写真添付様式（介護保険住宅改修申請用）

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| **被保険者番号** |  | **被保険者名** |  | | |
| **施工業者名** |  | | | | |
| **改修箇所** |  | | | **写真番号** |  |
| **改修前** | | | | | |
|  | | | | | |
| **改修後** | | | | | |
|  | | | | | |