要介護（要支援）認定結果受領申請書

土佐清水市長　様

　介護サービス計画（介護予防サービス計画）を作成するために、下記被保険者に同意を得ていますので、介護認定審査会による判定結果（介護保険被保険者証）を頂きたく申請いたします。

令和　　　年　　　月　　　日

　　　事業所名

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| 申　請　日 | 被保険者番号 | | | | | | | | | | 被保険者氏名 | 備　考 |
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