Applications from Overseas for the Issuance of Atomic Bomb Survivor's Certificates

The revision of the Law concerning Relief to Atomic Bomb Survivors enables atomic bomb survivors living abroad to apply for the issuance of Atomic Bomb Survivor's Certificates without visiting Japan, effective on December 15, 2008. Details are as follows.

1. Eligible persons

Those who satisfy the requirements as atomic bomb survivors, such as being present in Hiroshima City or Nagasaki City at the time of atomic bombing (see pages 1 and 2 for details), but have not had their Atomic Bomb Survivor's Certificates issued as yet.

2. Submitting an application

One may submit an application at the Japanese Embassy or the Consulate General in charge of his or her residential area. In Taiwan, applications should be submitted at the Interchange Association Japan. These institutions will be hereafter referred to as "Japanese Embassy, etc."

Submission of an application, in principle, should be made in person at the Japanese Embassy, etc. due to identification reasons. Under certain conditions, a proxy is allowed to submit an application. (An application by mail will not be accepted.)

3. Application form and documents

An application should be in required forms together with evidences demonstrating that the applicant is an atomic bomb survivor. Required forms are listed on page 3.

4. Examination of applications

The Japanese Embassy, etc., after having identified an applicant, receives his/her application that is complete. The application is then forwarded to the relevant Governor or City Mayor, depending on the locality of the applicant at time of bombing. Upon receiving the application, the authority of Hiroshima or Nagasaki Prefecture, or Hiroshima or Nagasaki City, will conduct an examination whether all the requirements for issuing the Atomic Bomb Survivor's Certificate are fulfilled. In the course of this examination, inquiries or an interview to the applicant in his/her country will be indispensable.

5. Issuance of the Atomic Bomb Survivor's Certificate

If it is confirmed that all the requirements for the Atomic Bomb Survivor's Certificate are met, the Atomic Bomb Survivor's Certificate will be issued and handed over to the applicant at the Japanese Embassy, etc. If the applicant is not able to show him/herself at the Japanese Embassy, etc. his/her proxy is to receive the Atomic Bomb Survivor's Certificate on behalf of the applicant. (Alternatively, the Atomic Bomb Survivor's Certificate may be sent to the applicant by mail.)

If it is not confirmed that all the requirements for the Atomic Bomb Survivor's Certificate are not fulfilled, the local authority of Hiroshima or Nagasaki City or Prefecture will notify thereof to the applicant.

6. Inquiry

For clarification or further information, please inquire at the Japanese Embassy, etc., or the authority of Hiroshima or Nagasaki City or Prefecture.

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1. Persons who are entitled for the issuance of Atomic Bomb Survivor's Certificate

Persons who satisfy any of 1) to 4) below are entitled for the issuance of Atomic Bomb Survivor's Certificate (hereinafter referred to as "Certificate(s)".

- 1) Who survived atomic bombing in person in Hiroshima City or Nagasaki City, or the specified neighboring areas*1 at the time of bombing.
- Who entered the specified area(s) within Hiroshima or Nagasaki City (within the range of approximately two kilometers of the hypocenter*2), within two weeks of respective atomic bombing (by August 20, 1945 for Hiroshima, and by August 23, 1945 for Nagasaki), for the purpose of relief operations, medical services, search for relatives etc.
- 3) Who received the influence of radioactivity at the time of or following atomic bombing, for reasons such as treating numerous bodies, participating in the relief of survivors, etc.
- 4) Who was an embryo or fetus of a person who satisfied any of 1) to 3) in those days.
 - *1 Hiroshima City or Nagasaki City, or the specified neighboring areas of those days

Hiroshima	a.	Within Hiroshima City
	b.	Gion-cho, Asa County, Hiroshima Prefecture
	c.	Kurumegi of Hesaka-mura, Aki County, Hiroshima Prefecture
	d.	Naka, Ochikubo, Kita Hirabara, Nishi Hrabara and Yorita of Nakayama-mura, Aki County, Hiroshima Prefecture
	e.	Mokage Kita of Fuchu-cho, Aki County, Hiroshima Prefecture
Nagasaki	a.	Within Nagasaki City
	b.	Oura Go, Koura Go, Motomura Go, Koe Go and Koebaru Go of Fukuda-mura, Nishi Sonogi County, Nagasaki Prefecture
	c.	Kouda Go and Yoshimuta Go of Nagayo-mura, Nishi Sonogi County, Nagasaki Prefecture

