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様式第４－②

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| 中小企業信用保険法第２条第５項第４号の規定による認定申請書令和　　年　　月　　日　嘉島町長　殿申請者住　所　　　　　　　　　　　　　　　　　　　　名　称　　　　　　　　　　　　　　　　　　　　代表者の氏名　　　　　　　　　　　　　　　　印　　私は、新型コロナウイルス感染症の発生に起因して、下記のとおり、経営の安定に支障が生じておりますので、中小企業信用保険法第２条第５項第４号の規定に基づき認定されるようお願いします。記１　事業開始年月日 年　　月　　日２ （１）売上高等 　 　（イ）最近１か月間の売上高等 　 減少率　　　　％（実績） 　 Ｃ－Ａ　 　 Ｃ 　 ×100  　 　 Ａ：災害等の発生における最近１か月間の売上高等 　　　　　　　　　　　　　　　　　　　　　　　　　　　　円　 　 Ｂ：Ａの期間前２か月間の売上高等 　　　　　　　　　　　　　　　　　　　　　　　　　　　　円 　　　Ｃ：最近３か月間の売上高等の平均 　　　　　　　　　　　　　　　円 　（Ａ＋Ｂ） 　 ３  |

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　①　本様式は、業歴３ヶ月以上１年１ヶ月未満の場合あるいは前年以降、事業拡大等により前年

比較が適当でない特段の事情がある場合に使用します。

②　本認定とは別に、金融機関及び信用保証協会による金融上の審査があります。

③　嘉島町長から認定を受けた後、本認定の有効期間内に金融機関又は信用保証協会に対して、経営安定関連保証の申込みを行うことが必要です。

嘉企第　　　　　号

令和　　　年　　　月　　　日

申請のとおり相違ないことを認定します。

　　　　　　　　　　　　　　　　　嘉島町長

本認定書の有効期間：令和　　年　　月　　日から令和　　年　　月　　日まで