

Itabashi - 住民異動届 Residence Registration (Moving In/Out/Within)

japan-forms · Bilingual Guide

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別紙第1号様式 (第4条開録) **Notification of Change in Residence** ※When applied by proxy, a Letter of Proxy is required.
 To the Mayor of Itabashi City 転入 (○ 特例) 転出 (○ 特例) 廉居 世帯変更(合併 分離 世帯構成 世帯主変更) 修正() その他()
 In case of move-out by holders of "My Number Card" (Basic Resident Registration Card), Move-out Certificate information is sent via the Basic Resident Register Network. Please show your Card when submitting your Move-in Form. Entry of your PIN is required

Complete the section framed in black below

Date of transfer (Y) (M) (D)					Date of submission (Y) (M) (D)	Details of Applicant(proxy)		
New address Postcode □自世帯のみ □方書略					Name of new household head	Name <input type="checkbox"/> Same as new household head / <input type="checkbox"/> Same as previous household head		
Previous address Postcode					Date of Birth (Y) (M) (D)	Address Postcode <input type="checkbox"/> Same as a new address <input type="checkbox"/> Same as a previous address		
					Name of previous household head <input type="checkbox"/> Tick if same as above	Tel. No		
The person who has My Number Card and Notification Card.					<input type="checkbox"/> Alteration of registered matters / <input type="checkbox"/> Return	Relationship to transferee <input type="checkbox"/> Transferee/household member <input type="checkbox"/> Proxy		
Please fill in for all members who have transferred. ※NHI (National Health Insurance)								
No.	Furigana Name	Date of birth (Y) (M) (D)	Gen der M/F	Relation to household head	My Number Card registered as NHI Card?	児 手 医 案	再転 住 個新 住新 未	□期間経過 □免許証・経歴 <input type="checkbox"/> パスポート □個人番号カード(住基カードB) □特永・在留カ(外登) <input type="checkbox"/> 身障手帳 □保険証 <input type="checkbox"/> 資格確認書 <input type="checkbox"/> 診察券 □カード等 <input type="checkbox"/> その他 □聴聞() 異動年月日 <input type="checkbox"/> 届出日をいいた 代理人が届けた 様と同住所別世帯 □台帳確認済 戸建旧名称 □電子証明書失効説明済 □継続処理後裏書 <input type="checkbox"/> 裏面要チェック
1					YES • NO	国 社 交 互 資 通 高 状 書 回 封 案 介 認 交 互 書 回 封 案 年 案 後 案 印 回 处 在 住 A_B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2					YES • NO	国 社 交 互 資 通 高 状 書 回 封 案 介 認 交 互 書 回 封 案 年 案 後 案 印 回 处 在 住 A_B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
3					YES • NO	国 社 交 互 資 通 高 状 書 回 封 案 介 認 交 互 書 回 封 案 年 案 後 案 印 回 处 在 住 A_B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4					YES • NO	国 社 交 互 資 通 高 状 書 回 封 案 介 認 交 互 書 回 封 案 年 案 後 案 印 回 处 在 住 A_B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
5					YES • NO	国 社 交 互 資 通 高 状 書 回 封 案 介 認 交 互 書 回 封 案 年 案 後 案 印 回 处 在 住 A_B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Application Form for Residence Certificate If you wish to apply for Residence Certificate, please fill in below as well. If the applicant /proxy is not a member of the same household, a Letter of Proxy is required.

Type/No. of copies	1 All household members copies 2 Some household members* copies ※Names of list	Name of household head/List family relationships?	Yes • No
[Foreign applicants only] Circle any items you do not wish to be shown on your Certificate of Residence. Please inquire if you require other items to be shown.		[Japanese applicants only]	
Katakana notation of name Nationality/region Article 30, Clause 45 classification Resident Card etc. number Residence status/residence period/expiry date		List legal domicile/family head? Yes • No	
You agree "My Number" (Individual Number)	To be indicated in the Certificate/ Not to be indicated in the Certificate	Purpose of Use	Personal/Submit to Employer/ [] to:

備考欄 CS 本籍・筆頭・最終住所地 (担当) 住C 口変更なし

Itabashi - 住民異動届 - Residence Registration (Moving In/Out/Within)

