

# Letter of Attorney (Corporate Subscribers) [Examples and Notes]

**[Please be sure to read the following instruction.]**

•This Letter of Attorney is to be completed fully by the company representative or the personnel from the department in charge of the mobile phones. If information on this form is found to be false, the mobile phone service may be suspended or the contract may be cancelled.  
 •Please be sure to enter the information thoroughly since the contact phone number may be used for confirmation at the time of application.

**[Please be sure to prepare the following documents other than this form.]**

1. Certified Copy of Commercial Registration (or certified extract) (Tokibo Tohon/Shohon) or Seal Registration Certificate (Inkan Shomeisyo)
  2. Official identification document of the representative (trustee)
- (Please visit the DOCOMO website to confirm if additional documents are necessary.)

**•Please select all of the procedures you authorize.**

•Please enter the specific contents when you select "Other".  
 •Please select "Do not authorize any procedure in this section" if you do not authorize any procedure.

•Please enter the date you complete this form.

•When the submission of this form is later than the end of the third month from the entry date, it is necessary to rewrite and submit this form again.

Entry Date: (Year) **2018** (Month) **9** (Day) **1<sup>st</sup>**  
 (Valid until the end of the third month from the entry date)

Requested Procedure	Common procedure	<input checked="" type="checkbox"/> Set a d ACCOUNT in agreement with the d ACCOUNT Terms <sup>*1</sup> <input type="checkbox"/> Register the d POINT user information (register of d POINT C...) <input type="checkbox"/> Other ( ) <input type="checkbox"/> Do not authorize any procedure in this section
	Mobile Phone	[Mobile Phone Number] <b>0 9 0 - 1234 - ××××</b> <input checked="" type="checkbox"/> New Subscription( 1 line ) + d POINT CLUB Application <sup>?</sup> <input type="checkbox"/> Change of Phone Model + d POINT CLUB Application <sup>?</sup> <input type="checkbox"/> Transfer of Subscription + d POINT CLUB Application <sup>?</sup> <input type="checkbox"/> Cancellation of Contract <input type="checkbox"/> Other ( ) <input checked="" type="checkbox"/> Apply for DOCOMO installment payment option* (12 payments/24 payments/ <b>36 payments</b> ) *Installment payment for "a product more than ¥100,000 (incl. tax)" or "accessories only": (Use/Do not use) <sup>*4</sup> <input type="checkbox"/> Purchase in one-time payment <input checked="" type="checkbox"/> Use points ( <b>800</b> points) <input checked="" type="checkbox"/> Use the Trade-in Program/Sumaho Okaeshi Program ([Model and Color] <b>iPhone7 6</b> ) <input type="checkbox"/> Do not authorize any procedure in this section
	docomo Hikari	[Customer Number] <b>CAF (COP) 012345××××</b> <input type="checkbox"/> New Subscription <input type="checkbox"/> Relocation <input type="checkbox"/> Transfer of Subscription <input type="checkbox"/> Cancellation of Contract <input type="checkbox"/> Other ( ) <input checked="" type="checkbox"/> Set or change the pairing of a mobile phone number with docomo Hikari (the paired line ([Mobile Phone Number] <b>090-1234-××××</b> ) <input type="checkbox"/> Do not authorize any procedure in this section

•For a new subscription, this item is not required.  
 •Please enter the paired mobile phone number with docomo Hikari when you select "Other"  
 •For docomo Hikari contract (no paired line) procedure, please enter one of the following information: Customer ID (13-digit number starting from CAF or 11-digit number starting from COP), docomo Hikari landline phone number or the other phone number.  
 •For a new docomo Hikari subscription pairing with an existing docomo mobile phone contract, please enter the mobile phone number in "Mobile Phone Number".

•For newly setting or changing the paired line, please enter the mobile phone number.  
 (In case of change, please enter the new mobile phone number that you wish to set as the paired line.)

•d POINT User information registration is not applicable.

•In case of a change of phone model, etc. for several contract lines, please prepare the whole number list by yourself.  
 •For a new subscription, this item is not required.

• All the d POINTS will disappear when requesting the cancellation of the contract or transfer of subscription to an individual name. It is possible to carry over the d POINTS to corporate subscribers.  
 •Please state on Remarks space if you do not wish to apply for Business Premier Club or if you wish to apply for it alone or along with procedures other than new subscription, change of phone model or transfer of subscription.

•If you wish to apply for the Sumaho Okaeshi Program, please select 36 payments.

•It is no need to select any option for "Installment payment for a product more than ¥100,000 (incl. tax) or accessories only".

Subscriber (Trustor)	Name	<b>Docomo Corporation</b>	(Seal)	Date of Birth	(Year) (Month) (Day)
	Address	〒123 - 4567 <b>Tokyo, Chiyoda-ku ●-●, Docomo Building</b>		Contact Phone number	<b>03 - 1234 - ××××</b>

•Please enter the subscriber's information.  
 \*All the items should be filled out excepting date of birth

•Please be sure to put the company seal.

•"Date of Birth" is not required.

Representative (Trustee)	Name	<b>Hanako Docomo</b>	Date of Birth	(Year) <b>20××</b> (Month) <b>AUG</b> (Day) <b>1<sup>st</sup></b>
	Address	〒123 - 4567 <b>Tokyo, Chiyoda-ku, ●-● Docomo Apartment 101</b>		Contact Phone number

•Please enter the representative's (trustee) information.  
 (This section is to be completed by the subscriber.)  
 \*All the items should be filled out.