Request for Retained Personal Data Correction, Etc

Date(yy/mm/dd)

To Mitsubishi Corporation Energy Solutions Ltd.

	Hom	e address(required)		Postal code
		<u>.</u> ·		
	N	ne(required)		
	Nam	ie(requirea)		
	Phor	ne Number(required)		Home :
				Daytime :
	Desi	ired address for receivir	າ ຫ	Postal code
		y notification from us	-6	1 Ostal Code
		uired)		
	(Not	required if it is the sar ome address)	ne	
	as II	ome address)		
-	. Identification ke			
	Check and enter	□Name of place of work		
	in the registered			
ľ	items)	□Office address	Po	ostal code
		□Office phone number		
		□Office fax number		
		□Office mail address		
		□Private mail address		
		□Department	(
		_	`	
		□Title		
		☐Mobile phone number		
		□Date of birth		
		(mm/dd/yy)		
		□Former MCES	Ret	cirement date:
		officer/employee	Las	st department :
		□Other		
-	Idontification bear	is an item used to distingui	oh 1	notwoon information on nearly with the serve
•		is an item used to distinguing the information registered		between information on people with the same
	name comameu III	. one miormanon registereu	IJ	us.
2.	Request for corre	ction or deletion of or additi	on '	to provided personal information
ſ	1) Subject organ	ization name(required)		
	Enter the name of	our company to which you	pro	vided your personal information
	\square Mitsubis	shi Corporation Energy Sol	luti	ons Ltd.
		shi Corporation Clean Ene		
		shi Corporation Offshore W		
		shi Corporation Power Sys		
				evant department or branch name
	(_ 510)
ŀ	2) Name of the p	product/service provided by	the	e relevant organization (required)
	- 1			

3) Situation. Form,(questionnaire answer, seminar participation,etc) and time of personal information provision (required)
Situation:
Form:
Time of provision:
*Note: To specify your personal information, please enclose related materials to whatever extent is possible .e.g., seminar material, brochure or application form
4) Item of retained personal data desired to be corrected(required)(e.g., name, address or phone number)
5) Reason for desiring correction (required)
6) Content of desired correction (required) (1) Before correction
(2) After correction
7) Desired method of disclosure (required) Mail to the desired address for receiving documents Email to the relevant indivisual's email address (in attachment) Office email address Private email address Mail to the desired address to receive reply notification in electronic medium such as CD-
ROM Desired address Postal code
Desired address Postal code
Note: If the disclosure by the desired method would incur large costs or is otherwise difficult, the disclosure will be made by mailing documents.
8) Inquiry/Opinion
Note1: Enclose a copy of a document that identifies you as the relevant individual who owns the requested personal information you are applying for such as a driver's license. If
the document falls under "Other" in the confirmation field below, enter the specific document name. Send the identification document after making the registered domicile unreadable by blacking out or otherwise obscuring it.
Note2: In case of a request by an agent, enclose a power of attorney by the relevant individual(containing the relationship with the agent, the reason for requiring the agent, and the name, address and phone number of the agent), a certificate of seal impression of the relevant individual(the power of attorney must have the registered seal impression affixed) and a copy of an identification card of the agent (public document such as a driver's license)
Confirmation field : Document that identifies you as the relevant individual(required) $\Box Driver's \ license \qquad \Box Other \ (\qquad)$

Request for Retained Personal Data Correction, Etc

Date(yy/mm/dd)

To Mitsubishi Corporation Energy Solutions Ltd.

Home address(required)	Postal code:123-4567
	#123XX Heights,1-2-3
	Marunouchi, Chiyoda-ku, Tokyo
Name(required)	Taro Marunouchi
Phone Number(required)	Home: 03-1234-5678
	Daytime: 090-4321-5678
Desired address for receiving	Postal code : 765-4321
reply notification from us (required)	XX Team, XX Dept, XX corporation,
(Not required if it is the same as home address)	4-5-6Minato-ku, Tokyo

1. Identification key*

1. Identification ke		
(Check and enter	✓Name of place of work	XX Corporation
in the registered		
items)	✓Office address	Postal code:765-4321
		4-5-6 Minato, Minato-ku, Tokyo
	✓Office phone number	(03)1111-2222
	✓Office fax number	(03)1111-3333
	✓Office mail address	taro.mitsubishi@aaaa.com
	✓Private mail address	Taro.mitsubishi@xxx.jp
	☑Department	XX Sec., XX Dept.
	☑Title	Section Manager
	✓ Mobile phone number	(090)-4444-5555
	∠ Date of birth	April 1, 1963
	(mm/dd/yy)	
	\Box Former MCES	Retirement date:
	officer/employee	Last department:
	□Other	
MT 1 0 1	1 . 1	

^{*}Identification key is an item used to distinguish between information on people with the same name contained in the information registered by us.

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∠.	nequest for	correction of	deferion	OI OI	addition to	provided	personar	muormation

 · request for correction of activities of audition to provided personal information
1) Subject organization name (required)
Enter the name of our company to which you provided your personal information
✓Mitsubishi Corporation Energy Solutions Ltd.
☐Mitsubishi Corporation Clean Energy Ltd.
☐Mitsubishi Corporation Offshore Wind Ltd.
☐Mitsubishi Corporation Power Systems Ltd.
Department or branch name: Enter the relevant department or branch name

) Situation. Form, (orsonal information p	questionnaire answer, seminar participation, etc) and time of rovision (required)
Sit	tuation : Participation	on in a meeting
Fo	rm : Questionnaire :	answer
Tir	me of provision : Apr	ril 1, 2022
<u>ext</u> 4)	tent is possible. e.g.,	r personal information, please enclose related materials to whatever seminar material, brochure or application form ersonal data desired to be corrected (required) (e.g., name, address)
5)		g correction (required) r
6)		correction (required)
	(1) Before correction Postal code: 123-	
		s, 1-2-3 Marunouchi, Chiyoda-ku , Tokyo
	(2) After correction	
	Postal code: 123-88	
7)		nent, 1-2-3 Shinagawa, Shinagawa-ku , Tokyo disclosure (required)
		ddress for receiving documents
		t indivisuals email address (in attachment)
		t indivisual's email address (in attachment)
	□Office email	address □Private email address
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	□Office email Mail to the desired a ROM	address □Private email address
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No dif 8)	Desired address Desired address The interior is a copy of the personal info document falls u document name. domicile unreadabte individual (containagent, and the natimpression of the	address to receive reply notification in electronic medium such as C Postal code Postal code by the desired method would incur large costs or is otherwise will be made by mailing documents. a document that identifies you as the relevant individual who ow rmation you are applying for such as a driver's license. If the nder "Other" in the confirmation field below, enter the special special by blacking out or otherwise obscuring it. Quest by an agent, enclose a power of attorney by the relevanting the relationship with the agent, the reason for requiring the address and phone number of the agent), a certificate of secretivant individual(the power of attorney must have the register effixed) and a copy of an identification card of the agent (public properties).