

## Please note

- Not eligible if the head of a single-person household dies before the Confirmation Form is returned.
- You lose eligibility if you become subject to residence tax for 2024 as a result of an amended tax return, etc. and you may be required to return the benefit. Please contact the Call Center (078-771-7201), because you may be eligible for the flat-amount tax cut/adjustment benefit.
- The benefit to the head of household and the additional benefit for children will be transferred to the same account. Transfer to different accounts is not available.
  - \* Transfer under different names:
    - ① Benefit to the head of household  
コウベシクラシエンリンジトクベツキュウフキン
    - ② Additional benefit for children  
コドモ.コウベシクラシエンリンジトクベツキュウフキン
  - \* Transfer date may differ between ① and ②.
- If you miss the application deadline, you cannot receive the benefit. Please complete the procedures by the deadline.  
(Online) September 11, 2024 (Mail) Postmark no later than September 11, 2024
- If the confirmation content is incorrect, you may be required to return the benefit. If you intentionally make a false confirmation or application, you may also be charged with fraud for illegally receiving the benefit.



### IT MIGHT BE FRAUD!

Beware of scams that try to steal your personal information, banking information, ATM cash card, or PIN!

Beware of bank transfer fraud and scams that try to exploit your personal information.

Kobe City will never:

- Ask you to use an ATM
- Ask you to wire a processing fee to receive money
- Take your credit card or bank book
- Ask for your PIN

If you receive any suspicious phone calls, mail, or emails, contact your local police department (or dial the #9110 police consultation number).

## Inquiries

### Benefit and Flat-Amount Tax Cut Call Center

TEL : 078-771-7201

Hours: 8:45 – 17:30  
(Except for weekends and holidays)

For those with a hearing or speech impairment:  
(Please do not use these contact methods if this does not apply to you)

FAX : 078-771-5285

Email:  
kobe\_rinjitokubetu\_kyufukin@os.tempstaff.jp

#### Multilingual support

[ Korean, Chinese, English, Spanish, Portuguese,  
Tagalog, Vietnamese, Nepali ]

TEL : 078-771-7201

Hours: 8:45 – 17:30  
(Except for weekends and national holidays)

Please check here for the latest information.

神戸市暮らし支援臨時特別給付金

Search



Foreign language information is available on the website.



## Information about the Temporary Special Living Assistance Benefit

(Benefit Utilizing Temporary Regional Revitalization Grant for Priority Support in Response to Price Increases)

A benefit of 100,000 yen per household plus 50,000 yen per eligible child aged 18 or under will be paid based on the residence tax status for the 2024 fiscal year. **If you do not follow the procedures on the web (e-KOBE \*Applications accepted 24 hours) or return this Confirmation Form, you cannot receive the benefit.**

Please write the **Confirmation Form (Inquiry) Number** printed on the upper right-hand corner of the enclosed Confirmation Form.

\*After application, you can check your payment status by entering your Confirmation Form (Inquiry) Number on the Payment Status Inquiry website.

確認書(お問い合わせ)番号  
Confirmation Form (Inquiry) Number



## Eligibility

There are no inquiry counters at city or ward offices.

【Check your payment status here】

### (Eligible household)

- ① A household registered in the Kobe City Basic Resident Register as of the Reference Date (June 3, 2024)
- ② A household in which all members are exempt from residence tax or subject only to residence tax on a per capita basis for 2024
- ③ No members of the household are dependents of other relatives, etc. (child, parent, etc.) on whom residence tax on a per capita basis is imposed.
- ④ There are no members within the household who have failed to declare tax despite having gained income subject to the imposition of residence tax.
- ⑤ As of the Reference Date, the household does not include the head of a household that was eligible for the benefit (70,000 yen) for households exempt from residence tax for 2023 or the benefit (100,000 yen) for households subject only to residence tax on a per capita basis for 2023.

\*Not eligible if the tax status for 2023 changed to "Tax-exempt" or "Taxable on a per capita basis only" as a result of an amended tax return, etc.

\*A person who received the benefit for 2023 on behalf of the deceased head of the household is not eligible for this benefit (with some exceptions).

⑥ (In the case of additional benefit for children) A child is not eligible if they received the additional benefit for children (50,000 yen) for households exempt from residence tax or subject only to residence tax on a per capita basis for 2023.

### (Eligible child)

- ① Any child aged 18 or under who belongs to the same household as the head of a household eligible for the benefit as of the Reference Date (June 3, 2024).  
\*Any child up to and including the age of 18 to the first March 31 (born on or after April 2, 2006)
- ② A child is not eligible if they received the additional benefit for children (50,000 yen) for households exempt from residence tax or subject only to residence tax on a per capita basis for 2023.
- ③ Any newborn child born between June 4, 2024 and September 11, 2024

\*If there is a child who is not a dependent of the head of the household, the benefit for the child is not paid to the head of the household, in principle.  
\*If there is a child whose address of residence certificate is different from yours but who is your dependent, please contact the Call Center (078-771-7201).