Hiroshima

Kusunoki-cho 1 cho-me, Kusunoki-cho 2 cho-me, Kusunoki-cho 3 cho-me, Misasa Hon-machi 1 cho-me, Misasa Hon-machi 2 cho-me, Yokogawa-cho 1 cho-me, Yokogawa-cho 2 cho-me, Yokogawa-cho 3 cho-me, Uchikoshi-cho, Yamate-cho, Minami Misasa-cho, Fukushima-cho, Nakahiro-cho, Kami Temma-cho, Temma-cho, Nishi Temma-cho, Higashi Kannon-machi 1 cho-me, Higashi Kannon-machi 2 chome, Nishi Kannon-machi 1 cho-me, Nishi Kannon-machi 2 cho-me, Kannon Honmachi, Minami Kannon-machi, Hirose Kita-machi, Tera-machi, Sorazaya-cho, Nishi Hiki Mido-cho, Hirose Moto-machi, Takajo-machi, Nishiki-machi, Yokobori-cho, Kita Eno-machi, Shin Ichi-machi, Eno-machi, Nishi Kuken-cho, Nishi Daiku-machi, Tokaichi-machi, Sakan-cho, Kajiya-cho, Aburaya-cho, Nekoya-cho, Tsukamoto-cho, Sakai-machi 1 cho-me, Sakai-machi 2 cho-me, Sakai-machi 3 cho-me, Sakai-machi 4 cho-me, Nishi Jigata-machi, Nishi Shin-machi, Koami-cho, Kawara-machi, Funairicho, Funairi Naka-machi, Funairi Moto-machi, Funairi Saiwai-cho, Funairi Kawaguchi-cho, Nakajima Hon-machi, Zaimoku-cho, Tenjin-machi, Kobiki-cho, Moto Yanagi-cho, Nakajima Shin-machi, Kako-machi, Yoshijima-cho, Yoshijima Hagoromo-cho, Hakushima Kita-machi, Hakushima Naka-machi, Hakushima Higashi Naka-machi, Hakushima Kuken-cho, Hakushima Nishi Naka-machi, Nishi Hakushima-cho, Higashi Hakushima-cho, Moto-machi, Sarugaku-cho, Saiku-machi, Yoko-machi, Toriya-cho, Ote-machi 1 cho-me, Ote-machi 2 cho-me, Ote-machi, 3 cho-me, Ote-machi 4 cho-me, Ote-machi 5 cho-me, Ote-machi 6 cho-me, Ote-machi 7 cho-me, Ote-machi 8 cho-me, Ote-machi 9 cho-me, Shioya-cho, Onomichi-cho, Kamiya-cho, Togiya-cho, Kawaya-cho, Tate-machi, Higashi Uoya-cho, Haccho Bori, Kami Nagarekawa-cho, Nobori-cho, Kami Yanagi-cho, Teppo-cho, Hashimoto-cho, Iwamiya-cho, Ebisu-cho, Higashi Ebisu-cho, Yamaguchi-cho, Shimo Yanagi-cho, Kanayama-cho, Yayoi-cho, Yagenbori-cho, Chigiya-cho, Shimo Nagarekawa-cho, Horikawa-cho, Mikawa-cho, Hirataya-cho, Harimaya-cho, Nishi Uoya-cho, Nakancho, Teppoya-cho, Fukuro-machi, Shimo Nakan-cho, Shin Senba-cho, Ko-machi, Zakoba-cho, Kokutaiji-machi, Takeya-cho, Tanaka-cho, Hiratsuka-cho, Tsurumi-cho, Takara-machi, Fujimi-cho, Showa-machi, Hirano-machi, Minami Takeya-cho, Higashi Senda-machi, Senda-machi 1 cho-me, Senda-machi 2 cho-me, Senda-machi 3 cho-me, Daiya-cho, Kyobashi-cho, Matoba-cho, Kanaya-cho, Hijiyama-cho, Inari-machi, Matsukawa-cho, Dote-cho, Kirinoki-cho, Danbara Ohata-cho, Danbara-cho, Danbara Higashiura-cho, Hijiyama Hon-machi, Minami-machi 1 cho-me, Futaba no Sato, Osuga-cho, Matsubara-cho and Enkobashi-cho of Hiroshima City of those days

Nagasaki

Nishi Kita Go, Higashi Kita Go, Ieno Go, Sai Go, Ieno-machi, Ohashi-machi, Okamachi, Hashiguchi-machi, Yamazato-machi, Sakamoto-machi, Motoo-machi, Ueno-machi, Ebira-machi, Takao-machi, Motohara-machi, Matsuyama-machi, Komaba-machi, Shiroyama-machi, Hamaguchi-machi, Takenokubo-machi, Inasa-machi 2 cho-me, Inasa-machi 3 cho-me, Asahi-machi 1 cho-me, Iwakawa-machi, Mezame-machi, Urakami-machi, Mori-machi, Zenza-machi, Ibinokuchi-machi, Funakura-machi, Takara-machi, Kotobuki-machi, Saiwai-machi, Fukutomi-machi, Tamanami-machi, Yanase-machi, Takasago-machi, Ofunakura-machi, Mifune-machi, Yachiyo-machi, Sezaki-machi and Hamabira-machi of Nagasaki City of those days

