

## The contact form of living conditions of a borrowing household of the loan for social welfare etc.

Thank you so much always for using the loan operation of Chiba Social Welfare Council  
 This contact form is sent to those who are in the grace period and are late in repayment.  
 Therefore, we want to confirm your thoughts of your repayment to come and your life conditions.  
 Would you mind filling out the following questions and send back to us by a self-addressed envelope.  
 Please answer.

※We would like to add that we will not use the private information we are known by this contact form only for this loan operations by Chiba Social Welfare Council, municipal Social Welfare Council and Self-reliant Counseling Support organizations. We will never use the information for other purposes.

◆Please mark the following items with an O mark or fill in the necessary items.

Borrower's name	(Age )	address			
Tel. No.	( )	Date of birth	Year	Month	Day
Type of borrowing	Emergency Small Amount Fund Comprehensive Support loan ( First • Extension further advance)	Code of borrowing			

### Question1 : About your current living condition

- Your family structure ⇒ Total \_\_\_\_\_ people (member : you \_\_\_\_\_ )
- Your monthly income ⇒ About \_\_\_\_\_ yen
- Breakdown of your income ⇒ (Operational Income [Workplace : \_\_\_\_\_ ]  
• Pension • Allowance • Welfare Assistance • Other ( \_\_\_\_\_ ))
- Total monthly income of household ⇒ \_\_\_\_\_ Yen
- Do your family members know this borrowing and repayment? ⇒ ア. Yes イ. No.

### Question 2 About your debts and arrears

- Besides this borrowing, do you have borrowings from other financial institutes A No イ. Yes

※In case of Yes  
 Fill in the right columns

- Borrower ⇒ Total: \_\_\_\_\_ companies
- Reason for borrowing⇒ Mortgage • Car loan • living expenses • education loan • others ( \_\_\_\_\_ )
- Borrowing Balance ⇒ (Total about \_\_\_\_\_ Yen)
- Amount of monthly redemption⇒ (Total about \_\_\_\_\_ Yen/M)

- Do you fall behind on your payment for Taxes, utility bills, rent, medical expenses, etc.?

ア. No イ. Yes ⇒ (Taxes • Utility bills • Rent • Medical expenses • National health insurance premiums • Pension premiums) (Total About \_\_\_\_\_ Yen)

- Have you ever done debt consolidation (Self-bankruptcy, voluntary liquidation, specific mediation, personal rehabilitation after receiving the loan from this fund)?

ア. No.

イ. Yes we did (Self-bankruptcy • Voluntary liquidation • Specific mediation • personal rehabilitation around \_\_\_\_\_ month \_\_\_\_\_ year)

ウ. In progress at the present

Continue to the back side

**Question 3 About your redemption of the fund, what are the main reasons for the delay in redemption/**

(Reasons)

**Question 4 About your future redemption of this fund, what do you think ? (Add ○ to the appropriate one.**

- ア. I want to begin redemption promptly., reimbursing( \_\_\_\_\_ yen/month)by (payment slip・direct debit)  
イ. I can't do now, but I want to begin reimbursing (from \_\_\_\_\_ month \_\_\_\_\_ year, \_\_\_\_\_ yen monthly.  
ウ. I don't think that I can reimburse in the future.

**Question 5 If you add ○ to イ and ウ in the previous question4, please tell us what your reasons are.**

(Reasons)

**Question 6 Would you like support from the municipal social welfare council for your problems and reimbursement?**

- ア. Since I've already contacted the person in charge of the municipal social welfare council, I do not want support.  
イ. I want to have a phone call from the person in charge of the municipal social welfare council  
(Tel. No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ^ please call me at \_\_\_\_\_ am or \_\_\_\_\_ pm)※Weekday9:00~17:00  
ウ. I want to ask the person in charge of the municipal social welfare council to come to my house for consultation, for city residents only.  
エ. I want to visit the municipal social welfare council in order to consult with (on \_\_\_\_\_ Date \_\_\_\_\_ Month)  
※In the case of ウ or エ, the person in charge may call you.

**Question7 What do you think frankly about the current situation of your default?**

**And if you have something to consult with the municipal social welfare council, please write down what you want to do.**

To : Chairman of Chiba Prefectural Social Welfare Council

(Date of filling out) \_\_\_\_\_ date \_\_\_\_\_ month Reiwa \_\_\_\_\_ year

**(Method of responses)**

- 1 Send your answer back to us by a self-addressed envelope within two weeks
- 2 As for redemption, the municipal social welfare councils where you live or who handle your borrowing will consult with you. First, please contact them by phone.
- 3 If you have any questions about filling in this contact form, please contact your creditor, the municipal social welfare council or Chiba Prefectural Social Welfare Council.

As for the English version, please refer to the website of Chiba Prefectural Social Welfare Council. Please fill out this contact and send back it to us.



Sent in June, Reiwa 5th