Power of attorney (For change of resident registration)

To the Mayor of Koto City

Form completion date: YYYY / MM / DD

<Delegator(person making the request)>

A d d r e s s **Koto City**

N a m e _____

Date of birth YYYY / MM / DD　　Telephone number _____ — _____ — _____

I hereby appoint the below-mentioned person to be my agent with regard to the following matter(s) with the box(es) with check.

☐Notification of moving-in from another municipality (or from a foreign country) to Koto City

　　　※Including updating the address on the My Number Card, if applicable

☐ Notification of moving within Koto City

　　　※Including updating the address on the My Number Card, if applicable

☐Notification of moving-out from Koto City to another municipality (or to a foreign country)

☐Notification of change of household structure

☐Other procedures for updating resident registration (To be specific, _____.)

<Agent (Person who will appear at the counter)>

A d d r e s s _____

N a m e _____

Date of birth YYYY / MM / DD

- -

PIN(4 characters) Numbers only			

Electronic certificate of user identification			

The basic resident registration application			

※In case you have set different PIN for each application, please fill in these boxes.

※The part of this form with the PIN/ Password under the dotted line will be shredded when the procedures are completed.

To prevent the card from being locked by entering the wrong password due to misreading of alphabet/number (e.g."O"[ou]or[zero], "I"[ai]or[one]), please indicate whether it is an alphabet or a number by circling A (alphabet) or N(number) above each character.

Please write alphabets in BLOCK CAPITALS.

Alphanumeric password (6~16 characters) for the electronic certificate of the bearer's signature																
Circle	Alphabet	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
	Number	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
Password																

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