2. Procedures for receiving the issuance of Certificate

- In order to receive the issuance of Certificate, please visit the Japanese Embassy, etc. in (1) the country, region, etc. of your residence, and lodge application by submitting necessary documents including the Application Form for the Issuance of Atomic Bomb Survivor's Certificate (page 9), and documents that verify atomic bomb survival, as listed below.
 - Necessary documents required for the application of the issuance of Certificate

[Documents for application]

- Application Form for the Issuance of Atomic Bomb Survivor's Certificate (filled out, 1) one copy) and its duplicate (one copy) (page 9)
- Statement on the situation of atomic bomb survival etc. (one copy) and its duplicate 2) (one copy) (pages 10-16)
- 3) Documentation that verifies atomic bomb survival (one copy) and its duplicate (one

Any of the following documents:

Sufferer's certificate of those days, or other certificates issued by public institutions

Letters, photos and/or other records of those days

A certificate issued by a municipal head etc.

A certificate written by at least two third-party persons (excluding relatives within the third degrees) (page 18)

If you cannot these documents because you do not possess certificates etc., you cannot find a certifier, or for other reasons, you do not have to submit these documents.

If you were an embryo or fetus of a mother who survived atomic bombing ("in utero atomic bomb survivors"), and if your mother has received the issuance of Certificate, the documents (a) to (d) need not be attached. Instead, please attach a copy or extract of family register that verifies relationship with the mother and the date of birth of the applicant, etc.

If you have "statements of recognition for situation with regard to atomic bomb (atomic bomb survivor statements of recognition)", please attach their copy as well.

Written agreement to an inquiry survey by the prefectural or municipal authority (one 4) copy) and its duplicate (one copy) (page 20)

[Documents for verifying identity]

A valid photographed personal identification document issued by the central or local government of the country of residence of the applicant, or other document with which personal identity can be verified (original) and duplicates (two copies)

Example) Passport, driver's license, certificate of alien registration, work permit, permanent

Example) resident visa, resident registration certificate etc.

Or other document that can verify the applicant's identity, such as a certificate issued by a governmental body within a month of lodging application (one copy) and its duplicate (one copy).

A copy of family register, an extract of family register, certificate by a notary public, Example)

resident permit, residence certificate, etc.

In the case where personal identification documents cannot prove the applicant's current 6) address, a document that proves the applicant's current address (one copy) and its duplicate (one copy)

Invoice (or receipt) for a public service, an item of mail addressed to the applicant, Example) residence certificate, a copy of resident registration etc.

[In the case where a proxy lodges the application]

In addition to the documents specified in 1) to 4) and 6) above, the following documents will be required.

- Statement by the applicant himself or herself stating the reason why he or she a) cannot lodge the application in person (one copy) and its duplicate (one copy) (page 21)
- A letter of Power of Attorney (one copy) and its duplicate (one copy) (page 22) b)
- A document that verifies identity of the proxy as described in 5) above c)
- For the applicant, documentation that can verify his or her identity, such as an d) certificate issued by a governmental body within a month of lodging application (one copy) and its duplicate (one copy)

[Point of notice]

The documents for application listed in 1) to 3) above shall be written, in principle, in Japanese.

If these documents are written in other languages than Japanese, please note that the examination of the application will be processed only after documents have been translated into Japanese language at the authority of Hiroshima or Nagasaki City or Prefecture (hereafter referred to as "Prefectural or Municipal Authority"). It is feared that the examination of application in other language than Japanese will need more time. It will also be possible that delicate descriptions or accuracy will not fully be reflected in the course of the translation process.

- (2) The documents for application should be submitted at the Japanese Embassy, etc. in charge of the area of your residence. The duly submitted application will be forwards by the Japanese Embassy, etc. to the responsible Prefectural or Municipal Authority that governs the location where the applicant suffered the atomic radiation.
 - *1 Application documents to be submitted to the Japanese Embassy, etc. will be forwarded to the following authority for examination.

	Applicant		Relevant examination institution
1)	Who survived atomic bombing in person in Hiroshima City or Nagasaki City, or the specified neighboring areas at the time of bombing.	• S	Survivors of the atomic bombing in Hiroshima Mayor of Hiroshima City Governor of Hiroshima Prefecture for specified persons (note)) Survivors of the atomic bombing in Nagasaki Mayor of Nagasaki City Governor of Nagasaki Prefecture for specified persons (note))
2)	Who entered the specified area(s) within Hiroshima or Nagasaki City, within two weeks of respective atomic bombings.) /	Who entered the specified area(s) within Hiroshima City → Mayor of Hiroshima City Who entered the specified area(s) within Nagasaki City → Mayor of Nagasaki City
3)	Who suffered radioactivity of either of the atomic bombings as relief operator or helper, or in search of relatives, etc.	Auth	ernor or Mayor of the Prefectural or Municipal nority, who governs current place of the relief ations etc.
4)	Who was an embryo or fetus of a person who satisfied any of 1) to 3) in those days.	Auth	ernor or Mayor of the Prefectural or Municipal nority, who governs the place of the mother's atomic b survival at present (see 1) to 3) above)

Note: The applications of those who survived atomic bombing in Mokage Kita, Fuchu-machi, Aki County, Hiroshima Prefecture will be processed by the Governor of Hiroshima Prefecture, and of those who survived atomic bombing in Takada Go or Yoshimuta Go, Nagayo-mura, Nishi Sonogi County, Nagasaki Prefecture, by the Governor of Nagasaki Prefecture.

