

申請期限 2004年9月15日  
Application deadline: September 15, 2004

様式第 iv- 401 号/Form No. iv- 401  
参加者控 / Copy for Participant

設備・内外装工事経費支援申請書  
Application Form for Financial Support of Facility, Interior and Exterior Construction

受付欄/Received  
第 (No.) 号※  
Date: \_\_\_\_年\_\_\_\_月\_\_\_\_日  
※  
(Y) (M) (D)

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(※Do not enter here.)

Date: \_\_\_\_年\_\_\_\_月\_\_\_\_日  
(Y) (M) (D)

独立行政法人 日本貿易振興機構

副理事長 塚本 弘 殿

To: Mr. TSUKAMOTO Hiroshi

President

Japan External Trade Organization

公式参加者名

Name of Official Participant \_\_\_\_\_

政府代表名

Name of Commissioner General of Section \_\_\_\_\_

代理人名

Name of signatory in print and signature \_\_\_\_\_ 印 (Seal)

2005年日本国際博覧会の公式参加者向け財政支援に関し、支援対象工事/監理業務申請書を添えて申請します。

Application for Financial Support Approval for the official participants of 2005 World Exposition, Aichi, Japan, is hereby submitted with the Application Form for Financial Support of Construction/ Supervision Work hereto attached.

**支援対象施工事事業者・工事監理者**  
 Facility Constructor(s) and Supervisor(s) Eligible for Support

※本フォームは複写式です。タイプ打ちで記入して下さい。  
 This form has a duplicate underneath. Please complete the form using a typewriter.

設備工事事業者・工事監理者  
 Facility Constructor(s)/Construction Supervisor(s)

施工/監理者Ⅰ Constructor/Supervisor I	事業者名 Name of company	
	住所 Address	〒
	担当者名、部署名 Name and position of person in charge	
	電話番号 Telephone number	
	資格 Qualifications	
	業務項目 Work item	
	支援申請額 Amount of support	¥

施工/監理者Ⅱ Constructor/Supervisor II	事業者名 Name of company	
	住所 Address	〒
	担当者名、部署名 Name and position of person in charge	
	電話番号 Telephone number	
	資格 Qualifications	
	業務項目 Work item	
	支援申請額 Amount of support	¥

施工/監理者Ⅲ Constructor/Supervisor III	事業者名 Name of company	
	住所 Address	〒
	担当者名、部署名 Name and position of person in charge	
	電話番号 Telephone number	
	資格 Qualifications	
	業務項目 Work item	
	支援申請額 Amount of support	¥

**支援対象施工事事業者・工事監理者**  
 Facility Constructor(s) and Supervisor(s) Eligible for Support

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**内外装工事事業者・工事監理者**  
 Interior and Exterior Constructor(s)/Construction Supervisor(s)

施工/監理者Ⅰ Constructor/Supervisor I	事業者名 Name of company	
	住所 Address	〒
	担当者名、部署名 Name and position of person in charge	
	電話番号 Telephone number	
	資格 Qualifications	
	業務項目 Work item	
	支援申請額 Amount of support	¥

施工/監理者Ⅱ Constructor/Supervisor II	事業者名 Name of company	
	住所 Address	〒
	担当者名、部署名 Name and position of person in charge	
	電話番号 Telephone number	
	資格 Qualifications	
	業務項目 Work item	
	支援申請額 Amount of support	¥

施工/監理者Ⅲ Constructor/Supervisor III	事業者名 Name of company	
	住所 Address	〒
	担当者名、部署名 Name and position of person in charge	
	電話番号 Telephone number	
	資格 Qualifications	
	業務項目 Work item	
	支援申請額 Amount of support	¥

申請期限 2004年9月15日  
Application deadline: September 15, 2004

様式第 iv- 402号/Form No. iv- 402  
ジェトロ宛／To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

支援対象工事/監理業務申請書

Application Form for Financial Support of Construction/Supervision Work

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Date: \_\_\_\_年\_\_\_\_月\_\_\_\_日  
(Y) (M) (D)

独立行政法人 日本貿易振興機構  
副理事長 塚本 弘 殿  
To: Mr. TSUKAMOTO Hiroshi  
President  
Japan External Trade Organization

