第４号様式(第８条の２関係)

下水道事業受益者負担金分割特例申請書

年　　　月　　　日

（宛先）春日井市長

|  |  |  |  |
| --- | --- | --- | --- |
|  | 受益者 | 住所 |  |
| 氏名 |  |
| 電話 |  |

次のとおり、下水道事業受益者負担金に係る分割の特例を申請します。

(単位　円)

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| 負担区名 |  | 受益者番号 | |  | | | 受益者区分 |  | | 通知書番号 | |  | |
| 合計地積 |  | | 負担金総額 | |  | | | | 納付未済額 | |  | | |
| 受益地 | | | | 地目 | | 受益地積(m2) | | 単位負担金額 | | 負担金額 | | | 納付未済額 |
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