- *2 In order to arrange the date, time, venue for the interview to the applicant in his/her country, the relevant Prefectural or Municipal Authority will contact the applicant directly. A designated person from the Prefectural or Municipal Authority will visit the country to hold a personal interview.
- (3) If the Certificate is to be issued to the applicant, it will be issued by the Prefectural or Municipal Authority and handed over to the applicant at the Japanese Embassy, etc. in charge of the area of his or her residence.

If the applicant does not fulfill either of the requirements listed from 1) to 4) of 1,the Prefectural or Municipal Authority will notify the result of the examination to the applicant.

Please note that it takes time to examine the application after it has been submitted.

- (4) If the applicant changes his/her address, or if the applicant dies after the submission of his/her application and before the result is notified, please report thereof either to the Japanese Embassy, etc. where the application was submitted or to the relevant Prefectural or Municipal Authority.
- (5) Applicants who submitted their application from overseas are not eligible for applying for the Project for Supporting Visit to Japan for Certificate Issuance (a project that provides applicants with traveling expenses for visiting Japan, in order to submit application for the Certificate in Japan; hereafter referred to as "Support Project"). If an applicant who has already applied for the Support Project would like to submit his/her application from overseas for the Certificate, please consult relevant Prefectural or Municipal Authority where the application for the Support Project has been submitted.

3 Various support programs for the holders of the Atomic Bomb Survivor's Certificate

The following allowances are eligible for the holders of the Atomic Bomb Survivor's Certificate.

(1) Receiving allowances

Holders of the Atomic Bomb Survivor's Certificate can apply for various allowances without visiting Japan. Each allowance will be granted after certification of its application.

[Major allowances]

Type of allowance	Conditions fo	or entitlement of allowance		
Health Management	For those who suffer f	rom a disease or condition that		
Allowance	involves any of the spe	ecified eleven types of		
33,800 yen (per month)	dysfunctions, which include cardiovascular dysfunctions,			
	motor dysfunctions, ce	erebrovascular disorders,		
	hematopoietic dysfunc	tions, liver dysfunctions etc.		
Health Allowance	For those who	(1) For those whom the		
(1) 16,950 yen (per month)	experienced a direct,	conditions below do not		
(2) 33,800 yen (per month)	or as an embryo or	apply.		
	fetus, exposure	(2) For those who suffer a		
	within two	physical disability as a result		
	kilometers from the	of damages from the atomic		
	center of explosion.	bomb, or those who are over		
		70 years of age, without a		
		spouse, child or grandchild,		
		and live alone.		

^{*} The amounts of allowances are as of April 2008, and are subject to future changes.

(2) Others

Other support programs include medical expense support when the applicant consults a medical institution in the country of his/her residence (up to 145,000 yen per year (up to 157,000 yen for hospitalization etc. over four or more consecutive days)) ("Medical Expense Support Project"), as well as traveling expenses for visiting Japan, if treatment in Japan is considered necessary ("Project for Supporting Treatment in Japan").

* The maximum annual support values for the Medical Expense Support Project are as of April 2008, and are subject to future changes.

4 Contact information for Hiroshima Prefecture, Nagasaki Prefecture, Hiroshima City and Nagasaki City

O Hiroshima Prefecture

A-Bomb Survivor Support Section, Health and Welfare Bureau

10-52, Moto-machi, Naka-ku, Hiroshima-shi

Phone: +81-82-228-9901 (direct line)

Fax: +81-82-228-3277

O Nagasaki Prefecture

Measures for A-Bomb Survivors Division, Department of Welfare and Public Health

2-13, Edo-machi, Nagasaki-shi

Phone: +81-95-895-2475 (direct line)

Fax: +81-95-895-2578

O Hiroshima City

Support Section, A-Bomb Damage Control Department, Health and Welfare Bureau

6-34, 1-chome, Kokutaiji-machi, Hiroshima-shi

Phone: +81-82-504-2193 (direct line)

Fax: +81-82-504-2257

O Nagasaki City

Support Division, A-Bomb Damage Control Department

2-22, Sakura-machi, Nagasaki-shi Phone: +81-95-829-1149 (direct line)

