■ au/UQ mobile phone number applicable for procedure/Procedures to be delegated%1

0

au/UQ mobile number applicable

for procedure

◆This document must be filled out solely by the contract holder.

Power of Attorney

I (the contract holder) authorize the representative named below to handle the following procedures.

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	○ Proced	Procedures associated with au/UQ mobile telecommunication services required to change models							
	Procedures associated with installments**3**4 lalso consent to basic specified credit information relating to individual credit purchase brokerage contracts/consumer installment credit sales contracts being passed on to credit information services.								
Procedures	Procedures associated with termination of services other than with au/UQ mobile in accordance with MNP*5**6								
to be	Procedures associated with transfer/inheritance (including transfers between family members)**7 Procedures associated with au PAY/au PAY Prepaid Card**8								
delegated ^{**2}									
	Procedures associated with trade-in								
	Other (Please describe in detail) (
Consent	If you agree to items 1) through 3) specified in "Important Information on au and UQ mobile Communication Services," item 4) specified in "If you agree to items 1) through 3) specified in "Important Information on au and UQ mobile Communication Services," item 4) specified in "Important Information Prior to Application." Item 5) specified in "au Money Activity Plan Benefit Provision Terms and Conditions" and also authorize a representative to handle the necessary procedures, sign below after checking the boxes.								
1) Area quality information transmission function	(If you are authorizing the handling of procedures for the use of 5G/4G LTE/VoLTE services) I have read and agreed to the terms and conditions of "Area Quality Information Transmission Function."								
2) Communication control function	(If you are authorizing the handling of procedures for the use of 5G services) I have read and agreed to the terms and conditions of "About the Communication Control Function."								
3) Communication identification	(If you are authorizi communication ide	If you are authorizing the handling of procedures for signing up for a plan with au subject to the communication identification function) have read and agree to the terms and conditions of "About the Communication Identification							
function	Function." (Check not necessary for UQ mobile)					Signature			
☐4) 5G home router	(If you are authorizing the handling of procedures for signing up for Home Router Plan 5G with au) I have read and agreed to the terms and conditions of "About the use of 5G Home Routers" (Check not necessary for UQ mobile)								
□5) If subscribing to au Money Activity Plan	providing this offer	may mutually provide the	e customer's personal	e au Financial Group companies information (including usage his fit Provision Terms and Conditio	story, etc.) to				
Contract	Address		,						Seal
holder (mandator)	Name (Signature)								
(mandator)	Contact)	_	Date of birth		/	/		(mm/dd/yyyy)
Representative (mandatary)	Address								
	Name Contact	()							
※ If any information request This document is valid	ling the "Representativ uired in this document d only if it is received v	is not filled out, you will no within one month from the p	ot be able to complete the preparation date.	ed in person by the contract holde ne procedure. Please check again	to make sure the				
(Examples of proc name of a corporation, e Discount. Excludes char	tc. (A power of attorr	ney is accepted if you are	igning of new contract e signing up for the Sn	, application for MNP, change of nile-heart Discount together with	PIN code, char your contract, o	nge of tele or have alr	phone numbe eady signed	er, signir d up for th	ng of a contract in the Smile-heart
※1 Enter the au/UQ m※2 Please circle all ap		you authorize the repres	sentative to handle pro	cedures for or enter a fixed telep	ohone number.				
※3 Only a family mem Scope of "family me registered as a use	ber can be the repre ember": Has the sam r under the applicab	ne last name and address le contract.	s as the contract holde	(excluding cases we separately	r Family Discou				representative is
•				uding changing plans and repair change their payment method to	-	or credit ca	rd payment	s.	
0 0		,		olication for bank transfer payme act applicant is different to the na				ervice pro	ovider and the said
subscriber to the o	riginal service provid	der has a disability that m	akes it difficult to visit	the shop. The representative ma "MNP reservation" in the parent	ay be limited to			sivioo pie	Widel, and the said
%7 Only the transferor	may be the represer	ntative to whom this proc		wine reservation in the parent	neses.				
		ard cannot be delegated.	identification function.	please ask an au shop staff me	mber.				
Notes	,								
2. The store accepting	this power of atto	rney and KDDI/Okinaw	a Cellular will not be	d in and signed in person by the responsible for any disputes e thank you for your understan	between the re		,	atary) ar	nd the contract
				an be delegated may be limite f a minor, or the guardian of a					ET 445E
For more details or website.	related to a care institution). on agreement terms regarding au/UQ mobile communication services, check the au/UQ mobile blder's seal is not available, his/her signature will suffice. Use this QR code to access from smartphones.								
		out one of the proced							
This Power of Attor	ney		ures above		申込書番号	号			
If your current adIdentification docur	Contract holder (mandator)'s Identification document (copy) If your current address is written on the reverse side of your ID after moving, copy the reverse side as well. dentification document of the representative (mandatary) Certificate of family relationship Not required if you are within the scope of "family member" described in 3.								
If you wish to chang attorney even with	ge models but are of a certificate of fami	outside the scope of "fa ily relationship.		annot accept this power of	受付店名			,	,
 Your current au/UC You may be required For more information	ed to prepare other	titems depending on th	ne details of the proc	edure.	担当者		連絡先(—	<u> </u>
an au shop/au Style		me au website, or inqui	ire at the NDDI CUST	omer Support Center or at	本票取扱し	ハ は	ヤン返却/スニ	けン个可	時2カ月後末保管