

ご注意

- ## はじめに

必要書類は、緊急連絡先
の下に記載があります。

Joint Guarantor

Please provide the representative's information.

Domestic emergency contact

【不動産会社様へ】
弊社には「変更通知書」で
ご申請ください。

物件概要

弊社の保証料は記載しないでください。

保証種類

希望するプランにチェックを入れてください。

管理会社・仲介会社

必ずご記入ください。
管理会社様には審査結果
をお送りいたします。

GTN Global Trust Networks		TRUST NET21 APPLICATION FORM (CORPORATION)		E-mail : check@gtm.co.jp FAX : 03-6685-5734	
Cautions Document and phone screening will be conducted. Without the necessary documents, the screening cannot proceed. Thank you for your cooperation.		The documents required depend on the visa status of the representative. We will contact the joint guarantor (representative), emergency contact, and the tenant. (Please fill out the form completely.) Calling Hours 10:00 AM - 6:00 PM (Japan time) Caller (GTN) Number: 03-5956-6303 Depending on the screening process, GTN may ask for a deposit in order to get your application accepted.			
I (the applicant) agree to the attached document Personal Information Privacy Policy. I confirm that my family and domestic emergency contacts gave their consent upon applying for this service. *This document must be filled in by the applicant. (It can be filled in English, Chinese or Korean).					
Joint Guarantor (Representative) Furigana カシキカイセイジョーエヌ Registered business name 株式会社 GTN Address 1-2-3.Ichigayahonmura-cho,Shinjuku-ku,Tokyo,JAPAN Tel 03 - 1234 - 5678 Fax 03 - 1234 - 9876 Business description 飲食店 No. of employees 10人 Capital 1000 Yen Annual sales 1000 Yen Total settlement 2:0 2:3 Year 7 Month 1 Date		Representative John Global			
Applicant Furigana ジョン グローバル Name John Global Mobile phone number 090 - 1234 - 5678 Telephone number 03 - 2222 - 3333 Email john_global@abc.co.jp Visa status 特定技能 Nationality アメリカ Current address 1-2-3,Konao,Minato-ku,Tokyo,JAPAN Date of birth 1 9 8 6 Year 4 Month 1 Date Sex Male Preferred language Japanese English Chinese Korean Other ()		If there are co-tenants, please fill in p. 2 of the application form.			
Family emergency contact *One of your parents or siblings. For student visa holders, it must be one of your parents. Furigana サラ グローバル Name Sala Global Mobile 212 - 000 - 0000 Sex Male Relationship 母 Current address 203, Pennsylvania, Avenue NW Washington, DC Nationality アメリカ Date of birth 1 9 6 1 Year 7 Month 1 Date Email sala_global@abc.co.jp Preferred language Japanese English Chinese Korean Other ()					
Emergency contacts Domestic emergency contact *Resident of Japan. Nationality and Japanese proficiency are not required. Corporations are not allowed. Employees of the applicant corporation may fill out this form. Furigana キン カ Name 金華 Mobile 090 - 3344 - 5566 Sex Male Relationship 知人 Current address 1-1-1,Shinkiba,Koto-ku,Tokyo,JAPAN Nationality 中国 Date of birth 1 9 8 6 Year 1 0 Month 1 2 Date Email jinhua_1122@efg.co.jp Preferred language Japanese English Chinese Korean Other ()					
Required Documents 1.Certificate of commercial registration(商業登記簿原本) (issued within 3 months) 2.Financial Statement(the latest fiscal year) 3.Verification documents of the joint guarantor (representative) 4.Sole certificate of the joint guarantor (representative) If there are any residents, please provide the following documents of all residents. 1.Copies of Residence Card (front and back) and Passport 2.Proof of employment For applicants still residing abroad, please provide a copy of your passport (the page with your photo) or a copy of the Certificate of Eligibility For applications with co-tenants, a copy of EVERYONE's residence card is required. *Additional documents may be required depending on the case.					
会社仕田欄 申込日 20 2 0 年 1 2 月 1 0 日 入居希望日 1 2 月 2 2 日 物件名 GTNビル 1階 号室 物件用途 SOHO 事務所 店舗 住所 〒 1 0 4 - 0 0 5 4 東京 中央 区市 勝どき1-2 家賃 95000 円 管理費・共益費 5000 円 その他費用 15000 円 駐車場料金 敷金 保証金 契約同行料金 解約予告 敷引き(償却) 月額賃料TOTAL 115000 円					
保証種類 ※希望の保証種類にチェックを入れてください。 集金代行型 [RP]PLUS事業用 初回保証委託料 最低保証料 定期払い保証委託料 決済手数料 年間保証料は別途、収納手数料500円(税込)が発生します。 事故報告型 TN事業用					
管理会社名 審査時不備内容確認先 仲介会社名 元付 客付 審査時不備内容確認先 住所 ご担当者 住所 仲介会社 住所 ご担当者 TEL TEL FAX FAX					

