

Letter of Attorney [Examples and Notes]

[Please be sure to read the following information]

- This Letter of Attorney is to be completed by the subscriber. If any of the entered information is found to be false, DOCOMO may suspend the service or cancel the contract.
- At the time of application, the subscriber (trustor) may be contacted for confirmation.
- 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 from a bank account or credit card belonging to the subscriber, a legal representative, or a family member of the subscriber.
- For some procedures such as a new subscription, requests made by a representative other than a family member of the subscriber or legal representative may not be accepted.

• Please check all the boxes of the procedures you give authority for.

- Please specify the procedure requested when choosing "Other".
- Please check the box "Do not authorize any procedure in this section" when there is no item relevant.

- Please enter the date this Letter of Attorney has been filled in.
- The Letter of Attorney is to be reentered and submitted if it expires after the end of the third month from the entry date.

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

- All the d POINTs may disappear at the time of the cancellation of the contract of transfer of the subscription without holding a d ACCOUNT.
- For saving the points even after the procedures, it is necessary to set up a d ACCOUNT before the application for those procedures.

Requested Procedure	Common Procedures	<input checked="" type="checkbox"/> Set a d ACCOUNT in agreement with the d ACCOUNT Terms* ¹ <input type="checkbox"/> Register the d POINTs' user information (register of d POINT Card) <input type="checkbox"/> Other () <input type="checkbox"/> Do not authorize any procedure in this section
	Mobile Phone	[Mobile Phone Number] 0 9 0 - 1234 - ×××× <input type="checkbox"/> New Subscription(lines) <input checked="" type="checkbox"/> Change of Phone Model <input type="checkbox"/> Transfer of Subscription <input type="checkbox"/> Cancellation of Contract <input type="checkbox"/> Other () <input checked="" type="checkbox"/> Apply for docomo installment payment option* (12 payments/24 payments) ^{2*3} *Installment payments for a product costing more than ¥100,000 (incl. tax). (Use) Do not use <input type="checkbox"/> Purchase in one-time payment <input checked="" type="checkbox"/> Use points (1,000 Points) <input checked="" type="checkbox"/> Use the Trade-in Program ([Model and Color] iPhone7 Gold) <input type="checkbox"/> Do not authorize any procedure in this section
	docomo Hikari	[Customer Number] CAF (COP) 012345×××× <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 line with docomo Hikari (paired line) ([Subject Mobile Phone Number] 090-1234-××××) <input type="checkbox"/> Do not authorize any procedure in this section
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- Please enter the subject mobile phone number for the procedure.
- For a new subscription, this item is not required.

- For a new subscription, please enter the number of lines you wish to apply for.
- The grantor's presence at the store is required when Changing the Name of the Subscriber and carrying over some services or setting information, except when the transferee is currently registered as the user of the line.

- Please select the number of payments when purchasing the mobile phone by installment payments.
- When choosing installment payment method for products costing more than ¥100,000 (incl. tax), please select "Use".

- Please enter the number of points you wish to use for procedures such as purchase of mobile phone.

- Please indicate the model and the color of the phone you would like to trade in.

- For procedures related to docomo Hikari (without paired line), please enter either the Subscription ID (a 13-digit number with the prefix CAF or 11-digit with the prefix COP), the docomo Hikari Denwa phone number or the Subscriber's phone number.
- For a new subscription, this item is not required.

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

- For a new docomo Hikari subscription pairing with an existing docomo mobile phone number, please enter the subject mobile phone number in the field "Subject Mobile Phone Number".

Subscriber (Trustor)	Name	Docomo Taro	Seal	Date of Birth	(Year) 19×× (Month) APR (Day) 1st
	Address	〒 123 - 4567 Tokyo-to, Chiyoda-ku ●-● Docomo Apartment101		Contact Phone number	03 - 1234 - ××××

- Please enter the subscriber's information.

- Seal is not required if the name is handwritten by the subscriber.
- * Seal is required if the name is inscribed by other means such as a rubber stamp.