Fax: +81-95-829-1148

5 Application Form for the Issuance of Atomic Bomb Survivor's Certificate, and other related forms

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0	Power of Attorney ————————————————————————————————————

Application Form for the Issuance of Atomic Bomb Survivor's Certificate

	Domicile of o	rigin:		
	Po	stal code:		
	Address of res	sidence:		
·	Pł	one numb	er:	
	Name:			
				(Seal or signature)
	Date of birth:	· 	/	(DD/MM/YY)
To: Governor / Mayor of I hereby apply for the issuance of Atom Law Concerning the Relief to Atomic application.	iic Bomb Survi	vor's Certi		
	Date:_	/		(DD/ <u>M</u> M/YY)

Statement

Го:				Dat	e: <u>/</u>	/ (DD/MN	<u>//YY)</u>
10		•		Add: Nam	ress of residence:	ce:	
				Date	of birth:	(Seal or sig	nature)
The content of it is uncoverseponsibilities	of this S vered thes, inclu	tatement is to tat this State ading the ret	rue and con ement is un urn of the A	rect. true, I pled tomic Bom	al as follows. ge that I will b Survivor's C	take all the per ertificate.	taining
l Situatio	on at th	ie time of at	omic bomb	oing		•	
•	were	an embryo				omeone who kno ing, please expl	
		evacuation at t			(6		
2) Domicile o	of origin a cho- er's nam er:	at that time me,mu e and relations	ıra / -cho / -ma	achi, Ci t that time	ty / County,		
year year Name of year Your famil List all the	s old our work y situatio family n	place, troop, so on at that time (("Relationship ling you, and	" refers to rela	he evacuation pla ationship with the were in service, li		ing evacuation
Relationship	Sex	Name at that time Date of birth	Occupation (employer) or school at that time	Address at that time	Where the person was at the time of atomic bombing (Municipal name at that time)	Whether the person has the Atomic Bomb Survivor's Certificate, and the Certificate No. if the person has	Present address and surname (Date of death if the person has died)
Applicant							
	Male/ Female					Yes / No / Unknown	
	Male/ Female					Yes / No / Unknown	
	Male/ Female					Yes / No / Unknown	
	Male/ Female					Yes / No / Unknown	
	Male/ Female					Yes / No / Unknown	
	Male/ Female					Yes / No / Unknown (,)	
7) Symptoms 1 Burn 5 Fever	2 I	nced within six njury Loss of hair	months of ato 3 Diarrhea 7 Anemia	_	(Circle applicable ng from gum, spo	•	

2 Situation of atomic bomb survival

A Where were you at the time of atomic bombing (the moment of the explosion of the atomic (Please indicate the municipal name at that time)							b)?
	, cho-	•		,	Landm	ark.	
_			mara / -eno /	-macm	Landin	ark.	
В	What were you doi	ng there?					
С		sion of the A	tomic Bomb	Survivor	, please list the name 's Certificate, etc. for		
	Name	Surname at that time	Relationship with you	Alive or dead	Possession of Certificate	Remarks (Certificate	No. etc.)
					Yes / No / Unknown		
					Yes / No / Unknown		
ļ					Yes / No / Unknown		
<u> </u>					Yes / No / Unknown		
					Yes / No / Unknown		
					Yes / No / Unknown		
D E	(Please circle the ap 1 Indoors 2 Outdoors	oplicable num (1) Woode (1) With sh	nber.) n (2) (nade (2) (Concrete Without s	(3) Stone hade (3) Other (abing (as to burns, inj	(4) Other (
F	What did you do af	iter the atomi	c bombing? I	Please de	scribe your behavior	of that day in order.	
					1 * . 0 Dl 1	cribe your behavior i	ıntil Aı

(2)	(If y	mic bomb survivor due to entering Hiroshima or Nagasaki City ou were an embryo or fetus at the time of atomic bombing, and if your natural mother is an atomic bomb ivor due to entering Hiroshima or Nagasaki City, please explain the situation of your mother.)
ര	First	t entry
•	A	Where were you at the time of atomic bombing? (Please indicate the municipal name at that time)
		, cho-me,mura / -cho / -machi, City / County, Prefecture
	В	When did you enter the city (within the range of approximately two kilometers of the hypocenter)? Around:_ a.m. / p.m., August
		Why do you remember the above date and time?
	С	What was your destination at that time? (address, municipal or place name at that time, etc.)
	D,	What did you enter the city for? (name of the person you planned to meet, relationship with that person, reason for entering etc.)
	Е	How did your entry turn out? (Also describe the process.)
	F	By what route did you reach your destination at that time? (Please indicate the municipal name at that time, landmarks and/or transportations in order, from the place of departure to the destination.) Example. Walk Walk Walk Walk Bridge machi (Mr/Ms 's home)
	G	What impressions of the city do you remember from the time of entry? (impressions of buildings, roads, people etc.)

