様式第41号(その1)(第6条、第81条、第83条関係)

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| (取扱金融機関名)  国頭村村税口座振替依頼書  年　　月　　日  　　　　　　　　　御中  国頭村に納付する村税を口座振替の方法により納付したいので次により依頼します。  (1)　納付義務者(預金者) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | (住所) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | フリガナ | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| (氏名)　　　　　　　　　　　㊞ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 電話 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (2)　預金者(納付義務者と異なる場合のみ記入してください。) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | (住所) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | フリガナ | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| (氏名)　　　　　　　　　　　㊞ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 電話 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (※あらかじめ金融機関にお届けの印鑑を使用してください。)  (3)　指定預金口座 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | 金融機関コード | | | | | | | 店番 | | | | | | | | | | | | 預金種別(該当に〇印) | | | | | | | | | | | | | | | | | | | 口座番号 | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | |  | | |  | | | |  | | | |  | | | | 1　普通　　2　当座  3　納税準備金(税のみ) | | | | | | | | | | | | | | | | | | |  | | |  | | |  | | | |  | | |  | | |  | | | |  | |
| (4)　取扱開始時期及び振替日(振替日は該当するものに〇印) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | 振替開始 | | | 平成　年　月　日 | | | | | | | | | | | | | | | | 以降の納期到来分より | | | | | | | |  | | | | 振替日 | | | | | 1　各納期の最終日(期別)  2　第1期分納期に年度分全額納付する(前納) | | | | | | | | | | | | | | | | | | | | | | | |  |
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| (5)　対象税目(振替納付を希望する税目の□にレ印をつけ、通知書番号を記入してください。) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | □　村民税・県民税 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | □　固定資産税 | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 通知書番号 | | | | | | |  | |  | | | |  | | | |  | | | |  | | |  |  | | | | 通知書番号 | | | | | | |  | | |  | | | |  | | |  | | |  | | |  | | | |  |
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|  | □　国民健康保険税 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | □　軽自動車税 | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| (6)　預金の振替手続きについては当座勘定又は普通預金の約定にかかわらず当座小切手の振出又は普通預金通帳及び預金払戻請求書の提出をいたしませんから貴行(店)所定の方法で処理してください。  (7)　振替日に指定預金口座の残高が納付書の金額に満たないときは納付書を返却されても異議ありません。  (8)　この口座振替は貴行(店)が必要と認めた場合には解除されても異議ありません。  (9)　この口座振替は廃止届を提出するまでは継続し、解除する場合は私から廃止届を提出します。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (10)　この取扱いについて万一紛議が生じても貴行(店)の責による場合を除き、貴行(店)にはご迷惑をかけません。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| 確認印鑑 | | | |  | | | | | | | | |  | | | | |