Representative (Trustee)	Name	Docomo Hanako	Date of Birth	(Year) 20×× (Month) AUG (Day) 1st
	Address	〒 123 - 4567 Tokyo-to, Chiyoda-ku ●-● Docomo Apartment101		Contact Phone number

- Please enter the representative's (trustee) information. (This section is to be entered by the subscriber.)

Letter of Attorney

Entry Date: (Year) (Month) (Day)

(Valid until the end of the third month from the entry date)

I, subscriber (trustor) hereby give my representative (trustee) complete authority associated with the following applications for Xi service, FOMA service, international calling service, docomo Hikari service and/or handset purchase.

◆ This Letter of Attorney is to be completed by the subscriber. (Please check all the boxes of the procedures you give authority for)

Requested Procedure	Common Procedures	<input type="checkbox"/> Set a d ACCOUNT in agreement with the d ACCOUNT Terms*1 <input type="checkbox"/> Register the d POINTs' user information (register of d POINT Card) <input type="checkbox"/> Other () <input type="checkbox"/> Do not authorize any procedure in this section			
	Mobile Phone	[Mobile Phone Number]	0 0 - -	<input type="checkbox"/> New Subscription(lines) <input type="checkbox"/> Change of Phone Model <input type="checkbox"/> Transfer of Subscription <input type="checkbox"/> Cancellation of Contract <input type="checkbox"/> Other () <input type="checkbox"/> Apply for docomo installment payment option* (12 payments/24 payments)*2*3 *Installment payments for a product costing more than ¥100,000 (incl. tax). (Use / Do not use) <input type="checkbox"/> Purchase in one-time payment <input type="checkbox"/> Use points (Points) <input type="checkbox"/> Use the Trade-in Program ([Model and Color]) <input type="checkbox"/> Do not authorize any procedure in this section	
	docomo Hikari	[Customer Number]	<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 type="checkbox"/> Set or change the pairing of a mobile phone number line with docomo Hikari (paired line) ([Subject Mobile Phone Number]) <input type="checkbox"/> Do not authorize any procedure in this section		
Remarks					

Subscriber (Trustor)	Name		Seal	Date of Birth	(Year) (Month) (Day)
	Address	〒		Contact Phone number	

Representative (Trustee)	Name		Date of Birth	(Year) (Month) (Day)
	Address	〒	Contact Phone number	


*1 Please be careful in handling your d ACCOUNT information, after it is set up, for this information can authorize its user to apply for procedures such as requesting the issuance of the itemized bills and other services. Please check the "d ACCOUNT portal site" and get more detailed information regarding d ACCOUNT.

*2 Your monthly payment method must be a bank account transfer or credit card payment when newly applying for installment payments or taking over installment payments along with a contract subscription. Furthermore, subscriber's personal credit information is acquired from/provided to Member Credit Information Agencies designated by the Ministry of Economy, Trade and Industry. If payments are late, applications for credit cards, loans, etc. may be denied.

*3 If the subscription is in an individual's name and DOCOMO installment payments is used to purchase a product costing more than ¥100,000 (incl. tax), docomo will confirm the information required for the screening process (size of family, whether living together, income/loan status, payment of home loan/rent).

◆ This Letter of Attorney is to be returned with a copy of the application form after the application is completed. Please check over on the copy if there is no discrepancy with the contents of the procedure.

[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 of the subscriber (trustor)	
② Official identification of the representative (trustee) (Additional documents are required when applying with documents other than Japanese driver's license or My Number Card (Individual Number Card))	
③ Official identification proving relationship as family of the subscriber (trustor) (Required for using DOCOMO installment payments along with any of the following procedures in a personal name: the new subscription, change of mobile phone model or change of contract type)	

For details on necessary documents for applications, services, or terms and conditions, etc. please visit the docomo website. ● From a docomo Feature Phone (i-mode) iMenu▶ト`JE HP ● From a smartphone, docomo Feature Phone (sp-mode) or PC www.nttdocomo.co.jp		弊 社 使 用 欄	【受付店名・連絡先】 For Office Use Only	【確認者欄】 For Office Use Only
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