	If you did not hav	e company,			* ,			
	Name	Surname at that time	t Relations with yo		ve or Possessio	L	Remarks	(Certificate No. etc.)
					Yes / No / Unl	cnown		
					Yes / No / Unl	cnown		
		••			Yes / No / Unl	known		
	,				Yes / No / Unl	cnown		
		-			Yes / No / Unl	known		
					Yes / No / Unl	known		
	If you met somel name, relationship etc. for each of the If you did not med	o with you, e relevant pe	alive or de rsons.	ad statu				
	Name	Surname at that time	Relationship with you	Alive or dead	Possession of Certificate	I	rks (Certificate No. etc.)	Where you met the person (municipal n
					Yes / No / Unknown	1		
			[[Yes / No / Unknown	1		
					Yes / No / Unknown			
					Yes / No / Unknown	[]		
	*******				Yes / No / Unknown	.		
; ,		Yes (Dates es", please in	s of entry: Andicate the	August _ destinat		ate all the _th)	e dates of en	itry.
	I No 2 If you replied "Ye multiple days, ple If you had com	Yes (Dates es", please ir ase reply abo ending ending pany at tha	s of entry: Andicate the out the earl	August _ destinat liest dat	did, please indica _th, _th, _th, _ ion, route and pure.) the name, relat	ate all the th) rpose of ionship	e dates of er	ou entered the cit
	1 No 2 If you replied "Ye multiple days, ple	Yes (Dates es", please it ase reply abo pany at tha Atomic Bom	of entry: Andicate the out the earlesses of entry: Andicate the out the earlesses of entry: Andicate the earlesses of entry en	August _ destinat liest dat ease list 's Certi	did, please indica _th, _th, _th, _ ion, route and pure.) the name, relat	ate all the th) rpose of ionship	e dates of er	ou entered the cit
	I No 2 If you replied "Ye multiple days, ple If you had com possession of the	Yes (Dates es", please in ase reply abo pany at tha Atomic Borr e company, Sumame at	of entry: Andicate the out the earlest time, please time, please time indicate "Negligible Relationship	destinat liest dat liest dat less list 's Certilone'.	did, please indica _th, _th, _th, _ ion, route and pure.) the name, relatficate, etc. for each	rpose of	e dates of entry. (If you with you, relevant per	ou entered the cit
	I No 2 If you replied "Ye multiple days, ple If you had compossession of the lf you did not have	Yes (Dates es", please in ase reply abo pany at tha Atomic Born e company,	of entry: Andicate the out the earlest time, please time, please time, indicate "N	August _ destinat liest dat ease list ease list lone".	did, please indica _th,th,th, _ ion, route and pure.) the name, relatficate, etc. for each	rpose of ionship h of the	e dates of entry. (If you	ou entered the cit
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A B	school, temple et How many perso						er is an atomic bomb the situation of you		
	· · · · · · · · · · · · · · · · · · ·	Where did the relief activities, disposal of the dead etc. take place? (Specify the relief facility (name of the school, temple etc.) and the municipal name at that time.)							
С	How many persons were being cared at that relief facility? Approx persons								
	Please specify the	e period of th	e relief acti	vities, d	isposal of the dead	etc., and the days of	of your involvement		
	From Augustt	h to	_th;	days					
D	Why were you involved during the above specified days? If you were instructed by someone, please indicate that person's name, title etc.								
Е	What service(s) v l Relief and/or d Other (Please	nursing 2			the applicable nun		e dead		
F				ou care, o	or how many bodie	s did you treat?			
	<u> </u>	odies) per da							
G	If you had compa	any during the dead status	e relief act , possessio indicate "N	n of the one".	Atomic Bomb Sur	rvivor's Certificate	ne name, relationshi		
G	If you had composite you, alive or relevant persons.	any during the dead status	e relief act , possessio	n of the one".		rvivor's Certificate Remarks (Certificate	, etc. for each of the		
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(4)		mic bomb survivor as an embryo or fetus your natural mother possesses an Atomic Bomb Survivor's Certificate, please fill out pages 9, 10 and this e.)
	Α	Name of your mother at the time of atomic bombing (If her surname has changed, please indicate the present surname as well.) Name at the time of atomic bombing: (Present surname:)
	В	Please indicate your mother's Atomic Bomb Survivor's Certificate No. Certificate No. () • Unknown
	С	Please indicate your mother's present address of residence. Phone:
	D	If your mother has died, please indicate the date of death and her address at the time of death. Date of death:
		Address at the time of death:
3 Ple		thers lescribe any other useful information pertaining to your atomic bomb survival etc.
		·
		·

