

Procedure for Responding to Requests for Disclosure, Correction, Deletion, etc.
of Personal Information

As stated in its Privacy Policy - Protection of Personal Information, ALCONIX Corporation strives to protect the personal information of its customers. We will never entrust or disclose your personal information to a third party without your consent. We will manage your information under appropriate safety measures and strive to prevent leaks, etc. of such information. We respond to requests for the disclosure, correction, deletion, etc. of retained personal data made by the principal (specific individual identifiable by personal information) or by an agent of the principal.

Please consent to the use of your personal information for the purposes described below before lodging your request on your own free will.

1. Party requested to disclose, correct, delete, etc.

Postal code: 100-6112

Address: Sanno Park Tower 12th floor, 2-11-1 Nagatacho, Chiyoda-ku, Tokyo

Contact section: Personal Information Inquiries Desk, ALCONIX Corporation

Contact details: FAX: 03-3596-7456 Email: privacy@alconix.com

* Please note that we are unable to respond to requests made in person at our offices or to inquiries made by telephone.

1) In writing:

Please attach the necessary documentation to your Request for Disclosure, Correction, Deletion, etc. of Personal Information and post to the above address. Please write on the envelope in red ink "Disclosure, etc. Request Enclosed."

2) By fax:

Please attach the necessary documentation to your Request for Disclosure, Correction, Deletion, etc. of Personal Information and fax to the above number.

2. Documents, etc. to be submitted with request for disclosure, correction, deletion, etc.

For disclosure, correction, deletion, etc., please enter the required information in the "Request for Disclosure, etc. of Personal Information" form and send to the above.

* If you have difficulty downloading the "Request for Disclosure, etc. of Personal Information" form, we can post or fax a copy of the form to you. Please advise by post or fax (A) the address to which we should send the form, (B) your name, and (C) whether you wish the form to be sent by post or fax. The personal information you provide at this time will be used only for the purpose of sending the form. Please consent to the use of your personal information for the purposes described below before lodging your request on your own free will.

3. Request for disclosure, correction, deletion, etc. made by agent

If the person seeking the disclosure, correction, deletion, etc. is a minor or an agent who has been asked by the principal to make the request, please also send the following documents in addition to the form described in 2. above.

- 1) Power of Attorney...1 copy
- 2) Document containing the current address, name, telephone number (landline only; no mobile number or international number), fax number (optional), and date of birth of the agent...1 copy

4. Method of responding to requests for disclosure, correction, deletion, etc.

A representative of the company will first telephone the requesting party at the number provided on the request form to confirm the identity of the principal, after which a response will be provided in writing to the address provided on the request form.

5. Department at ALCONIX Corporation responsible for management of personal information
General Affairs and Human Resources Department

6. "Purpose of use" of personal information obtained in regards to disclosure, correction, deletion, etc.

Any personal information obtained in regards to disclosure, correction, deletion, etc. will be used only to the extent necessary to respond to the inquiry in question. The documents you provide will be stored for a period of five (5) years after completion of the response to the request for disclosure, correction, deletion, etc., after which they will be destroyed.

7. Circumstances where we are unable to handle your request for disclosure, correction, deletion, etc. and are unable to provide a response

We ask you to consent to the above before making your request on your own free will. Please note that we are unable to handle requests made by methods other than those outlined in this procedure, including if you are unable to consent to its contents, nor will we be able provide a response regarding such handling and its outcome.

We are also unable to handle your matter or provide a response in the following cases:

- 1) The required information has not been provided on the "Request for Disclosure, Correction, Deletion, etc. of Personal Information" form;
- 2) The information covered by the request for disclosure, correction, deletion, etc. does not correspond to our "retained personal data";
- 3) You have not sent your request by registered mail (*kakitome yubin*) or by fax;
- 4) We are unable to confirm the identity of the principal, e.g. the information provided on the "Request for Disclosure, Correction, Deletion, etc. of Personal Information" form does not match our retained personal data;
- 5) We are unable to confirm the right of the agent to represent the principal for this request; and
- 6) We are unable to confirm the identity of the principal by telephone.

Request for Disclosure, etc. of Personal Information

To: ALCONIX Corporation

Date:

Pursuant to the provisions of the Act on the Protection of Personal Information, I hereby request the disclosure of personal information held by ALCONIX Corporation.

◇ Applicant

Name	(seal)
Address:	(Postal code) - Tel ()
Identification Documents (Tick the one that applies)	<input type="checkbox"/> Copy of driver's license <input type="checkbox"/> Copy of passport <input type="checkbox"/> Copy of health insurance card <input type="checkbox"/> Copy of alien registration certificate (Any one (1) of the above)

◇ Request Documentation (Tick the one that applies)

<input type="checkbox"/> Disclosure of personal information	<input type="checkbox"/> Addition of personal information
<input type="checkbox"/> Notification of purpose of use of personal information	<input type="checkbox"/> Erasure of personal information
<input type="checkbox"/> Correction of personal information	<input type="checkbox"/> Disclosure of records provided of personal information to third parties
<input type="checkbox"/> Deletion of personal information	
<input type="checkbox"/> Cessation of use of personal information	
<input type="checkbox"/> Prohibition of provision of personal information to third parties	

◇ Information covered by request (state the name, type, etc. of retained personal data specifically)

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◇ Reason for request (state grounds as specifically as possible. Attach any documentary evidence, etc. that you may have.)

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◇ Details of Request

For correction of personal information

Prior to correction	After correction

For addition/deletion of personal information

Item/details of information to be added	Item/details of information to be deleted