Request for Suspension of Use of Personal Information

To: Personal Information Manager, NTT Advanced Technology Corporation,

I hereby request suspension of use of my personal information in the database held by your company.

1.	Requester (the requesting person)
	Request Date: Year/Month/Date
	Address:
	Name:(Seal)
	Phone Number:
	copy of an official ID card (either of driver's license, passport, health insurance card, certificate of idence (issued within last 3 months) or family register (issued within last 3 months)) is required.
2. I	Details of the request (Please check the applicable one.)
•	Type of suspension of use, etc.:
	□Suspension of use □Erasure □Suspension of provision to a third party
•	Reason for request:
	□Because it is handled far beyond the scope of achieving the purpose of use at the time of
	acquisition.
	□Because it was acquired by deception or other fraudulent means.
	□Because it is handled in violation of the prohibition of inappropriate use.
	□Because it is no longer necessary to use.
	□Because of a serious leak.
	□Because there is a risk that the rights or legitimate interests of the requesting person may be
	harmed. □Because the information is provided to a third party beyond the scope of achieving the purpose of use, without taking the measures prescribed in Article 27, Paragraph 1 or Article 28 of the Act on the Protection of Personal Information.
	Basis of request:
	* In the case of suspension of provision to a third party, please write the name of the third party, its contact information, and the basis for judging that it was provided by NTT Advanced Technology Corporation.
3.	Please fill in the followings in the case of a request by an attorney-in-fact.
	Address:
	Name: (Seal)
	Dhone Number

- * Please fill in the followings about the attorney-in-fact. (Check the applicable one.)
- □ The attorney-in-fact has parental authority in the case that the requesting person is under 15 years old.

 → A copy of the family register is required.
- □ Adult guardian of the requesting person → Certificate of registered matters is required.
- □ The attorney-in-fact other than those listed above → prescribed power of attorney, certificate of seal impression registration of the requesting person (issued within last 3 months) and copy of the official identification of the requesting person and the attorney-in-fact (either of driver's license, passport, health insurance card, certificate of residence (issued within last 3 months) or family register (issued within last 3 months) are required.

However, in the requests of 1 or 3, when submitting a copy of official certificates that an individual can be identified, please make a mask processing for permanent domicile, insurer's number, symbol and number of insured person (subscriber and member), etc. and basic pension number.

Form 3-2

Request for Suspension of Use of Personal Information / Power of Attorney

To: Personal Information Manager, NTT Advanced Technology Corporation,

I hereby grant my attorney-in-fact the power to request suspension of use of my personal information in the database held by your company.

<requesting person=""></requesting>	
Date: Year/Month/Date	
Address:	
Name:	(Officially registered seal)
Phone Number:	<u>-</u>
of an official ID card (either of driver's within last 3 months) or family register * However, when submitting a copy of	of seal impression registration (issued within last 3 months) and a copy license, passport, health insurance card, certificate of residence (issued r (issued within last 3 months)) are required. official certificates that an individual can be identified, please make a micile, insurer's number, symbol and number of insured person ic pension number.
<attorney-in-fact></attorney-in-fact>	
Address:	
Name:	
Phone Number:	_