Power of Attorney

						Date: (m)	/(d)	/(y)
To. Japan Electrical Safety & Environment Technology Laboratories								
	(Applica (Plea	nse enter "1. A Company n	ame: zip code(po title:		cation for JE	ET Certificatio		ature or Seal)
I hereby entrust the following person as agent of the applicant with the application for JET Certification, and delegate full authority to him for making application, changing the entry/entries of the Certification, and doing the related other procedures.								
	[Agent]							
		Company n Address: Section, Job Person in cl	zip code(po title:	ostcode))			
		Telephone: E-mail:			Fax:			
[Validity o	of this Power Till the chan From	of Attorney] (ge of the ago	ent	the appro		elow.) /(d) /(y)}		
Remark: copy.	If it is a new	Power of A	torney, plea	ase submi	t the origina	al. Next time o	onwards, plea	ase submit its