

“Kobe city Accommodation” Support Program

Kobe Tourism Bureau

1 Outline

Kobe Tourism Bureau offers this support program to travel agencies that sends group tours with overnight stay in Kobe.

20 pax or more in the group: ¥50,000

*Once the budget is finished, the support program will be terminated without the notification.

2 Agencies which can apply this program

Travel agencies and land operators handling inbound group tours to Japan.

3 Terms and Conditions

(1) Groups with the following conditions.

- 1) 20 pax or more (excluding tour conductors) .
- 2) Staying for one night or more at the accommodation in Kobe.
- 3) Visiting to tourist facilities in Kobe.
- 4) Having meals at restaurants or accommodations in Kobe.

*If a group is divided into multiple buses, it is considered as one group and one application will be applied.

* For a series of tours with the same itinerary, the applications limited to once per series.

(2) Group staying in Kobe during the period of April 1, 2023 to March 31, 2024.

(3) Bank account in Japan is required.

*If you don't have an account in Japan, you can receive the subsidy via your partner in Japan.

*If the account holder is an individual, please send a copy of your business card etc.

(4) Agencies can apply for this support program at maximum of 4 times.

You are not allowed to use other subsidy programs by the Kobe city.

4 Procedures for application

Application form must be submitted by 14 days prior to staying.

Please send 1)Application Form, 2) Itinerary, and 3)Company Profile by e-mail to the following address.

After receiving your application, it takes about 1week for approval.

5 To receive the subsidy

Within a month after the tour is over, submit the final itinerary and the accommodation certificate (Form 1) to us. After confirmation, we will make a payment.

TO: Kobe Tourism Bureau
Tourism department,
Inbound Unit

Email: kobe_promotion@kcva.or.jp

TEL: +81-78-262-1905

(Application form)

____ / ____ / ____ / ____
(DD / MM / YYYY)

To Kobe Tourism Bureau

Company name _____

Representative _____ Seal _____

Address _____

Person in charge (Department) _____

TEL _____ FAX _____

Email _____

***Please fill in the "Company Name" as it is written in the company overview.**

Kobe city Accommodation Aid Application

We hereby apply for the aid as described below.

Please complete the form.

① Name of party	
② Tour Period (DD/MM/YEAR)	From ____ / ____ / 20____ to ____ / ____ / 20____
③ Estimated Number of Persons staying in Kobe	_____ persons (excluding tour conductor)
④ Details of Tour	ex) incentive tour, employee training tour, educational trip, package tour
⑤ Date of Stay(s) in Kobe	_____ Night(s) starting from ____ / ____ / 20____
⑥ Accommodation	*Only the accommodation facility in Kobe city
⑦ Places of sightseeing and restaurant in Kobe	
⑧ Bank Account Number for direct deposit of Aid	Bank name : _____ Branch name : _____ Account holder name : _____ Account Number: _____ Checking account/ Saving account/ Non-resident account* NO. _____
* Application number * <Application Response>	*For official use only

NOTE: This form must be accompanied by **travel itinerary and company profile**.

* A photocopy of bank passbook must be attached only if your bank account is a non-resident account.