\*If there is any child not printed on the Confirmation Form, such as one born before you submit the Confirmation Form, add the child and return the form. (The child may be found ineligible as a result of examination.)

\*If a child is (or expected to be) born on or before September 11, 2024 after you submit the Confirmation Form, please contact the Call Center.

\*For a newborn child, eligibility for the benefit is determined by the tax status of the household to which the child was born.

\*If you move out of Kobe City after the Reference Date (June 3, 2024), we have no way to know about a child born after the move-out date, and additional documents are required for application. For details, please contact the Call Center.

● Recipient	The head of a household that meets the eligibility requirements
● Amount	100,000 yen per household *If there is any child aged 18 or under who belongs to the household, an additional benefit of 50,000 yen per child is paid.
● Method of Disbursement	Wire transfer to the bank account indicated in the online application or in the Confirmation Form
● Application Deadline	(Online) September 11, 2024 (Mail) Postmark no later than September 11, 2024 *If the wire transfer to the specified deposit account cannot be completed for some reason, and we are unable to contact and verify the recipient (or representative) by September 30, 2024, your application for this benefit will be canceled.

## Filing Process

Please file using one of the following methods.

### Filing Online

Apply using the e-KOBE Kobe City Smart Application System.

For details, please read the **Timeline for Receiving the Benefit ① inside.**

### Filing by Mail

Fill out and return the enclosed Confirmation Form.

For details, please read the **Timeline for Receiving the Benefit ② inside.**

# Timeline for Receiving the Benefit Please file using either method ① or ② below.

Please check the following conditions and file to receive the Temporary Special Living Assistance Benefit.

- After processing the wire transfer to the deposit account, if the wire transfer cannot be completed due to reasons such as a mistake in the account information and we are unable to contact and verify the recipient (or representative) by September 30, 2024, your application for this benefit will be canceled.
- In order to verify your eligibility, we will check your public records.
- If it is not possible to check your public records, please submit relevant documentation.

## ① Filing Online (through e-KOBE)

\*Log in and file.

Have the Confirmation Form on hand and use the 2D code on the right to proceed to the application.

- Please note: If this is your first time using e-KOBE, you need to register.
- Please press the New Registration (新規登録) button in the upper right corner of the e-KOBE screen to register.



- Please follow the system instructions when inputting the required information.
  - Enter the Confirmation Form (Inquiry) Number printed in the upper right corner on the front of the Confirmation Form.
  - If you need to register a new depositing account or change the account printed on the Confirmation Form, it will be necessary to upload the following documents:
    - a. Personal identification\*
    - b. Documentation verifying the depositing account
    - c. Personal identification of representative\* [if you want the payment to be transferred to a representative's account]
- \* If there is a change of address, please also upload the side showing the new address.

Filing Deadline

September 11, 2024

## ② Filing by Mail

■ If you wish to use the depositing account printed on the front of the Confirmation Form:

### Required Documents

- Confirmation Form (確認書)

### Submission (via Mail)

- Fill in your name (self-written) and contact information, etc. on the front of the Confirmation Form and return it using the reply envelope.

■ If no depositing account is printed on the front of the Confirmation Form, or if you wish to use a different account:

### Required Documents

- Confirmation Form (確認書) (Please be sure to check the back page and complete it)
- Photocopy\* of personal identification of the head of household
- Photocopy of documentation to verify the depositing account

If the account holder's name is not the same as the head of household's:

- Photocopy\* of the representative's personal identification
- \* If there is a change of address, please attach a photocopy of documentation showing the new address.

### Submission (via Mail)

- Complete the required sections, then mail the form and required documents using the reply envelope.

Mailing Deadline

Postmark no later than September 11, 2024

The benefit will be deposited into the bank account specified **about a month** after the application is received as long as there are no errors or omissions in filing by mail or online.

\*As we expect a large number of replies immediately after the start of application, please note that it may take more than 1 month from the receipt of application for the benefit to be transferred.

\*If there are any errors or omissions in your documents, we will contact you by mail or email (if you filed online). Please be sure to respond in this event. If a phone number is provided, we may contact you by phone.

