Application for Suspension of Personal Data Held Usage

Date

Please fill out the form below and send it to Sanden's personal data disclosure service counter, along with identity verification documents of the individual concerned. (Mail charges are to be borne by applicants.)

Sections enclosed in bold frames must be filled out.

Service counter receiving personal data disclosure requests:

Sanden Holdings Corporation, Legal Department, Legal & Administration Division Akihabara Daibiru Building,

1-18-13, Soto Kanda, Chiyoda-ku, Tokyo, Japan 101-8583

DATA TO IDENTIFY A PE (All sections within bold frames sho	RSON FOR DISCLOSURE uld be filled out, to prevent the incorrect suspension of personal data.)	
Name:		
Date of Birth:		
Address:		
Telephone No.:	() -	(Daytime telephone number)
ID Documents:	1. Drivers License 2. Passport 3. Other ()
DATA ON DISCLOSURE	APPLICANT	

DATA ON DISCLOSURE APPLICANT (Fill out only if the subject person for disclosure and the applicant are different.)		
Name:		
Date of Birth:		
Address:		
Telephone No.:	() - (Daytime telephone number)	
Relationship to Subject Person:	Party with parental authority	
Documents Certifying Relationship with Subject Person:	Family register Certificate of adult guardianship Substituting the second	
Applicant's ID Documents:	1. Drivers License 2. Passport 3. Other ()	