

Hachinohe City Novel Coronavirus COVID19 Relief Funds

Last Updated May 1, 2020

Hachinohe City will be issuing an emergency COVID19 Relief Fund for business operators who have been economically impacted due to the effects of COVID19.

Target Persons:

If you are managing a business in the City of Hachinohe in one of the following sectors:

1. Restaurant, business selling food and drink
2. Overnight Lodging & Hotel Business
3. Taxi Related Services
4. Alternative Vehicle Driver Related Services (Service that allows customers to order a driver to drive customer's car home after the customer has consumed alcohol.)

(Attention) For Business Operators selling food and drink, the following are excluded:

- Business Operators who only possess a temporary business license for providing food and drinks during events.

Requirements:

- Must possess necessary authorized licenses in order to conduct business.
- Must show proof of existing business (applies to businesses temporarily closed down due to COVID19).
- Must show no records of tax evasion.

Relief Fund Amount:

Each Business Operator will receive an equal, one time amount of 200,000 yen.

Apply for the Relief Fund:

Please send the required documents by postal mail, to the City's Commerce and Industry Section.

〒031-8686 Hachinohe City, Uchimaru 1chome-1-1, Hachinohe City Commerce and Industry Section

Required Application Documents:

1. Hachinohe City Novel Coronavirus Relief Fund Application Form
2. Relief Fund Bank Transfer Request Form

3. Copy of Documents showing proof of authorized licenses necessary to conduct business (ie. business permit)
4. Copy of Account Book showing most recent end-of-month information (ie. Preliminary balance sheet, Cash receipts and expenditures, Ledger showing sales and proceeds, Expenses Book, etc.)
5. Copy of one (1) document of Personal Identification (ie. Driver's License, Passport, Health Insurance Card, etc.)
6. Copy of Bank Book or Cash Card that has the following bank transfer account information included: Name of Financial Institution, Name of Branch Office (Branch Code), Bank Account Number, Name of Account Holder

*Please download the Application Form from the Hachinohe City homepage, here.

https://www.city.hachinohe.aomori.jp/soshikikarasagasu/shokoka/zigyosya_sogyosyashien/3/14437.html

Application Period

Mail will be valid if postmarked between May 1, 2020 (Friday) to June 30, 2020 (Tuesday).

Inquiry

If you have any additional questions or concerns, please send an email to the following address.
You may use your native language.

市民連携推進課 (しみんれんけいすいしんか)

Citizens Collaboration Section

Email Address : renkei@city.hachinohe.aomori.jp