Deadline: Must be submitted within 14 days of moving in | Cost: Free | Penalty: Fine of up to ¥50,000 for failure to register

WHAT TO BRING

>> First Time from Abroad

* Passport (all household members)	パスポート
* Residence Card (received at airport)	在留カード
Marriage Certificate + Japanese translation (If registering with spouse)	婚姻証明書 + 日本語訳
Birth Certificate + Japanese translation (If registering children)	出生証明書 + 日本語訳

>> From Another Municipality

* Residence Cards (all household members)	在留カード
* Moving-Out Certificate (from previous ward)	転出証明書
My Number Card (all who have one)	マイナンバーカード
National Health Insurance Card (If enrolled)	国民健康保険証

>> Moving Within Same Municipality

* Residence Cards (all household members)	在留カード
My Number Card	マイナンバーカード

COMMON MISTAKES

X Writing name in romaji instead of katakana

-> Most forms want katakana (カタカナ). Ask staff for help converting your name.

X Using arrival date instead of move-in date

-> 異動日 is when you moved into your apartment, not when your flight landed.

X Leaving head of household (世帯主) blank

-> If you live alone, you ARE the head of household. Write your own name.

X Forgetting Japanese translations of certificates

-> Marriage/birth certificates need a Japanese translation with the translator's name stated. A friend can do it – no certified translator required.

AFTER YOU SUBMIT

1. Your new address is printed on the back of your Residence Card (10–30 min wait)
2. My Number notification card mailed to your address (2–3 weeks, first-time only)
3. Enrolled in National Health Insurance (if not employer-provided) – same counter or nearby
4. Enrolled in National Pension (ages 20–59)
5. Can request Certificate of Residence (住民票) immediately – ¥300, needed for bank/phone/lease

タイトル・届出日 - Header & Dates

1	別記第1号様式 (第4条関係) Notification of Change in Residence ※When applied by proxy, a Letter of Proxy is required.					Complete the section framed in black below	
2	<input type="checkbox"/> 転入 (○ 特例) <input type="checkbox"/> 転出 (○ 特例) <input type="checkbox"/> 転居 <input type="checkbox"/> 世帯変更(合併 分離 世帯構成 世帯主変更) <input type="checkbox"/> 修正() <input type="checkbox"/> その他()						
3	To the Mayor of Itabashi City						
4	In case of move-out by holders of "My Number Card" (Basic Resident Registration Card), Move-out Certificate information is sent via the Basic Resident Register Network. Please show your Card when submitting your Move-in Form. Entry of your PIN is required						
5	Date of transfer		Date of submission		Details of Applicant(proxy)		

- 1 別記第1号様式 (第4条関係) Notification of Change in Residence ※When applied by proxy, a Letter of Proxy is required. [別記第1号様式 (第4条関係) Notification of Change in Residence ※When applied by proxy, a Letter of Proxy is required. Complete the section framed in black below]
- 2 To the Mayor of Itabashi City 転入 (○ 特例) 転出 (○ 特例) 転居 世帯変更(合併 分離 世帯構成 世帯主変更) 修正() その他() Change of household (head of household change, merge, split) / Moving in (from another municipality or abroad) / Moving out
- 3 In case of move-out by holders of "My Number Card" (Basic Resident Registration Card), Move-out Certificate information is sent via the Basic Resident Register Network. [In case of move-out by holders of "My Number Card" (Basic Resident Registration Card), Move-out Certificate information is sent via the Basic Resident Register Network]
- 4 Date of transfer [Date of transfer]
- 5 Details of Applicant(proxy) [Details of Applicant(proxy)]
- 6 Date of submission [Date of submission]

届出人情報 - Who Is Filing

<p>7 認 (Y) (M) (D)</p> <p>New address Postcode</p> <p>6 全有 <input type="checkbox"/>自世帯のみ <input type="checkbox"/>方書略</p> <p>12 全 Previous address Postcode</p>	<p>5 (Y) (M) (D)</p> <p>Name of new household head</p> <p>10 Date of Birth (Y) (M) (D)</p> <p>11 Name of previous household head <input type="checkbox"/>Tick if same as above</p>	<p>8 Name <input type="checkbox"/> Same as new household head <input type="checkbox"/> Same as previous household head</p> <p>9 Address Postcode <input type="checkbox"/>Same as a new address <input type="checkbox"/>Same as a previous address</p>
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1 Name Same as new household head Same as previous household head
 [Name Same as new household head Same as previous household head]

