

Request for Disclosure, Etc.

Request	<input type="checkbox"/> Purpose of Use		<input type="checkbox"/> Disclosure of Personal Information	
	<input type="checkbox"/> Correction	<input type="checkbox"/> Addition	<input type="checkbox"/> Deletion	
	<input type="checkbox"/> Cessation of Use	<input type="checkbox"/> Erasure	<input type="checkbox"/> Cessation of Provision to Third Parties	
Date of Request				
Name (Furigana) Name				
Address	〒			
Reason for Registering/Providing Your Personal Information				
Details of Request				
Other Contact Information				

About the Handling of Personal Information

The personal information provided on this form will only be used for the purpose of taking action in response to the request for disclosure, etc., and for contacting you with our response. In order to fulfill this purpose, some work may be outsourced by the Company. Providing your personal information is voluntary, but in the case that some information is not provided, we may not be able to comply with your request for disclosure, etc. By submitting this form you agree to the above statements.

■ Inquiries: modelcase, Inc. Personal Information Administrator (03-5369-1035)

For the Company's Use Only:

Type of ID	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Passport	<input type="checkbox"/> Proof of Health Insurance	<input type="checkbox"/> Nenkin Book
	Other ()			