

# To foreigners who worked in Japan for more than 6 months



The paid pension will be returned.

You can apply for the Lump-sum Withdrawal Payments if you have the Japanese public pension coverage periods for 6 months or longer. From the Lump-sum Withdrawal, approximately 20% of it is deducted as Japanese taxes which can also be refunded. You can receive two types of refunds.

(example)

If you were working for 3 years in Japan with a monthly salary of 270,000 yen,

① You can receive the Lump-Sum Withdrawal Payment from the Japan Pension Service.

② Please access the URL listed below, input your information, and register.

You can access by PC or smartphone.

You can access by reading the QR code. You can receive the refund of the tax that was deducted from the Lump-Sum Withdrawal Payment.

You could receive a total of 868,000 yen.

Please access the URL listed below, input your information, and register.

You can access by PC or smartphone. You can access by reading the QR code.

<http://asahi-support.net/en/pc-user-registration>



**Asahi Business Solution Co., Ltd.**

5-6-4, Hirai Naka-ku, Okayama city, Okayama

703-8282 Japan E-mail : [asahi.abs1@asahitaxgp.com](mailto:asahi.abs1@asahitaxgp.com)



# ◇PROCEDURES TO RECEIVE THE REFUND◇

**1. Please access the URL listed below, input your information, and register.**

You can access by PC or smartphone.

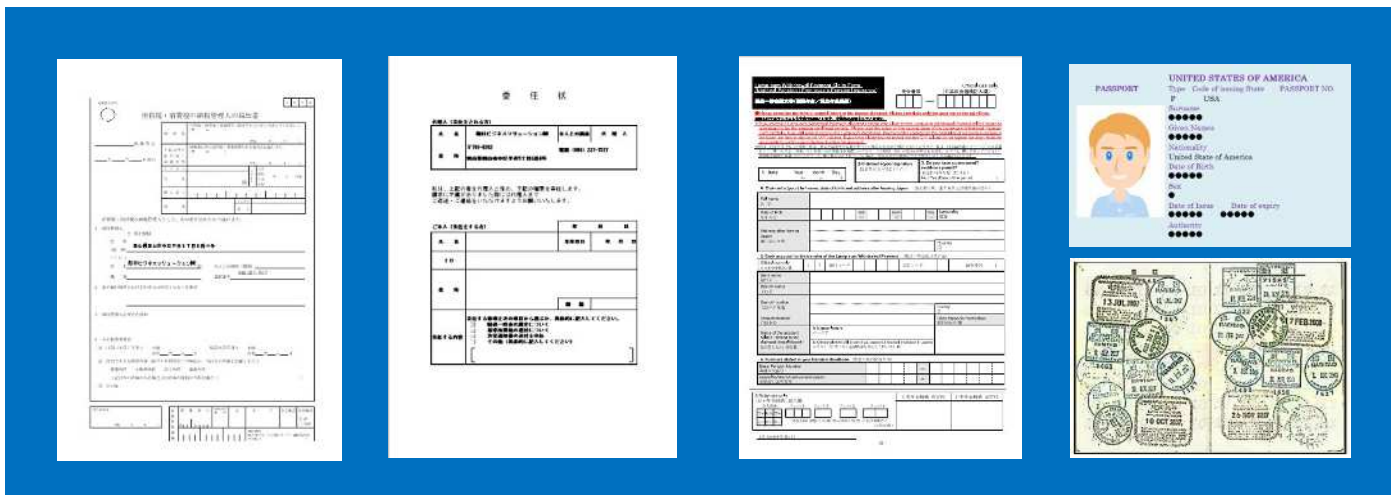
You can access by reading the QR code.

<https://asahi-support.net/en/pc-user-registration>



**2. Please mail the following documents to Asahi Business Solution Co., Ltd. as soon as you leave Japan.**

- ( 1 ) Notification of appointment of tax representative (Japanese form)
- ( 2 ) Letter of proxy (Japanese form)
- ( 3 ) Application for the Lump-sum Withdrawal Payments
- ( 4 ) Photocopy of your passport



**Asahi Business Solution Co., Ltd.**  
5-6-4, Hirai Naka-ku, Okayama city, Okayama  
703-8282 Japan

**3. [First refund] A few months later you will receive the Lump-sum Withdrawal Payment and the Notice of Remittance.**

**4. [Second refund] You will receive the tax refund in a few months.**  
**That's the end of all the procedures.**

(1)

This is an English translation of the Japanese form.  
You need to sign here on the Japanese form.  
You don't have to sign on the English form.

Do not fill in any other columns.