2 認 (Y) (M) (D) [認 (Y) (M) (D)]

3 (Y) (M) (D) [(Y) (M) (D)]

4 New address Postcode [New address Postcode]

5 Name of new household head [Name of new household head]

6 全有 自世帯のみ All/Entire household only

Check this box if registering changes for your entire household rather than individual members

7 Address Postcode Same as a new address [Address Postcode] Same as a new address

8 Same as a previous address [Same as a previous address]

9 一無 方書略 Building name / room number

Apartment/mansion name and room number. e.g. ○○マンション 301号室

10 Date of Birth (Y) (M) (D) [Date of Birth (Y) (M) (D)]

11 Name of previous household head Tick if same as above [Name of previous household head Tick if same as above]

12 全 Previous address Postcode [全 Previous address Postcode]

住所 - Addresses (Part 1/2)

<p>The person who has My Number Card and Notification Card. <input type="checkbox"/> Alteration of registered matters <input type="checkbox"/> Return</p> <p>Please fill in for all members who have transferred.</p>				Tel. No	Relationship to transferee <input type="checkbox"/> Transferee/household member <input type="checkbox"/> Proxy				
No.	Furigana Name	Date of birth	Gender	Relation to household head	My Number Card registered as NHI Card?	区記入欄	再転新	住未	期間経過
						児手医案	個新	住新	<input type="checkbox"/> 免許証・経歴 <input type="checkbox"/> パスポート
						国社交元資通高状書回封案	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 個人番号カード(住基カードB)
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 特永・在留力(外登) <input type="checkbox"/> 身障手帳
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 保険証 <input type="checkbox"/> 資格確認書 <input type="checkbox"/> 診察券

1 Tel. No [Tel. No]

2 The person who has My Number Card and Notification Card. Alteration of registered matters Return
[The person who has My Number Card and Notification Card. Alteration of registered matters Return]3 Relationship to transferee Transferee/household member Proxy
[Relationship to transferee Transferee/household member Proxy]4 Please fill in for all members who have transferred. NHI (National Health Insurance)
[Please fill in for all members who have transferred. NHI (National Health Insurance)]

5 区記入欄 Ward/Municipal Office Entry Section

N/A (this section is filled out by government office staff, not applicants)

6 再個転新 住 免期許間証経・過経歴 パスポート [再個転新 住 免期許間証経・過経歴 パスポート]

7 Furigana [Furigana]

8 Date of Gen Relation to My Number Card [Date of Gen Relation to My Number Card]

9 der household head registered as NHI Card? 児手医案 [der household head registered as NHI Card? 児手医案]

10 Name [Name]

11 birth [birth]

12 住未 個人番号カード(住基カードB) My Number (Individual Number)

12-digit number. Leave blank on first registration - it will be mailed to you after.

13 特永・在留力(外登) 身障手帳 Special Permanent Resident/Residence Card (Foreign Registration) Disability Handbook

Check the first box if you have special permanent resident status or a residence card; check the second box if you have a disability handbook

14 国社交元資通高状書回封案

Country Social Insurance Number Postal Code Assets Transportation Education Status Documents Return Envelope Reference

15 保険証 資格確認書 診察券 Health insurance card

Japanese health insurance card. Can serve as secondary ID at some banks.

住所 - Addresses (Part 2/2)

1	(Y)	M/F	YES • NO	介 認 交 て 書 回 封 案 年 案 後 案	<input type="checkbox"/>						
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1 (Y) M/F [(Y) M/F]

2 YES • NO 介 認 交 て 書 回 封 案 年 案 後 案 カード等 その他
[YES • NO 介 認 交 て 書 回 封 案 年 案 後 案 カード等 その他]

異動者 - Person Table (Part 1/3)

