

Application Form for Suspension of Use, etc. of Personal Information

Application Date: _____

To: Japan Communications Inc.

I apply for suspension of use or deletion (“the Suspension of Use, etc.”) of my personal information which is held by Japan Communications Inc. (“the Company”), as follows.

Applicant (*1) (*2)	Applicant	Name	
		Address	
		Birth date	
		Phone number	
	Attorney	Name	
		Address	
		Birth date	
		Phone number	
Detail of the Suspension of Use, etc.		<input type="checkbox"/> Suspension of use <input type="checkbox"/> Deletion	
Personal information of which I apply for the Suspension of Use, etc.		(Please describe in detail below.)	
Reason why I apply for the Suspension of Use, etc.		(Please describe in detail below which of the item listed in Article 35, Paragraphs 1 or 5 of Act on the Protection of Personal Information applies.)	
Method of notice by the Company (*3)		<input type="checkbox"/> In writing <input type="checkbox"/> FAX <input type="checkbox"/> Email <input type="checkbox"/> Other method (_____)	
Destination of notice by the Company			
(Notes) *1 Please submit the copy of one of the following documents to enable the Company to confirm the applicant (including attorney) 's identity. driver's license card, my number card (side with photo only), passport, residence list card with photo, health insurance card, residence card / special permanent resident certificate, or residence certificate (without my number) *2 In case of application by the attorney, please submit a letter of attorney and certificate for the seal stamped on the letter. *3 In case of notice by postal mail or fax, the applicant needs to pay 600 yen as fee per request. Please send 600-yen postage stamp or postal money order by postal mail.			