

## Application for Anti-toppling Devices for Furniture and Their Installation

(To) \_\_\_\_\_ (Year) \_\_\_\_\_ (Month) \_\_\_\_\_ (Date) \_\_\_\_\_

Mayor of Minato City

According to the outline of the implementation of the furniture-tipping prevention measurement promotion project and the outline of the support of anti-toppling devices for furniture installation support project in Minato City, I apply for the aid for anti-toppling devices for furniture as listed below.

I approve that the information of my Resident Record will be confirmed for screening at the City Office and my personal information such as name and address will be given to the city designated company for the sole purpose of distributing the requested items.

Address	Zip code:  Minato-ku  *Please write the name of the apartments or buildings. ● Contact number:
Japanese reading ( <i>furigana</i> )  Name (Head of the household)	  ● Date of Birth : (Year) _____ (Month) _____ (Date) _____ <small>In the case of a household with an expecting mother/mother with a newborn child or a single-parent family, there is no need to fill in the date of birth.</small>
Number of Household Members	<u>Circle whichever is applicable regarding the number of people in your household registered as residents of Minato City in the Basic Resident Register, etc.</u> 1) 1 or 2                      2) 3 or more

\*Please answer why you cannot install the fixtures by yourself and the other questions.

**Circle the appropriate one(s)**

- 1 All family members are 65 years or older
- 2 Certified as Care level 3 (youkaigo) or
- above of Long-term Care Insurance System,
- 3 Holder of Certificate of the Physically/Intellectually/Mentally Disabled
- 4 Certified as having intractable diseases
- 5 Expectant mothers who have been issued
- with the Maternal and Child Health
- Handbook, o with mothers who gave birth
- within the past year and submit their
- applications for this subsidy by the last day
- of the 11th month after the delivery month.
- 6 Single mother/father

### **【Reasons for difficulties to install the fixtures】**

I cannot reach a higher place because of the pain in my shoulder.

Name of the person(s) who fall(s) under the condition(s) above and the relationship to the head of the household ( )	Please circle the appropriate one : We/I 1. own the house.      2. rent the house.
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- If you live in a rented flat and ask for installing the furniture to the walls with fixtures ( “Tansu Guard,” etc.) using screws and others please get the consent from the owner or the managing

**<Permission of installing anti-toppling devices for furniture>**

Date:        /        /

I approve that the above household will install anti-toppling devices for furniture.

Address

Name	sign
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- Select the fixture(s) and fill in the number of fixtures you are applying for.  
(The maximum number of points that can be used differs depending on the number of people in the household.)  
1) Household consisting of one or two people: Up to 150 points  
2) Household consisting of three or more people: Up to 195 points
- Please check the rooms, furniture and others if the fixtures are installable before submission.
- \*Note: The installing company will visit your home in advance and check that the fixtures applied for are appropriate.
- \*If you do not know which fixture(s) to select, leave the form blank. The installation company will decide on the suitable fixture(s) when visiting your home.

Instrument Name				Serial Number	Points	Amount	Total Points
Anti-topping devices for furniture	Belt to prevent falling furniture (Beyonta) (set of two)			7341	27		
	<i>Fumbaru-kun Z</i> (pair)	Distance from furniture to ceiling 10~20cm		7098	88		
	Magnitude 7 ML—35 (pair)	Distance from furniture to ceiling 25~35cm	Brown	7930	63		
			Ivory	7920	63		
	Magnitude 7 ML—50 (pair)	Distance from furniture to ceiling 35~50cm	Brown	7931	63		
			Ivory	7921	63		
	Magnitude 7 ML—80 (pair)	Distance from furniture to ceiling 50~80cm	Brown	7932	63		
			Ivory	7922	63		
	Super Fudō-ō Hold (pair)			7425	51		
	Furniture-tipping Prevention Tape< <i>Fumbaru-kun</i> > (pair)			7050	17		
<i>Tansu</i> Guard II (pair)			7045	14			
<i>Tobira</i> Lock (pair)				7039	11		
Adhesive Rubber Earthquake Resistance Stopper <G-BLOX gel> (4sheets)				7328	22		
Office Equipments Fixing Bands <Link Stopper> (pair)				7345	16		
Glass Anti-Shattering Film <for flat surfaces > (92×185cm)				7037	29		
Total Points							

**Must arrive by February 27(Friday), 2026**

区処理欄（以下は記入しないでください。）\* For office use

整理番号	受 付 年 月 日	記入欄	住基有無	特記事項（高齢者世帯かどうか等）	担当者
	年 月 日	総合支所			
	年 月 日	防災課			