

Ilmarinen, P.O. Box 2, FI-00018 ILMARINEN

Principal's information (Self-employed person's information)	YEL insurance number*
	Identity number*
	First name and last name*
	Telephone*
Agent's information	Company
	Identity number*
	First name and last name*
	Telephone*

*) Required field

Power of attorney	<p>I authorise the above-mentioned person to manage the following matters related to YEL insurance in Ilmarinen's customer service (select options):</p> <p><input type="checkbox"/> Taking out YEL insurance</p> <p><input type="checkbox"/> Changing YEL contact details</p> <p><input type="checkbox"/> YEL contributions and certificates</p> <p><input type="checkbox"/> YEL income data and changing YEL income</p> <p><input type="checkbox"/> Terminating YEL insurance</p> <p>In Ilmarinen's online service (we will send separate user IDs):</p> <p><input type="checkbox"/> An authorised user can view and change the YEL insurance information. Take a look at the self-employed person's online service https://www.ilmarinen.fi/en/self-employed/online-service-for-self-employed/</p> <p>The power of attorney is in force for the time being. If the power of attorney ends, Ilmarinen's customer service must be notified immediately at tel. +358 10 195 083 (mobile call charge or local network charge).</p>
--------------------------	---

Signature of the self-employed person	Date

You can return the signed power of attorney **electronically via our website at [ilmarinen.fi/ota-yhteytta](https://www.ilmarinen.fi/ota-yhteytta) using the 'send attachment' feature of the Secure message service**. Change the recipient to: verkkopalvelu@ilmarinen.fi. You can also return the power of attorney by post to the address Ilmarinen Mutual Pension Insurance Company, PL 2, 00018 Ilmarinen.