

National Communications Commission

Power of Attorney for Archive and Government Information Applications

Applicant:	Date of Birth: (dd/mm/yyyy)
Personal Identification Number:	Contact Number:
Domicile (Residence):	
Agent:	Date of Birth: (dd/mm/yyyy)
Personal Identification Number:	Contact Number:
Domicile (Residence):	
For the case of _____, I hereby appoint _____ to view, copy or photograph the archive and/or information as my Agent.	
To The National Communications Commission	
Applicant:	(Signature or Stamp)
Agent:	(Signature or Stamp)

Note: No violation of intellectual property rights and personal data protection laws shall be allowed for archive and information applications.

Date: _____(dd/mm/yyyy)