Request for Correction, etc., of Stored Personal Data

To: Personnel Group, OMRON SWITCH & DEVICES Corporation
2075 Miyoshi, Naka-Ku, Okayama, 703-8502 JAPAN

Please complete all applicable spaces on this request form and attach the necessary ID document(s), etc., and send them to OMRON SWITCH & DEVICES Corporation by post. (Postage should be paid by the sender.)

In accordance with the provision of Article 34-1 of the Act on the Protection of Personal Information, I would like to request that personal data identifying myself retained by your company be corrected as follows:

1　Requesting party's information

（Date of request: YYYY/MM/DD）

Classification of requesting party	※Check the applicable box.	
	□ Person in question　□ Agent	
Name, address, date of birth, telephone number, and email address of the person in question	Name Date of birth	Seal YYYY/MM/DD
	Address, etc.	TEL　（　） Mail　@
Name, address, date of birth, telephone number, and email address of the agent (when a request is made by an agent)	Name Date of birth	Seal
	Address, etc.	TEL　（　） Mail　@

2　ID document(s) to be submitted (Check the document(s) to be submitted)

(1)　ID document(s) of the person in question or the agent (One of the following documents)

□ Copy of driver's license　□ Copy of passport　□ Copy of health insurance card □ Copy of alien registration card　□ Other （　）
☐ Copy of residence card　※When a request form is sent by post

(2) ID document(s) of the agent (only when a request is made by a legal representative or agent)

・When a request is made by a legal representative on behalf of a minor (One of the following documents) □ Copy of extract of family register □ Copy of transcript of family register □ Other（ ） ・When a request is made by a legal representative on behalf of an adult ward (One of the following documents) □ Copy of certificate of registered matters □ Copy of certificate of commencement of guardianship □ Other（ ） ・When a request is made by an agent with power of attorney (Both of the following documents) □ Copy of power of attorney (affixed with a registered seal) □ Copy of seal registration certificate for the seal affixed on power of attorney (Seal of the person in question) ・When a request is made by an attorney, judicial scrivener, administrative scrivener, or other person in business qualified to serve as an agent after receiving power of attorney □ Documents verifying the agent's qualification (Registration number, seal registration certificate for an official seal)

3 Details of your request

Classification of request	※Check the applicable box. □ Correction □ Addition □ Deletion
Correction, etc., you wish to make	

4 Preferred method of reply to request

※Unless otherwise requested, a written reply will be sent to your email address. In the case that you don't have an email address, a written reply will be sent to your postal address.

5. The requesting party's relation to a deceased person in question and the need for the request in case of submitting a Request for Disclosure, etc., of personal data pertaining to the said deceased person (Complete this form only when requesting disclosure, etc., of personal data pertaining to a deceased person in question.)

※Please submit a copy of a document identifying the relationship between the requesting party and the deceased person in question [□ Copy of transcript of family register □ Copy of extract of family register □ Other (　　)]. Please note that OMRON may request the submission of a document, etc., justifying the necessity of requesting disclosure, etc., of personal data pertaining to the deceased person in question.