

Application date: Year ____ Month ____ Date ____

To: SHIBAURA MECHATRONICS CORPORATION

Request Form for Personal Data Correction etc.

I hereby make the following request concerning personal data held by Shibaura Mechatronics in accordance with the Personal Data Protection Law.

1. Matters concerning the person to whom the personal data refers

| | | |
|--|--|---|
| Information concerning the person to whom the personal data refers | | |
| | Name | Affix seal here |
| | Postal address | Postcode — |
| | Telephone number | () — (Telephone for daytime contact) |
| | E-mail address | |
| Details of request (Please circle one.) | 1. Correction of personal data 2. Addition of personal data 3. Deletion of personal data 4. Cessation of use of personal data 5. Cessation of disclosure of personal data to third parties | |
| | Please indicate the specific reason for your request. (Errors in personal data or use for a purpose other than that stated without consent, etc.) | |
| Personal identity confirmation document (Please circle the document included with this form.) | 1. Driver's license 2. Health insurance card 3. Passport 4. Pension booklet 5. Resident registry card 6. Individual Number Card (only the front) (Please send a copy of the document.) | |

2. Describe how you provided your personal data to Shibaura Mechatronics (Circumstances and means of disclosure).

(Please circle the applicable number and specifically indicate the product or service name.)

| | | |
|----|---|--|
| | | Inquiry number, name of product, service purchased, etc. |
| 1. | Questionnaire, campaign entry form, product monitor registration form, etc. | |
| 2. | Exhibition registration form (exhibition name, date, etc.) | |
| 3. | Purchase of Merchandise | |
| 4. | Request for repair | |
| 5. | Inquiry | |
| 6. | Other | |

3. Describe how you are contacted by Shibaura Mechatronics

(After indicating the specific product or service name, circle the applicable items.)

| |
|--|
| Concerning _____ (specific product or service name) 1. Direct mail. 2. E-mail. 3. Telephone. 4. Personal visits. 5. Other () |
|--|

4. Correction of personal data (When requesting correction, please indicate the information to be corrected.)

| Personal data item (name, postal address, telephone number, etc.) | Before correction | After correction |
|---|-------------------|------------------|
| | | |
| | | |
| | | |

5. Addition of personal data (When requesting addition, please indicate the information to be added.)

| Personal data item (name, postal address, telephone number, etc.) | Personal data to be added |
|---|---------------------------|
| | |
| | |
| | |

6. Deletion of personal data (When requesting deletion, please indicate the details.)

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|---|
| Specific product or service name, details of use, etc. of the product or service for which personal data is to be deleted |
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| |

7. Cessation of use of personal data or cessation of disclosure of personal data to third parties

(When requesting cessation of use of personal data or cessation of disclosure of personal data to third parties, please indicate the details.)

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| Specific product or service name, details of use, etc. of the product or service subject to cessation of use of personal data or cessation of disclosure of personal data to third parties |
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Note: No fee is necessary for requests for correction, addition, deletion, cessation of use, or cessation of disclosure to third parties. The applicant bears the cost of postage to Shibaura Mechatronics

Please do not write in the space below.

| Office | Remarks |
|--------------|---------|
| (Date Stamp) | |