

Date:

Taisei Housy Co., Ltd. To: Contact for inquiry

**Request for “Disclosure, etc.” of Personal Information**

I request as follows under the “Act on the Protection of Personal Information” (hereafter “Law”).

◆ **Select and check applicable** □

Requested by:	Classification	<input type="checkbox"/> Person to whom the information belongs <input type="checkbox"/> Mandatory	<input type="checkbox"/> Legal representative
	Address		
	Name		
	Telephone number	TEL ( )	
Requested matters	<input type="checkbox"/> Notification of purpose of use (Article 27 of the Law)		
	<input type="checkbox"/> Disclosure (Article 28 of the Law)		
	Correction, etc. [ <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Deletion] (Article 29 of the Law)		
	Suspension of use, etc. [ <input type="checkbox"/> Suspension of use <input type="checkbox"/> Deletion] (Article 30 of the Law)		
	<input type="checkbox"/> Suspension of provision to third party (Article 30 of the Law)		
Reason for request			
Personal information to be requested	<input type="checkbox"/> Name <input type="checkbox"/> Address <input type="checkbox"/> Age <input type="checkbox"/> Sex <input type="checkbox"/> Name of place for work, etc. <input type="checkbox"/> Tel <input type="checkbox"/> Email <input type="checkbox"/> Income <input type="checkbox"/> Title <input type="checkbox"/> Other information ( )		
Services subject to personal information to be requested, etc.	For which service of ours (or opportunity) did you provide the personal information to be requested?		

◆ **Please also fill in below if the requesting party is “agent.”**

Relationship with the person to whom the information belongs	<input type="checkbox"/> Parent <input type="checkbox"/> Spouse <input type="checkbox"/> Others ( )
Person to whom the information belongs	Address
	Name
	Telephone number

◆ **If the requesting party is the “person to whom the information belongs,” submit from ①, if the requesting party is “agent,” submit from ①, ② and ③, by attaching each one applicable document.**

Identification document	①	<input type="checkbox"/> Driver's license (copy) <input type="checkbox"/> Other certificates with photo issued by public agency	
Agent's identification document	②	<input type="checkbox"/> Basic Resident Register card with photo (copy) <input type="checkbox"/> Japanese passport (copy) <input type="checkbox"/> Foreign resident registration card (copy) <input type="checkbox"/> Health insurance certificate (copy) <input type="checkbox"/> Family register (or extract) <input type="checkbox"/> Pension handbook (copy)	
Agent's qualification confirmation document	Person with parental authority	③	<input type="checkbox"/> Family register <input type="checkbox"/> Resident register
	Guardian of minor		<input type="checkbox"/> Court's written decision of selection (copy) <input type="checkbox"/> Certificate of registered matters of custody registry <input type="checkbox"/> Family register
	Guardian of adult	<input type="checkbox"/> Court's written decision of selection (copy) <input type="checkbox"/> Certificate of registered matters of custody registry	
Mandatory		<input type="checkbox"/> Letter of attorney (attach seal of the “person to whom the information belongs” and the seal registration certificate of such seal).	

Please be noted “Reception via phone / FAX” for the above request. Response to the requested content shall be made in writing and sent to the requesting party's address described on the letter of request.

Disclosure, etc. requires a certain number of days. Please be noted that disclosure, etc. is not permitted due to laws, etc.

In case that no identification documents of the person to whom the information belongs / agent, or in case that descriptions in these identification documents and those in this letter of request differ, the letter of request may be temporarily returned.

Personal information obtained by us for request for disclosure, etc. shall be treated only for response to request for disclosure, etc.

※Company use only

Contact person

(Name)

Approved by (CPO)	Reviewed by (Contact person)	Application (PO)
. .	. .	. .

\*Contact person must obtain CPO's approval via “Application for Approval of Treatment of Personal Information” when deciding on non-disclosure.