

Application form for canceling registration of the use of Individual Number Card as a Health Insurance card

To the Executive Head of the Mercari Health Insurance Association

Date:

Cancellation applicant	(Furigana)			Date of birth	Syowa Heisei Reiwa	(Y)	(M)	(D)	
	Name								
	Address of the insured person	(Insured's postal code -)							
	Contact details	Telephone number							
		Email							
	Employee Number								
	Insurance Code/Number ※ Please fill out everything correctly, including the branch number.	Insurance Code		Insurance Number			Branch number		
For canceling registration of the use of Individual Number Card as a Health Insurance card	<input type="checkbox"/> Submit a notice to cancel the registration of using your My Number card as a health insurance card.								
	※ If you cancel your registration, you will no longer be able to use your My Number card to verify your eligibility online. ※ If you have applied to cancel your registration, you will be issued a eligibility confirmation document by the insurer. After cancellation, you will need to bring the certificate with you when visiting a medical institution or pharmacy. ※ After you cancel your registration, it may take one to two months for your change to be reflected on the "Health Insurance Card Registration Application Status" screen on Individual Number Portal.								
Signature : _____									

(Reason for wanting to cancel)

- ※By visiting a medical institution using your My Number card, you can receive better medical care based on your own past health and medical information, with your consent.
- ※Registering Individual Number card as your health insurance card will not pose any security risks, such as the leakage of your medical information.
- ※Please note that even after canceling your health insurance card registration, you can still re-register your health insurance card. You can register your health insurance card via Individual Number Portal, Seven Bank ATMs, or using face recognition card readers installed at the reception desks of medical institutions and pharmacies.

(remarks) If applying through a representative, please enter the name and contact information of the person to be cancellation applicant and the representative in the name and contact information section.

(Note) If you transfer to a different health insurer between the time you applied for cancellation and the time the cancellation is made (approximately 1 to 2 months), you will need to inform your new health insurer that you have applied for cancellation to your previous health insurer and apply for Eligibility Confirmation Document.