公式参加者名

Name of Official Participant \_\_\_\_\_

政府代表名

Name of Commissioner General of Section \_\_\_\_\_

代理人名

Name of signatory in print and signature \_\_\_\_\_

印 (Seal) \_\_\_\_\_

施工事業者名

Name of constructor in print and signature \_\_\_\_\_

印 (Seal) \_\_\_\_\_

頁又は資料番号

Page or data number

1. 各階平面図 \_\_\_\_\_  
Floor plan of each story
2. 展示計画図 \_\_\_\_\_  
Exhibition plan
3. 外装計画図(立面図) \_\_\_\_\_  
Exterior decoration plan (elevation)
4. 内装計画図(展開図・断面図) \_\_\_\_\_  
Interior decoration plan (development elevation/cross-section)
5. 設備計画図(防災設備図含む) \_\_\_\_\_  
Facilities plan (including disaster prevention equipment plan)
6. 見積り \_\_\_\_\_  
Estimate

申請期限 2004年9月15日  
Application deadline: September 15, 2004

様式第 iv- 403号/Form No. iv- 403  
ジェトロ宛／To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

設備・内外装工事経費支援変更承認申請書  
Report of Changes in Application of Financial Support of Facility,  
Interior and Exterior Construction

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(※Do not enter here.)

Date: \_\_\_\_年\_\_\_\_月\_\_\_\_日  
(Y) (M) (D)

独立行政法人 日本貿易振興機構

副理事長 塚本 弘 殿

To: Mr. TSUKAMOTO Hiroshi

President

Japan External Trade Organization

公式参加者名

Name of Official Participant \_\_\_\_\_

政府代表名

Name of Commissioner General of Section \_\_\_\_\_

代理人名

Name of signatory in print and signature \_\_\_\_\_ 印 (Seal)

2005年日本国際博覧会の公式参加者支援に関するガイドラインiv-401により、\_\_\_\_年\_\_\_\_月\_\_\_\_日付で申請し、第\_\_\_\_号で承認を受けました件について、一部内容を変更しましたので、ここに申請します。

Partial change has been made in the construction project that has been applied for on [Date]\_\_\_\_\_ for the Financial Support for the official participants of 2005 World Exposition, Aichi, Japan, and approved as No.\_\_\_\_. The aforementioned changes are reported herein.

■ Please fill out the next page as well.

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様式第 iv- 403号/Form No. iv- 403  
ジェトロ宛／To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

1. 変更内容の概要  
Description of changes

2. 変更内容  
Content of changes

Application deadline: September 15, 2004

To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

Application Form for Financial Support of Pavilion Staff Expenses (Form v-501)

This form has a duplicate underneath. Please complete the form using a typewriter.

(Do not enter here.)

Received

No.

Date: (Y) (M) (D)

Date \_\_\_\_\_, 200\_

Mr. TSUKAMOTO Hiroshi, President  
Japan External Trade Organization (JETRO)

Name of Section	
Name of Commissioner General of Section	
Signature of Commissioner General of Section	

We hereby apply for financial support for travel expenses (economy class) and domestic accommodation expenses (in Japan) for two persons, as detailed below, who will be sent to Japan as Pavilion staff for our national pavilion at the 2005 World Exposition, Aichi, Japan.

Names of staff (Period of stay) Please ensure that there is no overlap of schedules when staff are replaced during the Expo period.	A
	(Period of stay: )
	(Duty: )
	B
	(Period of stay: )
	(Duty: )
	Replacement staff member (No financial support for travel expenses for replacement staff)
	(Period of stay: )
	*If there is insufficient space, please enter the information on a separate sheet and attach it to this application.

Account for transfers (Funds can only be deposited in accounts with financial institutions in Japan. Overseas transfers are not available.)

Bank	
Account type	
Account number	
Account name	
Address	
Telephone	

\*Please enter personal details about staff on the attached "Pavilion Staff Data Sheet."

\*JETRO will arrange accommodation only during the support period (March 1, 2005 to September 30, 2005). Please make arrangements according to the Accommodation Guidelines for other periods.

To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

Pavilion Staff Data Sheet (Attachment)

This form has a duplicate underneath. Please  
complete the form using a typewriter.

Application date \_\_\_\_\_, 200\_

Attach photograph (Passport size)	Name (surname underlined)	Signature		Gender M F
	Nationality		Date of Birth	_____, 19____ (dd/mm/yy)
	Passport No.		Age	____years
Organization				
Address of organization			Tel.	
			Fax	
Title				
	Duties			
Employment history	Period	Organization/company (department, position)		
Languages/ proficiency level	English (level )	Previous visits to Japan		
	Other ( )	Yes ( __ times) No Year of last visit: ____		
Travel plan (including transit points) (Itineraries can be attached.)	Preferred departure date	Preferred departure city (including transit points)		
Emergency contact			Tel.	
			Fax	
Other details				



Application deadline: June 30, 2004

To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

Application Form for Financial Support of Japanese Attendant Expenses (Form vi-601)

This form has a duplicate underneath. Please complete the form using a typewriter.

(Do not enter here.)

Received

No.

