

OH Channel Innovations Co., Ltd.

Personal Information Protection and

Enter
Estimated
sending date

SAMPLE

Request Form

Personal Information

Based on Article 33 of the Personal Information Protection Law, I am making the following request.

-- Details --

Date of Request	2005 Year 04 month 20 day
Address	(zip code)100-8280 1 Ikegami, Haruoka-cho, Owariasahi-shi, Aichi, Japan, 488-8501
Name	xxxxxxxxxxxxx (and signature/personal seal)
Tel. Num	03-3258-1111
E-mail Address	xxxxxxxxxxxxx
Relation to OH Channel Innovations Co., Ltd.	☒ Individual Customer (Purchased product name:) ☐ Staff member or worker for purchase: Their company or org .name: : Work location related to OH Channel Innovations Co., Ltd.: ☐ Stockholder: ☐ OH Channel Innovations Co., Ltd. employee: (Employee number:) ☐ Retired staff: Work location:) Other:(Please be specific.)
Request contents	☒ Purpose-of-use report ☒ Reveal ☐ Correct, add, or delete ☐ Stop usage or erase ☐ Stop provision to a third party ☐ Record of the provision to/receipt from the third party
Request details	
Format of Response	If you have any requests regarding the format of response, please indicate them below. If no specific request is made, we will reply by document. (We will reply in the manner stipulated by each service and / or as far as reasonably)
Request basis	(Basis for customer believing that OH Channel Innovations Co., Ltd. Corp maintains personal information) When new consumer products are

Enter Address from
document proving identity

OH Channel Innovations Co., Ltd.
may need to contact you.

Enter checkmarks
on the right .

Enter checkmarks
on the right .

Try to be as details as
possible

Please note:

- 1. When mailing a request by post, send it by registered mail or by any other method that leaves a record of delivery.**
- 2. Attach a copy of a document confirming your identity (such as health insurance card and driving license.**
- 3. When a representative making a request, attach(i) a copy of the identity card of the data subject and of the representative and (ii) a letter of attorney.**
- 4. When requesting notification or disclosure of the purpose of use, pay the fee in advance and attach a copy of the document pricing the payment (such as ATM transfer receipt if bank transfer).**
- 5. We may not be able to meet your request regarding the format of response.
If by post, it will send by restricted recipient delivery (special type) to the address stated on your identification documents.**
- 6. Personal information provided in this form will only be used to the extent necessary to response your request such as disclosure.**
- 7. As a result of our Search for your personal information, if we are fine out it is highly likely that we do not keep your personal information and one of OKI companies might keep it, we might contact the company to investigate the personal information you have provided in this request form.**