1	<input checked="" type="radio"/> (Y) <input type="radio"/> (M) <input type="radio"/> (D)	M/F	② YES · NO	③ 介 認 交 〒 書 回 封 案 年 案 後 案 印 回 处 在 住 A B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	□ 保険証 □ 資格確認書 □ 診察券 □ カード等 □ その他 □ 聽聞 □ ()
2	<input checked="" type="radio"/> (Y) <input type="radio"/> (M) <input type="radio"/> (D)	M/F	⑩ YES · NO	④ 国 社 交 〒 資 通 高 状 書 回 封 案 年 案 後 案 印 回 处 在 住 A B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	□ 异動年月日 □ 届出日をいたた □ 代理人が届けた □ 様と同住所別世帯 □ 台帳確認済

1 (Y) M/F [(Y) M/F]

2 YES · NO 介 認 交 〒 書 回 封 案 年 案 後 案 カード等 その他
[YES · NO 介 認 交 〒 書 回 封 案 年 案 後 案 カード等 その他]3 聽聞 [聽聞]

4 (M) (D) [(M) (D)]

5 印回処在住 A B 個(署) 旧 Seal (inkan / hanko)

Personal seal stamp. Most ward offices accept a written signature for foreigners instead.

6 () [()]

7 国 社 交 〒 資 通 高 状 書 回 封 案

Country Social Insurance Number Postal Code Assets Transportation Education Status Documents Return Envelope Reference

8 异動年月日 届出日をいたた Date of filing

Today's date. Use Japanese calendar or Western calendar.

9 (Y) M/F [(Y) M/F]

10 YES · NO 介 認 交 〒 書 回 封 案 年 案 後 案 [YES · NO 介 認 交 〒 書 回 封 案 年 案 後 案

11 代理人が届けた Filed by agent/representative

Check this box if someone other than you (like a family member or authorized representative) is submitting this form on your behalf

12 様と同住所別世帯 Address

Write in kanji if possible. Ward office staff can help you look up the correct kanji for your address.

13 (M) (D) [(M) (D)]

14 印回処在住 A B 個(署) 旧 Seal (inkan / hanko)

Personal seal stamp. Most ward offices accept a written signature for foreigners instead.

15 台帳確認済 [台帳確認済]

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異動者 - Person Table (Part 2/3)

3	(Y) (M) (D)	M/F	YES • NO	国 社 交 テ 資 通 高 状 書 回 封 案 介 認 交 テ 書 回 封 案 年 案 後 案 印 回 処 在 住 A B 個 (署) 旧	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	台帳確認済 建旧名称 電子証明書失効説明済 継続処理後裏書 裏面要チェック
					<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	受付 入力 照合 裏書
4	(Y) (M) (D)	M/F	YES • NO	国 社 交 テ 資 通 高 状 書 回 封 案 介 認 交 テ 書 回 封 案 年 案 後 案 印 回 処 在 住 A B 個 (署) 旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	受付 入力 照合 裏書
				国 社 交 テ 資 通 高 状 書 回 封 案	<input type="checkbox"/>	交付

1 国 社 交 テ 資 通 高 状 書 回 封 案

Country Social Insurance Number Postal Code Assets Transportation Education Status Documents Return Envelope Reference

2 戸建旧名称 Former name of detached house

Enter the previous name/address of your house if it was recently renamed or renumbered

3 (Y) M/F [(Y) M/F]

4 YES • NO 介 認 交 テ 書 回 封 案 年 案 後 案 電子証明書失効説明済
[YES • NO 介 認 交 テ 書 回 封 案 年 案 後 案 電子証明書失効説明済]5 継続処理後裏書 裏面要チェック Endorsement after continued processing Back side requires check

N/A – these are administrative checkboxes for office staff use only

6 (M) (D) [(M) (D)]

7 印 回 処 在 住 A B 個 (署) 旧 Seal (inkan / hanko)

Personal seal stamp. Most ward offices accept a written signature for foreigners instead.

8 受付 入力 [受付 入力]

9 照合 裏書 [照合 裏書]

10 国 社 交 テ 資 通 高 状 書 回 封 案

Country Social Insurance Number Postal Code Assets Transportation Education Status Documents Return Envelope Reference

11 (Y) M/F [(Y) M/F]

12 YES • NO 介 認 交 テ 書 回 封 案 年 案 後 案 [YES • NO 介 認 交 テ 書 回 封 案 年 案 後 案

13 (M) (D) [(M) (D)]

14 印 回 処 在 住 A B 個 (署) 旧 Seal (inkan / hanko)

Personal seal stamp. Most ward offices accept a written signature for foreigners instead.

