

Request to Correct Personal Information

Attn: Office for Inquiries
Vantec Corporation

Date:

I hereby make a following request for correction of personal information held by Vantec Corporation in accordance with Item 1, Article 26 of the Act on the Protection of Personal Information (hereinafter referred to as 'the Act').

Applicant/Representative (please circle either of 'Applicant' or 'Representative'.)	
Name	
Date of Birth	Year _____ Month _____ Date _____
Postal Address	Postal Code -
Phone Number	<day-time contact> () -

1. Details of request (please check one of the following)

<input type="checkbox"/>	Correction	<input type="checkbox"/>	Addition	<input type="checkbox"/>	Deletion
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2. Details of the person to whom the personal refers (only fill in this part if the request is made by a representative)

Name	
Date of Birth	Year _____ Month _____ Date _____
Postal Address	Postal Code -
Phone Number	<day-time contact> () -

3. Information that needs to be corrected. (please be specific.)

(e.g. The information "xxx" is wrong; please correct it to "xxx.")

*Please provide additional documentation that verifies the correct information.

<Notes>

1. If the request pertains to the applicant's own information, a proof of identity will be required. In case the request is made by a representative (Item 3, Article 29 of the Act), a proof of the identity of the representative will be required. (In case the representative is a legal representative, documentation proving a legal representative will be required.)
2. In case the request is made by a representative, the notice of intended use and the disclosure of personal information will be given to the person to whom such personal information pertains.
3. Personal information Vantec has gained from this request form will be utilized only for this request. This request form and related-documents submitted will be kept confidential for 5 years after this request has been answered, and will then be disposed.

[For Vantec Use Only]

Personal Information Protection Administrator	Planning /Implementation Manager	Liaison Officer	Received Date/ Received By	Verification of Applicant or Representative	Verification of The Person to Whom the Data Pertains
				Verification Documents	Verification Result