

NTT DOCOMO, INC.

Letter of Attorney

representative (trustee) for the following  
 service and/or handset purchase.

signed or sealed by the contract subscriber (trustor) personally.)

Please enter the date this Letter of Consent was completed.

Please inscribe the name of the company which the contract will be made under.

\*Must be inscribed by the company representative or the department managing the mobile phone.

\*The contact phone number may be called for verification.

For company subscriptions, please stamp the company seal.

For company subscriptions, the "Date of Birth" of the Subscriber (trustor) is not required.

Seal or Signature

Subscriber's Name (Trustor's Name)

●● Inc.

Address

〒XXXX-XXXX  
 Tokyo-to, Chiyoda-ku, Nagai

Contact Phone No.

Date of Birth

For "1. New Subscription", please enter the number of lines you wish to apply for.

Please make a selection from the "Mobile Phone Purchase Method" when purchasing a mobile phone.

Applicable Mobile Number<sup>1</sup>

0 X 0 - X X X X - X

Requested Procedure<sup>2</sup>

1. New Subscription lines

Mobile Phone Purchase Method

(Please circle the applicable purchase method when purchasing a mobile phone.)

12 payments \* 24 payments / One time payment

\*If using DOCOMO's installment payment option, the contract will be concluded under "contract provisions for purchasing individual items by installment."

Please be sure to inscribe the Applicable Mobile Phone Number when selecting "2. Change of Phone Model", "3 Transfer of Subscription", or "4. Other".

2. Change of Phone Model

3. Transfer of Subscription

Receive contract subscription from other party / Transfer contract subscription to other party  
 (Please be sure to select one of the above; "Receive contract subscription from other party" or "Transfer contract subscription to other party.")

4. Other

(Please indicate specific procedures you request when choosing "4. Other.")

Please make a selection from 1 to 4.

Points to be used<sup>4</sup>

5, 000 Points (Please enter in units of 100.)

1. Please be sure to inscribe the number subject to application in the "Applicable Mobile Phone Number" field, except for when

■ In the case of "3. Transfer of Subscription", please select either "Receive contract subscription from other party" or "Transfer contract subscription to other party".

■ In the case of "4. Other", be sure to address the applicable service name and the specific procedure requested, such as "apply", "change", "cancel", "repair", etc.

from 1 to 4. When choosing "4. Other", please indicate specific procedures you request when choosing "4. Other."

When using docomo Points, please enter the number of points you wish to use in units of 100.

2. Please be sure to inscribe the number of points you wish to use. If using docomo Points, please enter the number of points you wish to use in units of 100.

3. Please be sure to inscribe the name of the contract subscriber is to inscribe the following.)

4. For company subscriptions, the contract subscriber is to inscribe the following.)

5. For company subscriptions, the contract subscriber is to inscribe the following.)

6. For company subscriptions, the contract subscriber is to inscribe the following.)

7. For company subscriptions, the contract subscriber is to inscribe the following.)

8. For company subscriptions, the contract subscriber is to inscribe the following.)

9. For company subscriptions, the contract subscriber is to inscribe the following.)

10. For company subscriptions, the contract subscriber is to inscribe the following.)

11. For company subscriptions, the contract subscriber is to inscribe the following.)

12. For company subscriptions, the contract subscriber is to inscribe the following.)

Name (Trustee's Name)

Hanako Docomo

Address

〒XXXX-XXXX  
 Tokyo-to, ●●-ku, ▲▲

Contact Phone No.

( 03 ) XXXX-XXXX

Date of Birth

The Representative (trustee) section must also be inscribed by the company representative or the department managing the mobile phone

If the procedure request is to be made by a representative (trustee), please be sure to prepare the following items in addition to the Letter of Attorney (this form).

- ① Official identification (original) of the subscriber\* (Identification must have photo for new subscriptions in an individual name.)
- ② Official identification (original) of the representative\*
- ③ Official identification (original) verifying relationship to the subscriber\* (Only required for new subscription or application for installment payments in an individual name.)

\*For details, visit the NTT DOCOMO website or a docomo Shop, or contact the docomo Information Center (0120-005-250) in advance.

Other important information

- ① At the time of application, the subscriber (trustor) may be contacted for confirmation.
- ② Please be aware that the mobile phone service may be suspended or the contract may be cancelled if any information on this form is found to be false.
- ③ For new subscriptions in an individual name, payment of monthly usage charges (including installment payments) is to be made by automatic bank account transfer or credit card payment from a bank account or credit card belonging to the subscriber, a legal representative, or a family member of the subscriber. If the paying party cannot visit the docomo Shop, please bring an automatic bank transfer application completed in advance and stamped with the seal registered with the bank.

【弊社使用欄】

販売店名 \_\_\_\_\_ 連絡先 \_\_\_\_\_

確認欄