

Request Form for Disclosure, etc. of Personal Information

To: Initialbay Co., Ltd.

Request details <input checked="" type="checkbox"/>	<input type="checkbox"/> Disclosure <input type="checkbox"/> Notification of purpose of use (Please pay the fee for the items on the left) <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input type="checkbox"/> Suspension of use <input type="checkbox"/> Refusal of provision <input type="checkbox"/> Records of provision to third parties		
Name		Date of request:	
Address	TEL: _____ FAX: _____		
Reason for registering personal information <input checked="" type="checkbox"/>	<input type="checkbox"/> Interview <input type="checkbox"/> Employment <input type="checkbox"/> Contract with Initialbay (for construction work, etc.) <input type="checkbox"/> User registration <input type="checkbox"/> Others (Others: _____)		
Details of request (Please describe specifically) Attachments: <input checked="" type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/> Yes	<small>*In the case of a correction request, please provide both the personal information before and after the correction. In the case of a correction or deletion request, we may ask you to submit proof such as a certificate of residence. *In the case of a request made by an agent, please submit the documents listed on the next page.</small>		
Preferred method of response <input checked="" type="checkbox"/>	<input type="checkbox"/> In-person visit, <input type="checkbox"/> Postal mail, <input type="checkbox"/> FAX <input type="checkbox"/> Email address: _____		
Fee: 1,100 yen	Required only in the case of a request for disclosure or notification of purpose of use: <input type="checkbox"/> Postage stamp enclosed <input type="checkbox"/> In-person payment		

The personal information you provide will be used only for the purpose of responding to your request.

If personal information not held by our company is entered on this form, it will be promptly deleted after a response is provided.

..... Response to Request for Disclosure, etc. (For Office Use Only)

Dear _____

Reference number		Response date:		Response method	<input type="checkbox"/> Postal mail <input type="checkbox"/> Email
Identity verification method	<input type="checkbox"/> Applicant: <input type="checkbox"/> Agent: <input type="checkbox"/> Power of attorney, <input type="checkbox"/> a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d (See the end: Circle the applicable item.)				
Response details	Attachments: <input type="checkbox"/> No <input type="checkbox"/> Yes:				
Reason for inability to respond	<input type="checkbox"/> There is no registration. <input type="checkbox"/> The applicant's data cannot be confirmed.				
	<input type="checkbox"/> Special procedures are prescribed by law.				
	Provisos, etc. (<input checked="" type="checkbox"/>)	<input type="checkbox"/> 3.4.4.1: Items a), b), c), and d) in (1) on the next page			
		<input type="checkbox"/> 3.4.4.4: a), b), c), d), and e) in (2) on the next page			
		<input type="checkbox"/> 3.4.4.5: a), b), and c) in (3) on the next page			
		<input type="checkbox"/> 3.4.4.6: (4) on the next page. When correction, etc. is not required (e.g., information related to evaluations, etc.)			
<input type="checkbox"/> 3.4.4.7: a), b), and c) in (5) on the next page					
Fee	<input type="checkbox"/> Free <input type="checkbox"/> Received 1,100 yen.				
[Contact for inquiries] Hideaki Sato General Affairs Department, Initialbay Co., Ltd. TEL: 045-315-6101 FAX: 045-722-3630 hideaki.satou@initialbey.co.jp 1F, NTT Yokohama Minami Building, 3-54, Hananoki-cho, Naka-ku, Yokohama City, Kanagawa, 232-0018, Japan			Personal information protection manager	Person in charge of disclosure request	
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