管理会社様・仲介会社様でご記入ください。

審査の進捗・不備の確認について

代理店登録を頂いている管理会社様は、GTN 業務支援システム「HONEST」から審査の進捗・不備の確認ができます。システムにログインし、メニュー「案件一覧・契約書ダウンロード」よりご確認ください。
(操作等はログイン後、画面右上「操作マニュアル」をご覧ください。)

IDが不明・新規ID発行希望の方は営業担当またはグローバル保証営業部宛 (sales@qtn.co.jp) へご連絡ください。

[HONEST紹介サイト](#)





Document and phone screening will be conducted. Without the necessary documents, the screening cannot proceed. Thank you for your cooperation.

- The documents required depend on the visa status of the representative.
- We will contact the joint guarantor (representative), emergency contact, and the tenant. (Please fill out the form completely.)
Calling Hours 10:00 AM - 6:00 PM (Japan time) Caller (GTN) Number: 03-5956-6303
- Depending on the screening process, GTN may ask for a deposit in order to get your application accepted.



I (the applicant) agree to the attached document Personal Information Privacy Policy. I confirm that my family and domestic emergency contacts gave their consent upon applying for this service. ***This document must be filled in by the applicant. (It can be filled in English, Chinese or Korean).**

Joint Guarantor (Representative)	Furigana Registered business name											Representative																																						
	Address																																																	
	Tel						-						-						Fax						-																									
	Business description											No. of employees			人	Capital						Yen						Annual sales						Yen						Date of Establishment			Year			Month			Date	

連帯保証人(代表者)	Furigana Name											Mobile phone number						-						-						Telephone number						-					
	Email																					Visa status						Nationality													
	Current address																																								
	Date of birth			Year			Month			Date			Sex	☐ Male ☐ Female		Preferred language	☐ Japanese ☐ English ☐ Chinese ☐ Korean ☐ Other ()																								

If there are co-tenants, please fill in p. 2 of the application form.

Emergency contacts	Family emergency contact		*One of your parents or siblings. For student visa holders, it must be one of your parents.																																
	Furigana Name											Mobile						-						-						Sex	☐ Male ☐ Female		Relationship		
	Current address																					Nationality													
	Date of birth			Year			Month			Date			Email						Preferred language	☐ Japanese ☐ English ☐ Chinese ☐ Korean ☐ Other ()															
	Domestic emergency contact		*Resident of Japan. Nationality and Japanese proficiency are not required. Corporations are not allowed. Employees of the applicant corporation may fill out this form.																																
	Furigana Name											Mobile						-						-						Sex	☐ Male ☐ Female		Relationship		

Required documents	1. Certificate of commercial registration (商業登記簿謄本) (issued within 3 months) 2. Financial Statement (the latest fiscal year) 3. Identification documents of the joint guarantor (representative) 4. Seal certificate of the joint guarantor (representative)	If there are any residents, please provide the the following documents of all residents.	1. Copies of Residence Card (front and back) and Passport 2. Proof of employment	For applicants still residing abroad, please provide a copy of your passport (the page with your photo) or a copy of the Certificate of Eligibility For applications with co-tenants, a copy of EVERYONE's residence card is required. *Additional documents may be required depending on the case.
--------------------	--	--	---	--

会社使用欄

物件概要	申込日	20	年	月	日	入居希望日	月	日	物件名											号室	物件用途	☐ 事務所 ☐ 店舗 ☐ SOHO												
	住所	〒						都 ☐ 道 ☐ 府 ☐ 県 ☐	区 ☐ 市 ☐ 郡 ☐																									
	③家賃						円	⑤管理費・共益費						円	⑥その他費用						円	④駐車場料金						円						
	☐ 敷金 ☐ 保証金						円	契約同行料金						円	解約予告						ヶ月	敷引き(償却)						ヶ月	③+⑤+⑥+④ 月額賃料TOTAL					

保証種類	※希望の保証種類にチェックを入れてください。						
	☒ 保証種類	プラン名	初回保証委託料	最低保証料	定期払い保証委託料	決済手数料	年間保証料は別途、収納手数料500円(税込)が発生します。
	☐ 集金代行型	【RP】PLUS事業用	100%	50,000円	月額賃料等の1%/月間(最低 2,000円)	330円	
☐ 事故報告型	TN事業用	100%	50,000円	月額賃料等の10%/年間(最低 30,000円)	—		

管理会社	管理会社名											☐ 審査時不備内容確認先
	住所											ご担当者
	TEL											
	FAX											

仲介会社	仲介会社名											☐ 元付 ☐ 客付	☐ 審査時不備内容確認先
	住所											ご担当者	
	TEL												
	FAX												