Form for various requests

Red	uest	Date:	/	/
100	lucsi	Date.	- /	- /

Please fill out the Form below and return to the Personal Data Information Desk with all documents required for confirmation of identification. (Postage stamps required.) Please fill out all items below.

Personal Data Information Desk for various request

ANA Cargo Inc.

Personal Information Handling Desk

1-5-2, Higashi-Shimbashi, Minato-ku, Tokyo, Japan, 105-7140

Please note that this form is accepted only by mail.

Information for Identifying Person to Whom various requests Pertains (We may not be able to accept disclosure if all columns have not been completed.)			
Last Name		Birth Date	Day Month Year
First Name		Diffil Date	1 1
Address	Zip Code		
Telephone	*As we may call for identification, please fill in daytime phone number.		
Documents to confirm identification	*Please note that copies of two documents from the below should be enclosed with this form. Photo ID is required as one of the documents. Examples 1. Driver's license 2. Passport 3. Health insurance card (masking insurance card numbers)		
of the principal		isability certificate	als) 4. Basic resident registration card with 7. Resident card or Special permanent ndividual Number Card (front page only)

Information on Person Requesting for various requests (Please fill this out only if the request is being made through a representative.)					
Last Name		Birth Date	Day	Month	Year
First Name		Diffit Date	,	/ /	
Address			Zip Code		
Telephone		*As we may number.	call for identificatio	n, please fill in	daytime phone

Documents required			
Relationship to the individual	Document to verify relationship to the individual	Documents to confirm Identification of representative	
1.A person with parental authority	Person's family register	*Please note that copies of two documents from the below should be enclosed with this form. Photo ID is	
2.Guardian of an adult	Guardian certificate	required as one of the documents. Examples 1. Driver's license 2. Passport 3. Health	
3.Representative	Letter of trust	insurance card (masking insurance card numbers and identification symbols / numbers of insured individuals) 4. Basic resident registration card with photo 5. Pension	
	(Legal representatives shall provide certifying	book 6. Physical disability certificate 7. Resident card or Special permanent resident certificate 8.	
,	document)	Certificate of seal registration 9. Individual Number	

Types of request to be handled

Circle the number for the type of requests to be handled and fill out details.

Types of Request	Details
1. Change	
2. Deletion	
3. Addition	
4. Discontinuance of Usage	
5. Erasure	
6. Notice of Purpose of Use	
7. Withdrawal of Consent	
8. Request for Receiving	
9. Request for Handover	
10. Objection	
11. Provision of information on personal	
information protection measures	

Handling of this request form

The personal data obtained in this form is only taken for this request. We will dispose of this form and other related documents one month after our reply by an appropriate method.

Denials for requests will be notified.

- ·Required item is missing.
- ·Confirmation if not available.
- ·Requested item was not eligible for modification of personal data.
- $\cdot \text{Request has serious impact to ANA's business operation.}$
- ·Request offends other laws.
- ·Life, health, property and other rights of the individual or third parties are affected.

■For official use by ANA Cargo Inc.

Acceptance date and time			Management representative validation		
Received on : Year	Month	Date	Time	<u>:</u>	