1 0 7 0



### Notification of appointment of tax representative

head of tax office _____	the place to pay tax	address of residence, or the company (TEL - - )	
	_____年____月____日提出	address other than the above (TEL - - )	
	Name		date of birth
	occupation		

I report that I appoint the following company as my tax representative on income tax and consumption tax.

1 the tax representative

〒  
address 5-6-4, Hirai Naka-ku, Okayama city, Okayama  
703-8282 Japan

name Asahi Business Solution Co., Ltd. the relation to the principal

occupation phone number

2 address outside the jurisdiction

3 the reason to appoint the tax representative

4 reference

(1) date of departure 平成\_\_年\_\_月\_\_日 · date of arrival 平成\_\_年\_\_月\_\_日

(2) the kind of income in Japan

business income real estate income salary income transfer income

other incomes or the kind of income is not known

(3) others



## 所得税・消費税の納税管理人の届出書

\_\_\_\_ 税務署長

\_\_\_\_ 年 \_\_\_\_ 月 \_\_\_\_ 日 提出

納税地	住所地・居所地・事業所等（該当するものを○で囲んでください。） (〒 - )		
	(TEL - - )		
上記以外の 住所地・ 事業所等	納税地以外に住所地・事業所等がある場合は記載します。 (〒 - )		
	(TEL - - )		
フリガナ			
氏名		生年月日	大正 昭和 平成 令和 年 月 日生
個人番号			
職業	フリガナ		
	屋号		

所得税・消費税の納税管理人として、次の者を定めたので届けます。

1 納税管理人

〒 703-8282

住所

(居所) 岡山県岡山市中区平井5丁目6番4号

フリガナ

氏名 朝日ビジネスソリューション(株) 印

本人との続柄 (関係) \_\_\_\_\_

職業 \_\_\_\_\_

電話番号 086-237-7577

2 法の施行地外における住所又は居所となるべき場所

\_\_\_\_\_

3 納税管理人を定めた理由

4 その他参考事項

(1) 出国（予定）年月日 平成 \_\_\_\_\_ 帰国予定年月日 平成 \_\_\_\_\_  
令和 \_\_\_\_ 年 \_\_\_\_ 月 \_\_\_\_ 日 令和 \_\_\_\_ 年 \_\_\_\_ 月 \_\_\_\_ 日

(2) 国内で生じる所得内容（該当する所得を○で囲むか、又はその内容を記載します。）

事業所得 不動産所得 給与所得 譲渡所得

上記以外の所得がある場合又は所得の種類が不明な場合（ \_\_\_\_\_ ）

(3) その他

関与税理士

(TEL - - )

税務署整理欄	整理番号	関係部門 連絡	A	B	C	番号確認	身元確認
	0						<input type="checkbox"/> 済 <input type="checkbox"/> 未済
						確認書類 個人番号カード／通知カード・運転免許証 その他 ( _____ )	

(2)

**This is an English translation of the Japanese form.  
You need to sign here on the Japanese form.  
You don't have to sign on the English form.  
Do not fill in any other columns.**

### Letter of proxy

the agent(to be given commission)

Name	Asahi Business Solution Co., Ltd.	the relation to the principal	agent
address	5-6-4, Hirai Naka-ku, Okayama City, Okayama 703-8282	phone number	:+81-86-237-7577

I appoint the company listed above as my agent and give commission to do the work mentioned below.  
If you find any inadequacies, please return them to the above agent.

the principal(to give commission)

Name		year	month	day
date of birth		year	month	da
ID				
address				
	nationality			
the contents of commission	Choose the items that you give commission, or specify the contents of commission. <input checked="" type="checkbox"/> Making a claim for the Lump-Sum Withdrawal Payment <input checked="" type="checkbox"/> Application for the refund of tax deducted from the Lump-Sum Withdrawal Payment <input checked="" type="checkbox"/> Sending a decision letter <input type="checkbox"/> Others(Please specify.) [ ]			

**Please write the ID of the web on the Japanese form.  
It is listed in the mail you receive after registering on the web.**

# 委任状

代理人（委任をされる方）

氏名	朝日ビジネスソリューション(株)	本人との関係	代理人
住所	〒703-8282 岡山県岡山市中区平井5丁目6番4号 電話 (086) 237-7577		

私は、上記の者を代理人と定め、下記の権限を委任します。  
請求に不備がありました際には代理人までご返送・ご連絡をいただけますようお願いいたします。

ご本人（委任をする方）

		年	月	日
氏名		生年月日	年 月 日	
ID				
住所				
	国籍			
委任する内容	委任する事項を次の項目から選ぶか、具体的に記入してください。 <input checked="" type="checkbox"/> 脱退一時金の請求について <input checked="" type="checkbox"/> 源泉所得税の還付について <input checked="" type="checkbox"/> 決定通知書の送付 <input type="checkbox"/> その他（具体的に記入してください） [ ]			

### (3) Application for the Lump-Sum Withdrawal Payments

We need your bank's "Bank stamp for verification" on your application form. Instead of the bank's stamp, we need documents which show your bank name, name of bank branch office, branch office's address, your account number, and show that the applicant (yourself) is the account holder (any supporting documents issued by your bank).

