

Request for Correction, etc. of Personal Information

Month Day, Year

To: SunFlare Co., Ltd.

Name

(Seal)

[] Pursuant to Article 26 of the Act on the Protection of Personal Information, I hereby request the correction of the following personal data held by your company.

(Fill in 1 and 3 below. If you are a legal representative of the data subject, also fill in 2.)

[] Pursuant to Article 27 of the Act on the Protection of Personal Information, I hereby request the cessation of the use of the following personal data held by your company.

(Fill in 1 and 4 below. If you are a legal representative of the data subject, also fill in 2.)

1 Confirmation of identity

Name			
Date of Birth	Month Day, Year		
Address			
	Postcode		
	Tel.	()	-
Identity confirmation method	[] By post [] In person		
Identity confirmation documents	1. Driving license 2. Passport 3. Health insurance card 4. Pension book 5. Basic Resident Register Card (with photo) 6. Residence Card or special permanent resident certificate		
Type of registered information	[] Academy mail membership [] Academy student [] Registered translator [] Ex-employee		
Notification method	[] By Post [] In person		

2 For applications made by legal representatives or agents

Agent/representative name		
Address		
	Tel ()	
Relationship with data subject	1 Legal Representative (a. Parent/guardian b. Guardian of adult) 2 Mandatary	

Documents to Confirm Authority as Agent/ Representative	<p>1 For legal representatives (any one of the below is required)</p> <p><input type="checkbox"/> Family register or abstract thereof</p> <p><input type="checkbox"/> Certificate of registered matters</p> <p><input type="checkbox"/> Certificate from family court</p> <p>2 For mandataries (all of the following are required)</p> <p><input type="checkbox"/> Power of attorney (with registered seal impression)</p> <p><input type="checkbox"/> Certificate of seal registration</p>
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3 Information requiring change

Please enter the correction information for items of personal information requiring correction, addition or deletion.

With regard to the following personal information, please carry out the instructions below:	
<input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Deletion	
Details of change (*1)	
Reason for necessity of change (*2)	

(*1) Please enter the details of the correction, addition or deletion so they can be clearly understood.

(*2) Enter the reason why the change is necessary.

4 Cessation of use or disclosure to third parties of personal information, or deletion of personal information

With regard to the registered information, please carry out the instructions below:	
<input type="checkbox"/> Cessation of use <input type="checkbox"/> Cessation of provision to third parties <input type="checkbox"/> Deletion	
Reason (*1)	

(*1) Enter the reason for the application for the cessation of use or disclosure to third parties of personal information, or the deletion of personal information.