Application for the Blue Form Return

Receipt of stamp of Tax Office

Date of application filing To: Director of Tax office	Place of tax payment	Zip code Phone number: ( ) _____
	(Phonetic name in Katakana) Name of company	
	Company number	
	(Phonetic name in Katakana) Name of representative	seal
	Address of representative	Zip code
	Type of business	
	Capital amount	yen

Business year for blue form return From
To

1. (i) Cancellation date in case that blue form return status was previously cancelled
   (ii) Date of incorporation for a newly established company

2. Reference matter
   (1) Book system

Name of slip / book	Form of books	Timing to record	Name of slip / book	Form of books	Timing to record

(2) Bookkeeping method

a. slip bookkeeping

b. Computer bookkeeping

(3) Using a licensed tax accountant

Signature & seal of licensed tax accountant [seal]

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