4 Present family status

Relationship	Name	Date of birth	Whether the person has the Atomic Bomb Survivor's Certificate, and the Certificate No. if the person has	
Applicant				
			Yes (Certificate No.)/No	
	(X.1.18) - (X.1.18)		Yes (Certificate No.) / No	
			Yes (Certificate No.) / No	
			Yes (Certificate No.) / No	
			Yes (Certificate No.) / No	
			Yes (Certificate No.) / No	
			Yes (Certificate No.) / No	
			Yes (Certificate No.) / No	

5 Certifiers

*	If you cannot attach certificates by two third party	persons, please	describe the reason.
			·
*	If this Statement was written by a person other than	n the applicant,	please fill out the following:
	Name of the person who wrote for the applicant:		(Seal or signature)
	Address of residence:		
	Relationship with the applicant:	_ Phone:	
	Reason for writing for the applicant:		

Points of notice and example of filling out the Application Form for the Issuance of Atomic Bomb Survivor's Certificate, and the Statement * Please fill out the Application Form and the Statement as specifically as possible, as far as you can.

	Page Item		. Л	Points of notice	Example		
ation n	1 age	age Rem			Write your name, and affix a seal or sign below	елаприс	
		Name	Name			,	
Application Form	9	Date (bottom line of the Form)		e	Indicate the date when you submit the Application Form to the office.		
	1-(1) Address or place of evacuation at that time				If you were evacuated, please write the address of the evacuation site.	,	
	11	^ B			Write what you were doing at the time of atomic bombing.	After families left home after breakfast, I was washing dishes at the kitchen.	
			С		Please include the persons who have died.		
			E		Please describe the situation of you and your surroundings.	I saw a flash, and got injured in the left hand by window glass that was broken by the blast wave. Fortunately, my mother and the eldest daughter did not get injured because they were in a back room. All the furniture was broken, half of the ceiling sank, and it was terrible.	
		2-(1) Direct atomic bomb survivor or sea atomic bomb	or F		Please describe your behavior of that day following the atomic bombing in order.	l evacuated to a bamboo grove in Oshiba, together with my mother and the eldest daughter. Subsequently, we evacuated to the mountain of Mitaki, which was awash with people from everywhere of the city. We three stayed still in the mountain. There were many people with burns, and it was disastrous.	
		survivor			Please describe your behavior from the day following the atomic bombing (August 7th for Hiroshima and August 10th for Nagasaki), until August 20th for Hiroshima, and until August 23rd for Nagasaki, in order.	On the following day, we left the mountain and went home in the early morning. The house was damaged, but we managed to live in it. My husband, Taro, did not come home from his office (Company A in Minami Kannon-machi). I was worried, but decided to start fixing the furniture and ceiling with my mother. Just then, my husband came home, seemingly fine without an injury. So we fixed the house together, and lived on.	
				С	If there were multiple destinations, please indicate all of them.	Tsurumi-cho (near the west end of the Tsurumi Bridge)	
				Ť	If there were multiple purposes, please indicate all of them.	Senda-machi (our home) Taro, our eldest son, had not come home from the building	
		2-(2) Atomic bomb survivor due to enterior Hiroshima or Nagasaki City		D		evacuation work near the Tsurumi Bridge, to which he was sent from ** Junior High School. So I went to see whether he was safe. Also, I went to check the status of our home.	
ut			First entry	First entry	E	Please describe how your entry turned out, and its process.	When I came to Tsurumi-machi, I found that the neighborhood was completely burnt down. I also searched around the City Hall and the relief station of Japanese Red Cross Hospital, but could not find my son. Subsequently, I went to our home in Senda-machi, but nothing remained after burning down. So I gave up and returned to the place of evacuation.
Statement						Please indicate the municipal name at that time, landmarks and/or transportations in order, through your route from the place of departure to the destination.	walk ship walk Place of evacuation → Kamagari Port → Ujina Port → walk walk walk Monopoly Bureau → Hijiyama Bridge → Tsurumi Bridge →
				F	If you took different routes to and from the destination, please indicate both.	walk walk walk Kokutaiji → Japanese Red Cross Hospital → Senda-machi → ship walk	
				G	Please describe impressions of the city that you remember from the time of entry.	Ujina Port → Kamagari Port → Place of evacuation Everywhere was completely destroyed by fire. I smelled a strange smell. The road was out of control, so I walked in line with the railroad. I looked into the river from the bridge, and saw dead bodies were still floating.	
					Please include the persons who have died. Please include the persons who have died.		
			ō	_	Make sure to circle either I or 2. If you circled I, B to D need not be filled.	2 Yes (Dates of entry: August 18th, 20th, _th, _th)	
			Entries after the first entry	В	Please indicate the destination, route and purpose of entry, for each entry.	Because the war ended, I went to Senda-machi by the same route as my first entry, to clean up the site of our home.	
			tries first		Please include the persons who have died.		
			E	D	Please include the persons who have died.		
	14	2-(3)	115		Why were you involved during the specified days? If you	On the evening of August 6, I received an instruction from Ms	
		Atomic bomb			were instructed by someone, please indicate that person's name etc.	XX of Women's Association, and joined the relief operation at the YY People's School, from the following day until the injured persons were transferred to hospitals.	
		survivor due to involvement	G		Please include the persons who have died.		
		in relief activities, disposal of the dead etc.			Please describe specifically the surrounding situations during the relief activities etc., and activities you did.	When I arrived, many people with terrible burns and injuries were being cared. I applied external medicine and bandage to them, wiped their bodies, etc.	
	15	2-(4) Atomic bomb survivor as an embryo or fetus		. 1	If you were an embryo or fetus of a mother who survived atomic bombing, please fill out this section. If your mother does not possess an Atomic Bomb Survivor's Certificate, please indicate "None" in the Certificate No. column of B.		
		3 Others	3 Others		Please describe any other useful information.		
	16 4 Present family status			atus	Please list the persons who live together with you.		

