様式第27号（第16条関係）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| （表面）   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | | | | | | | | | | | | | | | | | | | | | |  | | 介護保険特定負担限度額認定証  (特別養護老人ホームの要介護旧措置入所者に関する認定証) | | | | | | | | | | | | | | | |  | | | | 交付年月日　　　　年　月　日 | | | | | | | | | | | | | | | | | | | | | | 被    保    険    者 | 番　　号 | |  | |  | |  | | |  | |  | |  | |  |  | |  |  | | 住　　所 | |  | | | | | | | | | | | | | | | | | | | フリガナ | |  | | | | | | | | | | | | | | | | | | | 氏　　名 | |  | | | | | | | | | | | | | | | | | | | 生年月日 | | 年　　月　　日 | | | | | | | | | | | | 男・女 | | | | | | | 適用年月日 | | 年　　月　　日から | | | | | | | | | | | | | | | | | | | 有効期限 | | 年　　月　　日まで | | | | | | | | | | | | | | | | | | | 食費の負担限度額 | | | 円 | | | | | | | | | | | | | | | | | | | 居住費の  特定負担限度額 | | | ユニット型個室　　　　　　　　　　　　円  ユニット型個室的多床室　　　　　　　　円  従来型個室　　　　　　　　　　　　　　円  多床室　　　　　　　　　　　　　　　　円 | | | | | | | | | | | | | | | | | | | 保険者番号並  びに保険者の  名称及び印 | | |  | | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  | |  | |  | | | | | | | | |  | | | | | | | | | 盛岡北部行政事務組合 | | | | | | | |     （裏面）   |  | | --- | | 注　意　事　項  一　この証によって指定介護福祉施設サービス又は地域密着型介護老人福祉施  　設入所者生活介護を利用する際に食事の提供を受け、又は居住する場合には  　この証の表面に記載する特定負担限度額が支払いの上限となります。  二　前号に規定するサービスを利用するときは、被保険者証とともに必ずこの  　証を特別養護老人ホームの窓口に提出してください。  三　被保険者の資格がなくなったとき、認定の条件に該当しなくなったとき、  　特定負担限度額認定証の有効期限に至ったとき又は特別養護老人ホームを退  　所したとき（引き続き、他の特別養護老人ホームに入所する場合を除く。）  　は、遅滞なく、この証を組合に返してください。また、転出の届出をする際  　には、この証を添えてください。  四　この証の表面の記載事項に変更があったときは、十四日以内に、この証を  　添えて、組合にその旨を届け出てください。  五　不正にこの証を使用した者は、刑法により詐欺罪として懲役の処分を受け  　ます。 | |