Managing director	Clerical supervisor	Person in charge

Works Human Intelligence Health Insurance Society

Health Insurance Notification of Change of Covered Dependents (Addition)

Submission 9. Reiwa (Y) (M) (D)					Section to be completed by the labor and social security attorney / health insurance society																				
	ite:	9. Re	eiwa										Acquisition date:		leisei Reiwa		(Y)		(M)		(D)	Standard monthly remunera tion	(In thou		0 yen f yen)
sured	Code for Numb insurance card insurance						per for ice card					Date of birth	5. Showa 7. Heisei					(M)		(D)	Remarks				
Section for insured		(Furigana)											Postal code												
	Name							(First	(First name)				Address												
Secti														Telepho	ne number			_			_				
								ı													1				
nt		(Furigar						/Eirct	namel				Date of		howa łeisei		(Y)		(M)		(D)	Gender	1. Male	2. Fe	male
nde	Name	(Last name)						(First name)				birth	9. R	Reiwa											
Section for dependent													Individual number												
n for	Relationship	•	Occu	pation			Income (annual income)	(in te	0, ns of the		Address	Cohabitatio Living separate		ving sep	parately	Postal code	e								
ctio		te of	7. Heis	ei		(Y)		(M)		of yen) (D)		2. Living separate	7												
Se		ming a endent	9. Reiw								Reason							Rema	arks						*
		/Eurigar	22)											5.0	howa		(V)		(54)		(D)				
ent		(Furigar						(First	(First name)				Date of birth	7. ⊦	leisei		(Y)		(M)		(D)	Gender	1. Male	2. Fe	male
ende	Name									Individual	9. R	Reiwa										\dashv			
deb													number												
Section for dependent	Relationship		Occu	pation			Income (annual	(in te		000 yen ousands	Address	1. Cohabitatio		ving sep	parately	Postal code	е								
ctior	Date of (Y)						of yen) 2. Living separately (M) (D)																		
Se	becoming a dependent 9. Reiwa						Reason					Remarks *								*					
																					1				
ınt		(Furigar						(Firet	name)				Date of		howa łeisei		(Y)		(M)		(D)	Gender	1. Male	2. Fe	male
pua	Name	(Last name) e							(First name)				birth	9. R	Reiwa								1	1	
dependent																									
_	Relationship		Income (annual						0,000 yen (in tens of thousands Address 1. Cohabitation				In the case of li	ving sep	parately	Postal code	e								
Section for	Date of (Y)						of yen) 2. Living separately					<u>'</u>													
Sec	beco	ming a endent	9. Reiv	va		(1)		(M)		(D)	Reason							Rema	arks						*
*If th	*If there is no certificate of residence for the dependent in Japan, please check the requirements on the back and enter the applicable number in the remarks column.								mn.																
																		/		Date r	eques	t recei	ved (sta	amp)	/
Office Postal code																									
address																									
	ne of fice																								
	ne of												La	bor and	d social s	ecurity atto	rney	submittin	g the a	pplicatio	n on be	half of t	he insure	d	
emp	loyer																								
	ohone nber			()																ncuran		

*If there is no certificate of residence for the dependent in Japan, please check if any of the following requirements apply to the dependent and enter the applicable number in the remarks column.

Number	Requirement	Documents for Attachment
(1)	Students studying overseas	Copy of visa, student ID, enrollment certificate, admission certificate, etc.
(2)	Person accompanying an insured person who is stationed for work in a foreign country [Specific example] Person for whom a dependent visa is issued	Copy of visa, letter of appointment for overseas assignment, residence certificate issued by an overseas public institution, etc.
(3)	Person who temporarily travels abroad for sightseeing, recreation, volunteer activities, or other purposes other than employment [Specific examples] In principle, a person whose visa has an expiration date; for example, person who travels using the working holiday system, family member who accompanies students studying abroad, etc.	Copy of the visa, proof of the volunteer dispatching agency, volunteer participation agreement, etc.
(4)	Person who has a personal relationship with the insured person while the insured person is assigned to a foreign country and is recognized as equivalent to (2). [Specific examples] • Child of insured person born during overseas assignment • Spouse who was married locally during an overseas assignment • Specially-adopted child who was adopted during overseas assignment	Copy of documents certifying birth, marriage, etc.
(5)	In addition to the persons listed in (1) to (4), persons who are recognized as having their lifestyle based in Japan in consideration of the purpose of travel and other circumstances [Specific example] Children born while a dependent is living overseas for reasons such as foreign study	Copy of documents certifying birth, marriage, etc.

Works Human Intelligence Health Insurance Society