

Request for personal data disclosure

To: Resident First Co., Ltd.

I would like to request a disclosure of personal data based on law No. 25 covering the protection of personal data.

Note

※The "principle" on this form is the one who seeks the disclosure of personal data.

Requested Date (Date/Month/Year)	/ /
Contents of request for disclosure (Please mention here in concrete terms what information you require to help enable us to disclose the	
Division	Principle / Proxy
Address to (mail) response	Principle / Proxy
Address of Principle	
Name of Principle	
Telephone number of Principle	
Documents for principle identification (Please check either ① or ② documents to attach.)	①One copy of the following documents <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Physical disability certificate <input type="checkbox"/> Alien Registration Card
	②Two copies or originals of the following documents <input type="checkbox"/> Inkan seal certificate <input type="checkbox"/> Resident's certificate <input type="checkbox"/> Health insurance card <input type="checkbox"/> Pension book <input type="checkbox"/> Employee ID <input type="checkbox"/> Student identification card
※Unnecessary to enter below if principle requests information release.	
Address of Proxy	
Name of Proxy	
Telephone numbers of Proxy	
Identification documents for proxy (Please check either ① or ② documents to attach.)	①One copy of the following documents <input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Physical disability certificate <input type="checkbox"/> Alien Registration Card
	②Two copies or originals of the following documents <input type="checkbox"/> Inkan seal certificate <input type="checkbox"/> Resident's certificate <input type="checkbox"/> Health insurance card <input type="checkbox"/> Pension book <input type="checkbox"/> Employee ID <input type="checkbox"/> Student identification card
Identification document for qualification of proxy (Please check applicable document to attach)	One applicable document of the following
	Parents of minor <input type="checkbox"/> Resident's certificate
	Guardian of an adult <input type="checkbox"/> Certificate of matter to be registered Voluntary proxy <input type="checkbox"/> A letter of attorney from a principle

(Remark)

- The address (mailing) should be the address on the identification documents for the principle or the proxy.
- A handling fee for disclosure application shall be a flat 1,500 (including tax), and should be paid at the time of application.

A money order will be the only accepted form of payment. However, if the fee is more than 1,500 yen to disclose due to video footage, etc then any extra expenses will be charged and must be paid before a response is given.

This handling fee is non-refundable even if we decide not to issue a disclosure and the data is not existed in our data.

(Mail the documents to)

Business Operation Section at Protection Law the Personal Data,
Aoyama Tower Place, 8-4-14 Akasaka,
Minato-ku, Tokyo, 107-0025

(For office use below)

Date/Name of Staff/Register Numbers	/ /
Check <input type="checkbox"/> Invoice	
<input type="checkbox"/> Principle ID	
<input type="checkbox"/> Proxy ID	
<input type="checkbox"/> Handling Fee	