Please fill in 1. through 5. completely. If they are not complete, we may need to return your application.

- ① Please use capital letters of Roman alphabet to complete [ 3. Your name, date of birth and address ] and [ 4. Please nominate your bank account for Payments ] .
- ② To fill in [ 5. Your numbers on your Pension Handbook ], please refer to your Pension Handbook(s) for your Basic Pension Number and your registration number(s) for each pension system which you have ever been covered by.
- ③ Please do not write anything in the boxes [ Official use only ] .
- ④ Before you send your application, please make sure you note your Basic Pension Number and other numbers. They are important. When you need to contact us, you will need those numbers.

### (4) Photocopy of your passport

Pages showing the date of your final departure from Japan, your name, date of birth, nationality, signature and your resident status such as instructor, engineer or trainee are required.





**Lump-sum Withdrawal Payment Claim Form  
(National Pension / Employee's Pension Insurance)**

**脱退一時金請求書(国民年金/厚生年金保険)**

Official use only

受付番号

(日本年金機構記入欄)

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**※Please complete the form in capital letters of the Roman alphabet. Please complete only the area inside the bold lines.**

※記入はアルファベット大文字でお願いします。太枠内のみ記入してください。

※If you receive a Lump-sum Withdrawal Payment, all periods before your Claim for the Lump-sum Withdrawal Payment will no longer be considered to be the pension enrollment periods. Please read the notes on the second page of the Lump-sum Withdrawal Payment Form carefully. If you still want to receive the Lump-sum Withdrawal Payment after considering the possibility of receiving a pension in the future, be sure to sign in the "2<sup>nd</sup>" column. If you have a long-insured period and the "2<sup>nd</sup>" column is not signed, we may return the documents to confirm your intention to claim the payment.

※脱退一時金を受け取った場合、脱退一時金を請求する以前のすべての期間が年金加入期間ではなくなります。脱退一時金請求書の2ページ目の注意書をよくご覧いただき、将来、年金を受け取る可能性を考慮したうえで、なお脱退一時金の受給を希望される場合、必ず「2」欄に署名してください。被保険者期間が長期にわたる方で「2」欄に署名がなされていない場合、請求の意思の確認のため書類をお返しする場合があります。

<b>1. Date</b>	Year	Month	Day
	年	月	日

**2.Claimant's(your)signature**  
請求者本人の署名(サイン)

**3. Do you have a permanent?  
residence permit?**

永住許可の有無(許可日)

No / Yes (Date of the permit: )

**4. Claimant's (your) full name, date of birth and address after leaving Japan** (請求者氏名、生年月日及び離日後の住所)

Full name 氏名														
Date of birth 生年月日					Year 年					Month 月			Day 日	Nationality 国籍
Address after leaving Japan 離日後の住所	.....													
	Country 国													

**5. Bank account for the transfer of the Lump-sum Withdrawal Payment** (脱退一時金振込先口座)

Official use only 日本年金機構記入欄	1	3	銀行コード					支店コード					預金種別	1
Bank name 銀行名														
Branch name 支店名														
Branch location 支店の所在地	.....												Country 国	
Account number 口座番号													Bank stamp for verification 銀行の証明欄	
Name of the account holder - limited to the claimant himself/herself 請求者本人の口座名義	In Roman letters ローマ字													
	In Katakana letters (fill in only if you appoint a financial institution in Japan) カタカナ (日本国内の金融機関を指定した際のみ記載)													

**6. Numbers stated in your Pension Handbook** (年金手帳の記載事項)

Basic Pension Number 基礎年金番号																				
Symbol Number of each pension system 各制度の記号番号																				

Official use only (日本年金機構 記入欄)	加入制度		チェック 1		チェック 2		チェック 3		チェック 4		日本年金機構 決定印	日本年金機構 受付印
	厚年	船員	国年									
	国共	地共	私学									
	(送金先国)(課税△/非0)(本人請求△/他2)(日独非対象者△/対象者01)											

(入力回付年月日)