

**※Please read carefully and follow the instructions**

- The delegator himself/herself must fill in all the items on this form before handing it to the agent.  
(DO NOT write in pencil nor pen with erasable ink.)

**<For those who delegate updating the address on the My Number Card/Basic Resident Registration Card to the agent>**

- Please fill in the PIN below and enclose this form in an envelope. The envelope MUST be sealed.
- The card cannot be updated if the PIN is wrong, the card has been locked or the card's IC chip is not functioning properly.
- If the agent is a member of the same household as the delegator or the legal representative and this form is submitted on the same day as the notification of change of address, the electronic certificate can also be updated with the new address. In that case, the agent is required to present his/her valid identification card with photograph issued by the Japanese government or municipal office, e.g., Residence Card, My Number Card, and Japanese driving license.

**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/Basic Resident Registration Card, if applicable

Notification of moving within Koto City

※Including updating the address on the My Number Card/Basic Resident Registration 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																