List of Submitted Documents for Certification of Dependent

Where to receive documents		Homepage of our Health Insurance Society		Municipality				School	Current employer	Previous Tax office employer		Financial institution	Pension office		on of child's joint on married couple	
Status (Please be sure to read the explanation outside of sections *1, *2, and *3)				*1	Currently living separately *1	Application via marriage			Part-time work	Left job within 1 year *2	Sole proprietorshi p Real estate income	Business closed	Currently living separately	Currently receiving pension	Spouse is currently enrolled in social insurance	Spouse is currently enrolled in National Health Insurance
	*When applying for issuance of public	on of Change of	nt certificati	Certificate of residence for all members of household (must list relationships) (do not list individual number)	Family register (abridged) (confirm relationshi p with insured person)	acceptanc e	(Non-) Taxation certificati on (must list income)	ID (copy) or certificate of	Most recent 3 months of salary slips (copy) or employmen t contract (copy)		Tax return (copy) and itemized statement of income and expenditure s (copy) or blue return financial statements (copy)	Business closure notice (copy) of a sole proprietorshi p	documents showing		slip (copy) of spouse	Tax return (copy) of spouse
	Unemployed/no income	0	0	0		0	0						0	0		
Spouse	Unemployed (retired within 1 year prior to the application date)	0	0	0	\square	0	0	\square		0		0	0	0		
	Currently working	0	0	0	\square	0	0	\square	0		0		0	0		
	Under 16 years old	0												0	0	0
Child	Students over 16 years old	0	0	0	0			0						0	0	0
	Non-students over 16 years old	0	0	0	0		0		0	0	0	0	0	0	0	0
Father/ mother /	Unemployed	0	0	0	0		0						0	0		
Grandfather/ grandmother	Unemployed (retired within 1 year prior to the application date)	0	0	0	0		0			0		0	0	0		
(blood relatives)	Currently working	0	0	0	0	\checkmark	0	\checkmark	0		0		0	0		
	Under 16 years old	0	0	0	0									0		
	Students over 16 years old	0	0	0	0			0						0		
relatives)	Non-students over 16 years old	0	0	0	0		0		0	0	0	0	0	0		
Relatives other than above (living together is required)	Under 16 years old	0	0	0										0		
	Students over 16 years old	0	0	0				0						0		
	Non-students over 16 years old	0	0	0			0		0	0	0	0		0		

*1 If the insured is assigned to work away from home and live alone due to company reasons, the couple is treated as living together. In this case, if the certified person is "a person other than the spouse or child," it is necessary to live together with the spouse or child of the insured person is If the child is boarding away from his/her parents in order to attend school, the child is treated as living together with the parents

*2 Regarding the retirement certificate

Documents to be submitted by retirees within one year prior to the application date are listed below. In the case of (3) to (5), it is necessary to attach a Written Oath in Regard to Dependent Certification (health insurance designated form) Documents to be Submitted

	Documents to be Submitted						
(1) Not yet enrolled in employment insurance	Retirement certificate (for persons who are listed as not yet enrolled in employment insurance)						
(2) End of unemployment benefits	Employment insurance benefit qualification certificate stamped with termination of benefits (copy)						
(3) Currently receiving unemployment benefits	Employment insurance benefit qualification certificate (copy) + Written Oath in Regard to Dependent Certification (download from our website)						
(4) Currently applying for unemployment benefits, or will not receive unemployment benefits	Statement of unemployment for insured party 1/2 (copy) + Written Oath in Regard to Dependent Certification (download from our website)						
(5) Will extend receipt of unemployment henetits	Statement of unemployment for insured party 1/2 (copy) + Notification for extension of receipt of employment insurance + Written Oath in Regard to Dependent Certification download from our website)						

*3 (1) If you have newly opened a self-employed business (or have opened a self-employed business, but have not yet filed a tax return), submit a business plan (copy) or notice of business opening (copy) (2) If you have closed your self-employed business, submit a notice of business closure (copy) or written promise (copy)

(3) If the certified individual is self-employed, their income is calculated by subtracting directly-required expenses from gross revenue. Directly-required expenses, materials expenses, outsourced expenses such as processing) required for the procurement of raw materials, etc., needed for production activities. It does not include indirect expenses such as utilities fees, transportation fees, etc.

Remarks
In the case of a common-law spouse, the relationship listed on the resident's ard must state "unregistered wife (husband)" Cannot be certified when living together with the other person
If the insured person's spouse is not a dependent, confirmation of married ouple joint dependency is required
It is necessary to submit a certificate regarding the income of all those who live ogether with the certified person. However, not required for persons who are students or younger If the certified person and the spouse are living separately, it is necessary to ubmit a certificate regarding the spouse's income. A divided household is treated as living separately
In order to confirm priority dependents, it is necessary to submit a certificate egarding the income of all those who live together with the certified person. owever, not required for persons who are students or younger In the dependent certification record, clarify the reason for seeking ertification as a dependent relative of the insured person
In order to confirm priority dependents, it is necessary to submit a certificate

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The submitted resident's card and other certificates must have been issued within the last 3 months.

If it is difficult to confirm the relationship of the primary income provider using only the submitted documents, we may ask you to submit additional documents.