Form

Request Form for Disclosure, Correction, Utilization Cease, etc.

To: Kirishima Shuzo Co., Ltd. Customer Service Center

Request Date	Date:
Request Category * Please enter a "√" in the □ for the applicable category	 Notice of purpose of use Disclosure Correction Addition Deletion Suspension Deletion Suspension of provision Other ()
Details of Request *Please provide as much details as possible.	
Person Requesting Personal Data	
Name	
Address	PO code:
E-mail	
Telephone Number	
Agent (to be filled in if the request is made by agent)	
Relationship to the person requesting personal data	 □ Agent designated by the person requesting □ Legal agent □ Other ()
Name	
Address	PO code:
E-mail	
Telephone Number	

*Please be sure to fill in the "Request Date," "Request Category," "Details of Request," and "Person Requesting Personal Data" fields. If the request is made by an agent, please also fill in the "Agent" field.

*In order to verify the identity of the Individual, we may contact the applicant at the e-mail or telephone number provided. *In addition to this request form, please be sure to send us the <u>documents necessary to verify the identity of the person requesting</u> <u>personal data</u>. If the request is made by an agent, <u>documents necessary to confirm the authority of representation</u> are also required. For details, please check <u>"Handling of Personal Information, etc." 5. Disclosure, Correction, Suspension of Use, etc." (1)</u>