Form No. 1

　　 DD/MM/YYYY

Oki Islands Geopark Management Bureau

Board Chairperson

Address

Company Name

Representative (Position / Name)

Application for Pre-Inspection Support

In accordance with Article 5 of the FY2025 Subsidy Guidelines for Pre-Inspection Visits by Travel Agencies Handling Inbound Tourism, we hereby apply as follows.

**1. About the Pre-Inspection**

(1) Purpose of Visit　　New Product Development 　/ 　Update Existing Product
　　　　　　　　　　　　　　 \*Please mark ○ as applicable

(2) Dates of the Visit: DD/MM/YYYY – DD/MM/YYYY

(3) Destinations (including accommodations)

|  |  |
| --- | --- |
| Name of Location | Included in existing travel product: Yes / No |
|  |  |
|  |  |
|  |  |
|  |  |
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|  |  |
|  |  |
|  |  |
|  |  |

(4) Visitor (person who will visit the islands)

|  |  |
| --- | --- |
| Organization / Position / Name | Work responsibilities\* |
|  |  |
|  |  |

\*Example of work responsibilities: development of individual travel products, development of group travel products, etc.

(5) Proposed dates for the opinion exchange meeting

　 1:

　 2:

　 3:

**2. About** **the Travel Product You Plan to Develop**

(1) Type of travel  Individual Travel / Group Travel (  persons) / Other (      )
 \*Mark ○ as applicable and fill in any applicable blanks

(2) Tour style self-guided  /  with a tour leader

(3) Target market for the product (e.g., countries of target customers, preferences, interests, etc.)

(4) Sales period / planned number of tours MM/YYYY – MM/YYYY / \_\_ times

(5) Scheduled month of product launch MM/YYYY

(6) Target number of travelers  \_\_\_\_ persons

(7) Changes to existing product

\*Only if updating an existing product

**3. Amount Requested: JPY \_\_\_\_\_\_\_\_\_**

\*2/3 of the total actual eligible expenses, up to JPY 100,000