年度 (自) 月 日 (至) 月 日	Business tax	の事業年度から 月間
資本金又は資本等	円 地方税の申告 市長の御	Inhabitant tax	の事業年度から 月間
Amount of stated capital or capital contribution	Presence/Absence of approval of extension of deadline for declaration of local tax		
事業目的	従業者総数	Total number of employees	市内従業者数
(記載不要)	支店・出張所・工場等	Branch・local office・factory, etc.	Location
最下段の事業種目欄にチェックをしてください。	1 個人企業を法人組織とした法人 3 新設分割により設立した法人 (□分割型) 現物出資により設立した法人 事業主の氏名、合併により消滅した法人の名称、分割法人の名称又は出資者の氏名、名称	1. Corporation established as a result of an incorporation of a sole proprietorship 2. Corporation established as a result of a merger 3. Corporation established as a result of an incorporation-type company split (□Split-off-type □Spin-off-type □Other) 4. Corporation established as a result of a capital contribution in kind 5. Other ()	
Type of establishment	納税内容	Place of Tax payment	Details of business, etc.
資格category for the type of establishment listed in 2 through 4	For the type of establishment listed in 1 through 4, status of the former private enterprise, corporation extinguished by merger, split corporation or contributor	Name of the business operator, corporation extinguished by merger, split corporation or investors	
	合格・その他	Qualified・Other	
届出内容に該当する□にチェックをしてください。 <input type="checkbox"/> 当該区市町村の事務所で本店で複数の区市町村に事務所等をもつ法人 <input type="checkbox"/> 当該区市町村の事務所で本店で複数の区市町村に事務所等をもつ法人			
Please check the box that applies: <input type="checkbox"/> The company has a business establishment(s) in multiple municipalities (ward/city/town/village), and the establishment in this municipality is its head office. <input type="checkbox"/> The company has a business establishment(s) in multiple municipalities (ward/city/town/village), and the establishment in this municipality is a branch office. <input type="checkbox"/> The company has a business establishment only in this municipality.			
Line of business	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Non-manufacturing (Please specify _____)		
事業種目	<input type="checkbox"/> 製造業 <input type="checkbox"/> その他 (具体的に _____) <input type="checkbox"/> Non-profit corporation <input type="checkbox"/> Ordinary corporation		
一般社団法人・一般財団法人である場合	<input type="checkbox"/> 非営利型法人 <input type="checkbox"/> 普通法人		
Please attach the following documents: 1. A copy of the articles of incorporation, etc. 2. Certificate of registered matters of company issued by the Legal Affairs Bureau (The reiki jikou zenbu shoumeisho. A copy is acceptable.) 3. A copy of merger agreement 4. A copy of company split plan 5. Other ()			
<input type="checkbox"/> Engaged in profit-making business <input type="checkbox"/> Not engaged in profit-making business			
In the case of a general incorporated association/general incorporated foundation			
In the case of a public service corporation, etc.			