Date: (Y) (M) (D)

Date\_\_\_\_\_, 200\_

Mr. TSUKAMOTO Hiroshi, President  
Japan External Trade Organization (JETRO)

Name of Section	
Name of Commissioner General of Section	
Signature of Commissioner General of Section	

Please assign one Japanese attendant to assist with our participation at the 2005 World Exposition, Aichi, Japan. We appoint JETRO to act on our behalf with regard to orders for employment management services for the Japanese attendant.

Requirements

Please state your requirements of the Japanese attendant. Please note that we may not be able to meet all of your requirements.

Gender preference	( ) No preference ( ) Male ( ) Female
Languages used	( ) Japanese ( ) English ( ) French ( ) Spanish ( ) Other ( )
Uniform	( ) Will be prepared in our country and brought to Japan. ( ) Will be ordered and procured in Japan. **If you require information about ordering, please specify your requirements here: ( ) ( ) Not required. Ordinary clothing is acceptable. Other ( )
Procedures when Japanese attendant is not on duty	( ) We will use our Pavilion staff. ( ) We wish to arrange additional attendants at our own expense. (language_____ Number_____) ( ) Other ( )
Others if any	

Application deadline: June 30, 2004

To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

Pavilion Attendant Recommendation Form (Form vi-602)

This form has a duplicate underneath. Please  
complete the form using a typewriter.

(Do not enter here.)

Received

No.

Date: (Y) (M) (D)

Date \_\_\_\_\_, 200\_

Mr. TSUKAMOTO Hiroshi, President  
Japan External Trade Organization (JETRO)

Name of Section	
Name of Commissioner General of Section	
Signature of Commissioner General of Section	

We recommend the following candidate for deployment as a pavilion attendant in this section.

Candidate Pavilion Attendant Data Sheet

Name			
Nationality		Gender	
Address			
Employment			
Relationship with your country			
Expected role			
Languages	(a) _____ (level: _____) (b) _____ (level: _____)		
Remarks			

To JETRO Tokyo Headquarters  
Fax: +81-3-3505-0450

Application Form for Financial Support of PR-related Expenses (Form vii-701)

This form has a duplicate underneath. Please  
complete the form using a typewriter.

(Do not enter here.)  
  
Received  
No.  
Date: (Y)      (M)      (D)

Date \_\_\_\_\_, 200\_

Mr. TSUKAMOTO Hiroshi, President  
Japan External Trade Organization (JETRO)

Name of Section	
Name of Commissioner General of Section	
Signature of Commissioner General of Section	

We hereby apply for financial support for PR-related expenses as detailed below in connection with participation in the 2005 World Exposition, Aichi, Japan.

1. Payment statement

For each item, please attach proof of payment in the form of invoices, delivery notes, receipts, and sample of material.

Note: Please attach original vouchers (not copies). Vouchers with altered amounts will not be accepted.

Item No.	Amount in yen (incl. Tax)	Description (quantity)	Payees (Address, contact details)	Payment date
E.g.	¥945,000	Pamphlets for distribution to visitors at pavilion (10,000 copies)	XYZ Promotions, Ltd Minato-ku, Tokyo Telephone: (03)3333.....	3/10/2005
1				
2				
3				
Total		Note: The limit for financial support from the Japanese government is ¥1.05 million (including tax). Participants are responsible for any additional amount if the total exceeds ¥1.05 million.		

2. Account for transfers

Funds can only be deposited in bank accounts in Japan. Overseas transfers are not available.

Bank	
Account type	
Account number	
Account name	
Address	
Telephone	

Application deadline: January 14, 2005

To the Association  
Fax: +81-52-569-2114

Application Form for Financial Support of Customs Clearance, Transportation,  
and Handling of Cargo Expenses (Form viii-801)

This form has a duplicate underneath. Please  
complete the form using a typewriter.

(Do not enter here.)

Received  
No.

Date: (Y) (M) (D)

Date \_\_\_\_\_, 200\_

Mr. NAKAMURA Toshio, Secretary-General  
Japan Association for the 2005 World Exposition

Name of Section	
Name of Commissioner General of Section	
Signature of Commissioner General of Section	

As an official participant at the 2005 World Exposition, Aichi, Japan in \_\_\_\_\_ (name of the section), we agree to abide by Special Regulation No. 7 concerning customs clearance, transportation, and handling of cargo, and provisions of Chapter II-viii of these Guidelines, and we hereby apply for support with related expenses.

(company name) \_\_\_\_\_

has been appointed as off-site cargo handler, and

(company name) \_\_\_\_\_

as on-site cargo handlers for (name of the section) \_\_\_\_\_.

Please make payments for expenses covered by financial support to these companies.