15 交付 Issuance/Issue

This section is typically filled out by government office staff, not by you as the applicant.

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異動者 - Person Table (Part 3/3)

5	(Y) (M)	M/F	④ YES • NO	国社交元資通高状書回封案 介認交元書回封案年案後案 印回处在住A.B個(署)旧	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	交付	⑤ 受付No.
⑦ Application Form for Residence CertificateIf you wish to apply for Residence Certificate, please fill in below as well. If the applicant /proxy is not a member of the same household, a Letter of Proxy is required.				⑧ Type/No. of copies 1 All household members copies 2 Some household members※ copies ※Names of list Name of household head/List family relationships? Yes • No			

1 国社交元資通高状書回封案

Country Social Insurance Number Postal Code Assets Transportation Education Status Documents Return Envelope Reference

2 受付No. Reception No.

3 (Y) M/F [(Y) M/F]

4 YES • NO 介認交元書回封案年案後案 [YES • NO 介認交元書回封案年案後案

5 (M) (D) [(M) (D)]

6 印回处在住 A B 個(署)旧 Seal (inkan / hanko)

Personal seal stamp. Most ward offices accept a written signature for foreigners instead.

7 Application Form for Residence CertificateIf you wish to apply for Residence Certificate, please fill in below as well.
[Application Form for Residence CertificateIf you wish to apply for Residence Certificate, please fill in below as well. If the applica

8 Type/No. of copies 1 All household members copies 2 Some household members※ copies ※Names of list
[Type/No. of copies 1 All household members copies 2 Some household members※ copies ※Names of list

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職員記入欄 - Staff Section

<input checked="" type="checkbox"/> [Foreign applicants only] Circle any items you do not wish to be shown on your Certificate of Residence. Please inquire if you require other items to be shown. Katakana notation of name Nationality/region Article 30, Clause 45 classification Resident Card etc. number Residence status/residence period/expiry date						<input type="checkbox"/> [Japanese applicants only] List legal domicile/family head?		
<input checked="" type="checkbox"/> You agree "My Number" <input checked="" type="checkbox"/> (Individual Number)						To be indicated in the Certificate/ of Use	Purpose <input checked="" type="checkbox"/> Personal/Submit to Employer/ <input type="checkbox"/> of Use	<input checked="" type="checkbox"/> Submit <input type="checkbox"/> to:
<input type="checkbox"/> 備考欄 <input type="checkbox"/> CS <input type="checkbox"/> 本籍・筆頭・最終住所地 (担当)) 住C _____ <input type="checkbox"/> 変更なし		

DO NOT FILL IN – Office use only (職員記入欄)

This section is completed by ward office staff after you submit the form.

COUNTER PHRASES

Point and show these to ward office staff

FINDING THE COUNTER

すみません、住民登録の窓口はどこですか？

Sumimasen, jūmin tōroku no madoguchi wa doko desu ka?

Excuse me, where is the resident registration counter?

STATING YOUR PURPOSE

転入届を出したいのですが

Tennyu todoke wo dashitai no desu ga

I'd like to submit a moving-in notification

FIRST TIME FROM ABROAD

海外から初めて転入します

Kaigai kara hajimete tennyu shimasu

I'm registering for the first time from abroad

FROM ANOTHER WARD

〇〇区から転入します

〇〇-ku kara tennyu shimasu

I'm moving in from 〇〇 Ward

ASKING FOR ENGLISH FORM

英語の用紙はありますか？

Eigo no yōshi wa arimasu ka?

Do you have an English version of the form?

ASKING FOR HELP FILLING OUT

記入方法を教えていただけますか？

Kinyū hōhō wo oshiete itadakemasu ka?

Could you help me fill this out?

REQUESTING RESIDENCE CERTIFICATE

住民票もお願いしたいのですが

Jūminhyō mo onegai shitai no desu ga

I'd also like a Certificate of Residence, please

ASKING ABOUT MY NUMBER

マイナンバーはいつ届きますか？

Mainanbā wa itsu todokimasu ka?

When will my My Number arrive?