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| 受付番号 |  |

第１７号様式（第９条関係）

　　年　　月　　日

（あて先）甲府市長

　　　　　　　　　　　　　　　　　　　　　事業者　所　在　地

　　　　　　　　　　　　　　　　　　　　　　　　　名　　　称

　　　　　　　　　　　　　　　　　　　　　　　　　代表者氏名　　　　　　　　　　　　　　　　㊞

**児童福祉法に基づく業務管理体制の整備に関する事項の届出書**

このことについて、次のとおり関係書類を添えて届け出ます。

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | | | 事業者（法人）番号 | | | | |  | |  | | |  | | |  | |  | | |  | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |
| １　届出の内容 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | ⑴　法第２４条の３８第２項関係（整備） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ⑵　法第２４条の３８第４項関係（区分の変更） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ２　事　　業　　者 | フ　リ　ガ　ナ |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 名称又は氏名 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 住　　　所  （主たる事務所  の所在地） | （郵便番号　 　－　　　　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| （ビルの名称等） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 連　　絡　　先 | 電話番号 | | | |  | | | | | | | | | | | | | | ＦＡＸ番号 | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| 法人の種別 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 代表者の職名・  氏名・生年月日 | 職名 | |  | | | フリガナ | | | | |  | | | | | | | | | | | | | | | | | | | 生年  月日 | | | | | | 年　月　日 | | | | | | | | | | | | |
| 氏　名 | | | | |  | | | | | | | | | | | | | | | | | | |
| 代表者の住所 | （郵便番号　　　－　　　　　） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| （ビルの名称等） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ３　事業所名称等  　　及び所在地 | | 事業所名称 | | | | | 指定年月日 | | | | | | | 事業所番号 | | | | | | | | | | | | | | | 所　在　地 | | | | | | | | | | | | | | | | | | | | |
| 計　　ヵ所 | | | | |  | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| ４　児童福祉法上の該当する条文（事業者の区分） | | 法第２４条の３８（指定障害児相談支援事業者） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ５　児童福祉法施行規則第２５条の２６の９第１項第２号から第４号に基づく届出事項 | | 第２号 | | | 法令遵守責任者の氏名（ﾌﾘｶﾞﾅ） | | | | | | | | | | | | | | | | | | 生年月日 | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 第３号 | | | 業務が法令に適合することを確保するための規程の概要 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 第４号 | | | 業務執行の状況の監査の方法の概要 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ６ 区　分　変　更 | 区分変更前行政機関名称、担当部（局）課 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 事業者（法人）番号 | | | | | | | |  | |  | | | |  | |  | |  | | |  | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  |
| 区分変更の理由 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 区分変更後行政機関名称、担当部（局）課 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 区　分　変　更　日 | | | | | | | | 年　　　月　　　日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |