Application for Disclosure of Personal Information

Please check the box below for the details of your application.

□Disclosure □Correction □Addition or deletion □Suspension of use

\square Elimination and	suspension of provision	to third parties \square Notification of	of the purpose of use
Please fill in the foll	owing information to ap	oply. (You can leave the fields fille	d in by us blank.) Æmail address is not required.
Application date	Year: Month:	Day:	(Seal)
Information of applicant (The principal)	Name		
	Address		
	Phone number		
	Email address		
Information of representative	Name		
	Address		
	Phone number		
	Relation to the applicant	 □ Representation of mandate □ Legal representative (parental authority, etc.) 	
	Representative identity verification document (must be enclosed)	□ Documents to verify the representative herself / himself () □ Letter from the attorney (Enclose the applicant's seal-impression certificate.) □ Relation to the applicant; transcript of a family register, extract of a family register, or certificate of residence (In the case of a legal representative.)	
Detail~Please des	cribe your application in	n detail.	
Verification of applicant or representative We will inform you o	of the results of our resr	oonse in a "Personal Information l	*Office use only

week after the application form arrives at our office.

If you have not received the "Personal Information Disclosure Report" within <u>one month</u>, please contact us at the consultation desk below.

[Consultation desk: TEL: +81-06-6345-4160]

To customers who request disclosure or notification of the purpose of use

If you request disclosure or notification of the purpose of use, for each request, please pay the fee for the simple registered postage (actual cost). Payment method; please purchase stamps for the fee and enclose them in your submission. If the fee is insufficient, or if the fee was not enclosed, we will assume that there was no request for disclosure or notification of the purpose of use.