

Date	
Applicant's	
Signature	-

Application Property			Room No.		Number of Desk and Chair				
Desired Contract Date Desired C					ontract Term				
Applicant Information (申込者情報)									
					Number of Employees				
Name					Phone				
Company Address					E-mail	E-mail			
The President or Japan Chief of Your Company (会社代表者または日本責任者)									
Name					Phone	Phone			
Address					E-mail	E-mail			
•	x F / M Nationality					ate of Birth			
Occupants (入居者情報)									
☐ Please tick/che	eck the box if Sex	the applicant use	Number of Occup	pants Phone	people				
Name		Relationship	Date of B	סוו נוו		Pilotte			
	F/M								
F/M									
e-invoice (電子請	求書)								
Person in Charge Name			Person in E-m	_					
Business Description									
Emergency Conta	ct Numbe	r(緊急連絡先	-)						
Name					Phone				
Address		E-mail							
Sex M / F Nationality Relationship Date of Birth Age									
Payment Methods Bank Transfer Direct Debit (Japanese account or Citibank, N.A., only)									
* Initial fee is to be paid through bank transfer or in cash.									
備 考									

Please E-mail or Fax application form