# How to Fill Out the Confirmation Form

Example (Front Page)

1 世帯主 (受給権者) 基準日(令和6年6月3日)において、神戸市の住民基本台帳に登録されている方

6月3日時点 世帯主氏名 神戸 太郎 住所 兵庫県神戸市中央区加納町6丁目5-1

2 こども加算対象児童 令和6年6月3日時点で神戸市に住民登録されている児童を印字しています。扶養していない児童がいる場合は二重線で取り消してください。本確認書の提出までに新生児が生まれた場合等、下記にお名前がない場合はコールセンター(078-771-7201)までご連絡ください。

No.	氏名	生年月日
1	神戸 真知子	平成28年11月17日
2	神戸 花子	平成28年11月14日
3	神戸 一郎	平成28年11月7日
4	神戸 英	平成28年11月17日
5	<del>神戸 太郎</del>	<del>平成28年11月17日</del>
6	神戸 道子	令和6年11月17日
7	神戸 礼子	令和6年11月17日
8		

支給額 ①世帯主10万円 ※児童数および金額に訂正が必要な場合は、「訂正後」欄に記入してください。②18歳以下の児童 5名×5万円= 25万円 (訂正後) 6名×5万円= 30万円

世帯主氏名(自署) 神戸 太郎 確認日(記入日) 令和6年11月17日 日中に連絡可能な連絡先 (000) 000 - 0000

2 受取方法について [A] 下記金融機関口座への振込を希望 ※神戸市が口座情報を取得した後に登録・変更された場合は反映出来ておりません。 [B] 口座名義 裏面に受取口座と必要事項を記入してください。 ※口座名義は、公金受取口座として登録されている、もしくは神戸市が児童手当口座等で把握した口座です。

A Check that the eligibility requirements listed at the bottom of the back page are all met and fill in the name of the head of the household (self-written), date of confirmation, and contact information.

[How you wish to receive the benefit]

1 If you wish to use the bank account printed on 2 Fill in the name (self-written) in A on the Front Page and return this Confirmation Form using the reply envelope.

2 If no account is printed, if you wish to use a different account, or if you are receiving the benefit as a representative You need to fill in the Back Page in addition to the name (self-written) in A on the Front Page. Please see the following example.

B If there is any child not printed on the Confirmation Form

- B-1 Add the child. (The child may be found ineligible as a result of examination.)
  - B-2 Enter the correct number of children and benefit amount in the corrected amount input box.
- \* If there is any child who is not your dependent, cross them out with a double line and enter the correct number of children and benefit amount in the corrected amount input box.

Example (Back Page)

[B] 表面[A]とは別の金融機関口座への振込を希望(下記に必要事項を記入)

①金融機関(ゆうちょ銀行を除く)へ振込

金融機関名	支店名	預金種別	金融機関コード	支店コード
1.銀行 5.普通	●●●●●●	●●●●	00000000	0000
2.金庫 6.当座	●●●●●●	●●●●	00000000	0000
3.信組 7.普通	●●●●●●	●●●●	00000000	0000
4.信託	●●●●●●	●●●●	00000000	0000

②ゆうちょ銀行へ振込 貯金通帳の現行左またはキャッシュカードに記載された記号・番号をご記入ください。

種別	記号(5桁または6桁)	通帳番号(7桁)	番号	口座名義(カタカナ)
普通	1	0	1	神戸 太郎

上記口座名義が、世帯主と異なる場合は3へ 上記口座名義が、世帯主と同じ場合は4へ

[C] 窓口等の受け取りを希望の方は、コールセンター(078-771-7201)にお問い合わせの上でお手続きをお願いします。

3 代理受給を行う場合(世帯主とは異なる口座に振り込む場合のみ、世帯主の方が記入)

下記の者を代理人と認めます。

フリガナ	世帯主氏名(自署)	代理人の姓	代理人の生年月日
フリガナ 神戸 太郎	神戸 太郎	妻	0000年00月00日
フリガナ 神戸 花子	神戸 太郎	妻	0000年00月00日

代理人 氏名 神戸 花子 代理人の姓 妻 代理人の生年月日 0000年00月00日 電話番号 (000) 000 - 0000

代理人住所 〒000-0000 都道府県 ●●●●●●●●●●

C Fill in the information for the depositing account you wish to use in either ① financial institution or ② Japan Post Bank. Please make sure that this information is exactly the same as shown in the documentation you provide to verify your bank account.

D If the benefit is to be received by a representative, the name of the head of the household must be self-written.

E If the benefit is to be received by a representative, please fill in all fields.

## About receiving the benefit as a representative

The eligible recipient of the Kobe City Temporary Special Living Assistance Benefit is the head of household. However, should the head of household have difficulties with receiving the benefit, they can have a representative receive it in their stead.

## Personal identification you can use

- Health insurance card
- Driver's license
- Residence card (foreign residents only)
- My Number Card (front side with photo only) \*Do not submit a photocopy of the back side.
- Holiday and nighttime beneficiary certificate
- Advanced elderly medical insurance card
- Nursing-care insurance card
- Passport
- Welfare payment notification
- Basic Resident Register card



Find out more about personal identification here