

Reference No. _____

DD____/MM____/YYYY____

Disclosure of Personal Information

Request Form

To 株式会社 Guardian

Name _____

(Romaji/Furigana)

Address or Residence

〒

_____ Tel _____ (____) _____

Contact Information (if it differs from above)

〒

_____ Tel _____ (____) _____

Based on the provisions stated in the Company's Personal Information Privacy Policy, we are requesting a copy of the specified personal information to be sent to us (in principle, the copy of specified personal information will be sent by registered mail). The requested personal information is as follows.

1. Personal information requested for disclosure (please specify)

2. Fees

¥ 1800 (Please include the name of the applicant when making the transfer. Transfer costs are to be borne by the applicant.)

Account details

- Bank 三菱UFJ銀行
Mitsubishi UFJ Ginkou
- Branch 聖護院支店 (445)
Shogoin branch (445)
- Account Number 0 2 1 0 3 1 8
- Account Name 株式会社Guardian
Kabushishikikaisha Guardian
- Furigana (カ) ガーディアン

Transfer date

DD____/MM____/YYYY____

(Please attach a copy of proof of bank transfer.)

3. Personal identification

a) Applicant <input type="checkbox"/> Named person <input type="checkbox"/> Legal representative <input type="checkbox"/> Voluntary representative
b) Identification documentation <input type="checkbox"/> Driver's license <input type="checkbox"/> Health insurance Card <input type="checkbox"/> My Number Card (with address) <input type="checkbox"/> Residence Card、 Special Permanent Resident Certificate, or Alien Registration Card <input type="checkbox"/> Other () * When requesting an invoice, please attach a copy of documentation with address
c) Please only provide if applicant is legal representative/voluntary representative (i) Applicant status <input type="checkbox"/> Minor (DOB: DD ___/MM___/YYYY___) <input type="checkbox"/> Legal guardian <input type="checkbox"/> Authorized representative (ii) Full name (Furigana) _____ (iii) Address/residence _____
d) If a legal representative makes the request, please submit one of the following documents (in addition to A). Documents verifying request eligibility: <input type="checkbox"/> Family register <input type="checkbox"/> Certificate of registered matters <input type="checkbox"/> Other ()
e) If a voluntary representative makes the request, please submit one of the following documents (in addition to A). Documents verifying request eligibility: <input type="checkbox"/> Warrant <input type="checkbox"/> Registered seal certificate, copy of driver's license (of proxy) etc.

<Description notes>

1. Name, address, and contact information

If the request is made by a person (legal representative or voluntary representative (hereinafter collectively referred to as "proxy")), please state the name (maiden name is acceptable) and address and residence of the proxy. Please be sure to enter the correct name and address, as we will contact you regarding the decision to disclose the information based on the name, address and residence entered here. Please enter your name, address, and residence accurately. If you have a contact other than the address listed in the "Address or Residence" column, please enter the contact information (name, address and telephone number) in the "Contact Information" column.

2. To those requesting the disclosure of his/her personal information.

Please provide specific information that will enable us to identify the personal information you requested for disclosure, such as the name and data content of the personal information file(s) containing the requested personal information.

3. Methods used for disclosure

Please fill in all required information in the form below and send it to us after confirming and agreeing to our Direction of Personal Information Protection.

As a general rule, we will send you a copy of your personal information by registered mail. If a copy of the specified personal information sent by us by registered mail is returned, the cost of sending the copy (postage stamp, etc.) will be required again.

4. Payment of the disclosure fee

When requesting the disclosure of personal information, you must pay 1800 yen for each document containing personal information. Please attach a copy of the proof of bank transfer.

5. Personal identification documents, etc.

Only requests for disclosure by mail will be accepted.

(1) Request for disclosure by the applicant

When making a request for disclosure, please submit a copy of a document for identification (driver's license, health insurance card, My Number card, residence card, certificate of alien registration, or any other document that shows your address and name) copied front and back using a photocopier, and a copy of the residence certificate (must be made within 30 days before the day you make the request for disclosure). A copy of the residence certificate (juminhyo) is an official document issued by the municipality and a photocopy of the certificate is not acceptable.

(2) Request for disclosure by a representative

Please fill in the "Applicant status" column only if the request is made by a representative. The required information is the status of the applicant, his/her nomination and his/her address or place of residence. If the request is made by a legal representative, please submit a copy of his/her family register, an extract from his/her family register, a certificate of registered matters of the adult contribution registration, or other documents proving that he/she is the legal representative (these must have been made within 30 days before the date of the request). Please note that a copy of the family register and other documents certifying that you are the legal representative are official documents issued by the city, town or village, etc. Copies of such documents are not acceptable.

If the request is made by a voluntary representative, a letter stating power of attorney must be submitted (the power of attorney must be prepared by the person who has power of attorney within 30 days prior to the day of the request). In addition, (1) the personal seal of the proxy must be affixed and a certificate of seal registration (must be made within 30 days before the day of the request) must be attached, or (2) a copy of the document issued to the person, such as driver's license or my number card, must be submitted together with the proxy. (3) A copy of the letter of attorney is not acceptable.

The Company may confirm the fact of the power of attorney to the person to whom the personal information pertains by telephone or other means.