



**Request for Erasure of Personal Data Retained by JALUX Group**  
**(for customers in EU/EEA region)**

Date of request                      /                      /

Please fill out the form below and send to Personal Information Handling Desk with the documents required for identification as described below. By completing this form, you are making a request under the GDPR.

Please send to JALUX Inc. Personal Information Handling Desk: Shinagawa Season Terrace, 1-2-70 Konan, Minato-ku, Tokyo, Zip Code 108-8209

|  |  |               |          |
|--|--|---------------|----------|
| Information of the applicant                     |  |               |          |
| Full name  |  | Date of birth | /      / |
|  |  |               |          |
| Address  | 〒 -  |               |          |
| Telephone number                                 | -  |               |          |
| Remarks<br>Other names<br>or address<br>(if any) | Please provide any other name or address you may have registered with us |               |          |

|   |     |               |          |
|---|-----|---------------|----------|
| Information of representative (If you are applying on behalf of the person above) |     |               |          |
| Relationship with the applicant:    Parent   ·   Guardian   ·   Agent             |     |               |          |
| Full name   |     | Date of birth | /      / |
|   |     |               |          |
| Address   | 〒 - |               |          |
| Telephone number  | -   |               |          |

|  |
|--|
| <p>Required documents</p> <p>①Identification document of the applicant (your evidence of identity in case of application by yourself)<br/>Copy of one of the following: driver's license, passport, health insurance, national identity card or other evidence of identity issued by public institutions.<br/>However, if it does not include an address (issued by a government office), please also attach any document issued by a public institution that shows the current address (issued within 3 months prior to the request).</p> <p>②In case of application by a parent<br/>In addition to ① above, please attach a document that verifies the person as having parental authority.</p> <p>③In case of application by a guardian<br/>In addition to ① above, please attach a document that verifies the person as a guardian</p> <p>④In case of application by a statutory agent<br/>In addition to ① above, please attach a document that certifies the person as a statutory agent.</p> <p>⑤In case of application by a voluntary agent<br/>In addition to ① above, please attach a power of attorney signed by the applicant.</p> |
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Please specifically fill in the details of the request for erasure.

Information that you want to erase (identify as specifically as possible)

Grounds for the request for removal

☆How we handle this form

Personal data obtained through the request for erasure will only be used to respond to the request. After the response to the request is completed, we will keep the documents for three months before discarding the materials.

☆ In case we decide not to accept the request, we will notify you with the reason.

Notes

This Request for Erasure of Personal Data Retained by JALUX is only accepted by mail. Please note that we do not accept the forms at the counter, stores, or onboard the aircraft.