

Date : / /

Kinki Nippon Tourist Co.,Ltd.

Application Form of Request of Disclosure, etc. of EU personal data

I request to respond over my EU personal data that I provided as below.

Content of Request	
<input type="checkbox"/> Disclosure of my EU personal data	
<input type="checkbox"/> Rectification, Addition Erasure of my EU personal data	
<input type="checkbox"/> Suspension of use / Suspension of Transfer to Third Party of my EU personal data	
<input type="checkbox"/> Transmission of my personal data	
Applicant	Name :
	Address :
	Phone Number :
	E-mail Address :
EU Personal Data	Name :
	Address :
	Phone Number :
	E-mail Address :
	Relation between applicant and EU data subject :
Detail of Application and Methods to Provide Information (Phone Call / E-mail / FAX / Document, etc.) :	
Reason of Application :	

Kinki Nippon Tourist Co.,Ltd. fills out as follows

Department _____ **Reception Number** _____

Person in Charge of Confirming the Identity of Requestor :	Document for confirming the Identity of Requestor :
Reception Number :	Means of Notification : Phone Call / E-mail / FAX / Document
Person in Charge to Respond Request :	Date of Completion : YYYY / MM / DD

Date : / /

**Application Form of Request of Disclosure, etc. of EU personal data
Identification Documents**

① In the case where EU data subject makes the request;

Identification Card issued by countries in EU / Driver's License / Copy of Passport / Copy of other public certification

Attach Document here

② In the case where representative of EU data subject makes the request;

In addition to the identification documents of EU data subject, the same identification documents of representative as well as the letter of delegation from the data subject must be obtained. (in case of lawyer, his or her registration number as a lawyer is also required)

Attach Document here

Date : / /

Kinki Nippon Tourist Co.,Ltd.

Delegation of Request of Disclosure, etc. from EU Data Subject

In order to request to disclose my personal data that I provided, I delegate the representative as below.

Content of Delegation of Request	
<input type="checkbox"/> Disclosure of my EU personal data	
<input type="checkbox"/> Rectification, Addition Erasure of my EU personal data	
<input type="checkbox"/> Suspension of use / Suspension of Transfer to Third Party of my EU personal data	
<input type="checkbox"/> Transmission of my EU personal data	
Applicant	Name :
	Address :
	Phone Number :
	E-mail Address :
Representative	Name :
	Address :
	Phone Number :
	E-mail Address :
	Relation between applicant and representative :
Detail of Application and Methods to Provide Information (Phone Call / E-mail / FAX / Document, etc.) :	
Reason of Application :	

Kinki Nippon Tourist Co.,Ltd. fills out as follows

Department _____ **Reception Number** _____

Person in Charge of Confirming the Identity of Requestor :	Document for confirming the Identity of Requestor :
Reception Number :	Means of Notification : Phone Call / E-mail / FAX / Document
Person in Charge to Respond Request :	Date of Completion : YYYY / MM / DD