Certificate of Atomic Bomb Survival

(for Atomic Bomb Survivor's Certificate)

Name: (Surname at the time of atomic bombing: Seal or signature:							
Residence: (Postal code) Residence at the time of atomic bombing:	Date of birth: / / (DD/MM/YY) Age at the time of atomic bombing: Phone (home): (office):						
Residence at the time of atomic bombing: Occupation, school etc. at the time of atomic bombing:	Where the certifier was at the time of atomic bombing: Atomic Bomb Survivor's Certificate No.: Health Examination Receiver No.:						
I hereby certify as follows pertaining to Applicant's name.							
Applicant's atomic bomb survival (I knew the applicant's direct atomic bomb survival, entry into the city, involvement in relief activities etc. because of the following reason):							
	Note: Please describe as specifically as possible the date, time, place and anything else that you know. * If this Certificate was written by a person other than the certifier, please fill out the following:						
	son other than the certifier, please fill out the						

Points of notice and example of filling out the certificate of atomic bomb survival

	Item	Points of notice	Example
	Date	Please indicate the date of certification.	
About the certifier	at the time of atomic bombing	Please indicate as specific information as possible, such as the municipal name at that time.	At home in ZZ-cho
	name	Please indicate the applicant's present name, even if the surname differs from the one at the time of atomic bombing.	
	with the applicant	Please specify, not just a "friend" or "neighbor".	 We were classmates at AA Women's High School in Hiroshima. We also lived nearby, and had known each other very well. We knew each other very well, because we lived next door and were close family friends before evacuation. We knew each other very well, because we lived nearby, and belonged to the same Women's Defense Association.
About the applicant	atomic bomb	Please specify the time, place, situation, reason etc. pertaining to the applicant's atomic bomb survival.	(Direct atomic bomb survivor) Atomic bombing occurred when I was cleaning my house. I jumped out of the house in a hurry, and saw the applicant also jumping out of her house with her children. So we went to the bamboo grove in Oshiba together, and stayed there until around noon. (Entry into the city) Around noon of August 7th, I passed by the City Hall in Kokutaiji-machi, when I was called to from behind. I looked back and found the applicant there. The applicant said that she was looking for her son, who went missing during student mobilization. We encouraged each other, and separated shortly. (Relief activities etc.) From around evening of August 6th, injured people were being transferred to BB People's School. I received an instruction from Ms CC of the Women's Defense Association, and joined the relief activities every day from the morning of August 7th to the evening of August 31st. I was engaged in the activities together with the applicant every day from the morning of August 7th to the evening of August 7th to the evening of August 9th. I saw her applying external medicine to many people, and wiping their bodies.

Written Agreement

	Date:/(DD/MM/YY)
To:	
	Address of residence:
•	Name:
	(Seal or signature)
	Date of birth:
	tion for the issuance of Atomic Bomb Survivor's Certificate, I
agencies and other related or	survey of a copy of family register, school register etc. at public rganizations, concerning me or my relatives, by Governor/Mayor essary for the verification of my atomic bomb survival.

Statement for Proxy Application

	Date:/	/ (DD/MM/YY)
To:		:
	Address of residence	ce:
	Name:	(Seal or signature)
	•	(Seal or signature)
	Date:	
I hereby state that I am unable to come to the offic (Embassy / Consulate-General of Japan in		
Contents of statement (in detail)		
	•	
·		·····

Power of Attorney

			Date:	/	1	(DD/MM/YY)
To:						
			The princi Address		ence:	
			Name:			(Seal or signature)
					((Seal or signature)
			Date:			
						,
I hereby entrust the ager concerning the submission Survivor's Certificate.	nt named of docur	l below wents nec	with complete essary to apply	power for the	of attor issuance	ney over matters e of Atomic Bomb
The agent:						
Address of residence	:					
Name:						(Seal)
-			······	•		(Dear)
Signature:						