

Please fill out in Japanese or English 日本語もしくは英語でご記入をお願いいたします

■家主ダイレクト
■ベーシックプラン
Guarantee Application Form
For individuals
保証委託申込書(個人用)

Desired time for confirming the identity of applicant (1) 9:00 to 12:00 (2) 12:00 to 15:00 (3) 15:00 to 18:00
We may phone the applicant at a time other than the desired time.

Application date 2 0 Y M D

Planned move-in date 2 0 Y M D

Applicant must obtain the prior consent of its emergency contact that their personal information is treated pursuant to schedule titled "Personal Information Treatment Regulations" and also have them personally agree to the treatment. Applicant makes an application by providing signature on this document.

Applicant entry sections

Full name (autograph)	Reading in Japanese		Male	Date of birth	Y	M	D	Age
Home phone	-		Female	Spousal status	Married	Unmarried		
Current address	-		Male	Spousal status	Unmarried	Married		
Reason to relocate	□ transfer □ job change □ admission to school □ marriage □ becoming independent □ second house □ environment □ other ()		Female	Spousal status	Unmarried	Married		
Profession	□ regular worker □ contract (quasi) worker □ part-timer or temp staff □ unemployed □ student □ public assistance recipient □ pensioner □ self-employed □ other ()		Male	Spousal status	Unmarried	Married		
Name of employer	Reading in Japanese		Female	Spousal status	Unmarried	Married		
For students of part-time employer	Type of business	Section of service	Address of employer	Employer phone number	Zip code			
Monthly income	Monthly income	Years of service	Address of employer	Employer phone number	Zip code			
Tenants	Full name		Sex	Relation	Date of birth		Total	
□ applicant only □ applicant & co-dweller □ person other than applicant	Reading in Japanese		Male	Y	M	D	Age	
If all tenant information cannot be filled into the following entry columns, use another form to enter names of other tenants.		Female	Y	M	D	Age		

取扱い様ご記入欄

使用用途	□ 居住用 □ 事業用 (SOHO・店舗・事務所・倉庫等)	事業内容	()
物件名	〒	都道府県	市町村
物件住所	〒	都道府県	市町村
敷金	円	礼金	円
① 家具	円	② 共益費	円
③ 駐車場	円	④ その他固定費	円
合計 ①+②+③+④	円	⑤ その他	円
プラン選択	□ 家主ダイレクト (口座振替)	□ ベーシックプラン	

Emergency contact

Full name	Reading in Japanese	Male	Date of birth	Y	M	D	Age
Address	Zip code	Female	Date of birth	Y	M	D	Age
Fixed-line phone	Mobile phone	Call phone	Relationship	□ parent □ brother or sister □ relative □ other ()	Nationality		

If the applicant is a foreign national, also fill out the following columns.

Emergency contact in your home country

Full name	Reading in Japanese	Male	Date of birth	Y	M	D	Age
Address	Zip code	Female	Date of birth	Y	M	D	Age
Fixed-line phone	Mobile phone	Call phone	Relationship	□ parent □ brother or sister □ other ()	Nationality		

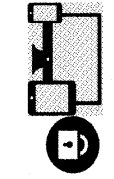
通信欄

■ 管理会社 (元付) ※支店名もご記入ください。	■ 仲介会社 (密付) ※支店名もご記入ください。
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管理会社 (元付) ※支店名もご記入ください。

社名	住所	TEL	FAX
大阪府大阪市東淀川区東中島1-10-10	〒112-8555	06-6136-7890	06-6136-8134
〒112-8555	〒112-8555	〒112-8555	〒112-8555
TEL	FAX	TEL	FAX
06-6136-7890	06-6136-8134		
審査結果送付先	□ 管理会社	□ 仲介会社	

株式会社CASA 審査課
FAX 0800-888-1515
＜お申込に関する問合せ＞
TEL 03-5339-1049



PC、スマホから
簡単・安心データ転送
https://casa-yd.jp/en/



Precautions
Entries must be made in thick, clear lettering by the applicant(s) themselves.
Unclear letters and omissions will result in an extended examination time.
The Examination Section (03-5339-1049) may call the applicant to confirm entries.

- If you wish to cancel your application after submission, please contact the Casa office.
- Casa may check with your employer regarding your employment, or call your emergency contact for information.