Form No. 3

　　DD/MM/YYYY

Oki Islands Geopark Management Bureau

Board Chairperson

Address

Company Name

Representative (Position / Name)

Pre-Inspection Support Result Report and Reimbursement Form

　　　Regarding my company’s application to the FY2025 Pre-Inspection Visits by Travel Agencies Handling Inbound Tourism Subsidy, of which I was notified by Bureau Doc. No. \_\_\_ dated DD/MM/YYYY of our approval, I report the following in accordance with Article 7 of the Subsidy Guidelines.

**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) 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.

(4) Date of the opinion exchange meeting: DD/MM/YYYY

**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 sales \_\_\_\_ 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

**4. Bank Transfer Information**

Beneficiary Name:

Beneficiary Address

 Street Address:

 City:

 State/Province, Country:

Beneficiary Account Number (IBAN Code or CLABE):

Bank and Branch Name:

Bank and Branch Address

 City:

 State/Province, Country:

Bank Code (SWIFT, ABA, BSB, etc.):

**\*Please ensure that you include the following with this document:**

**(1) Visit Report (Attachment 1)**

**(2) Expense Report (Attachment 2)**

**(3) Photocopies of receipts**