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| 《空き家登録相談申込書》 | | | | | | | | |
| 令和　　年　　月　　日  対応：電話・来庁　　№ | | | | | | | | |
| （フリガナ） |  | |  |  | |  | |  |
|  |  | |  |  | |
| 氏　名 |  | |  |  | |  | |  |
|  |  | |  | 性　別 | | 男性 | | ・　　女性 |
|  | 〒 |  | |  | | | | |
| 住　所 |  |  | |  | | | | |
| 連絡先 | TEL |  | | | 携帯電話 | |  | |
| FAX |  | | | メール | |  | |
| 登録物件の住所 | | | | | | | | |
| 賃貸の場合：ペット可もしくは不可　　　　　　　　滞納：ある　なし | | | | | | | | |
| 所有者の要望 | | | | | | | | |
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| 特　　徴 | | | | | | | | |
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| 担当者記入欄 | | | | | | | | |
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