## Personal Information Disclosure Request Form

Request Date: YY MM DD

## TO: Hotel Okura Fukuoka (Hotel Okura Fukuoka Co., Ltd.)

Pursuant to the provisions of the Act on the Protection of Personal Information, I hereby request that you disclose personal information retained by your company in relation to the following covered person.

			(Input require	ed for all items marked 💥)
1. Covered Person	Kana ※ reading			
☐ Covered Person	Full Name ※			SEAL
☐ Agent	Kana ※ Home address			
☐ Legal Agent ☐	Telephone 1※	Home		
	Telephone 2	Mobile or work		
(If agent request, complete the agent details below.)	Contact for ※ communic	<u>'</u>		
	FAX No.			
	E-mail			
2. Information about Agent, etc.  Relationship to □ Parent □ Guardian □ Heir □ Other( )  covered person				
Kana				
Full Name				SEAL
Telephone			(Circle one : F	Home • Work • Mobile)
3. Scope of the disclosure request ※ (Please give details regarding the personal information requested.)				
4. Details of Request ※ (Please provide detailed information.)				
resident □ health in	: n documents (copy): icense  passport  card or special perma	(AM •PM) [Identity docuindividual numinent resident	nber card 🛘 basic resident	registration card
■ Document evidencin		·	1	Person in Charge
■ Received by : Manager Seal	Section Seal	/Division	■Response date:	Manager Seal
■ Chief Privacy Office Signature	er :		Seal	