Personal Information Disclosure Request Form (and Power of Attorney)

【Information on Electricity Demand / Supply Contract / Electric Power Supply Contract (Solar Light, etc.)】

To: The Okinawa Electric Power Co., I	Inc.
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Date of Submission:

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					ive, the "concernery is required; go			personal informa	ation mu	ast complete the	entry. (If a	
Concerned	Name							Phone	e No.			
Individual Address												
	☐ I have designated the following person as my representative and delegate the authority regarding the disclosure of my personal information with this disclosure request form. Date:											
Column 2												
	Name							Phone	e No.			
Requester	Address											
Column 3 D	Disclosur	e of persor	nal info	rmation is req	uested as follow	ws based	on the	Act on the Pro	otection	n of Personal I	nformation	
1. Customer			1									
(Multiple ent			2									
only if the co												
individual is		,	3								2750	
2. Items of a personal info					tricity demand	_		_	ourchas	se electricity i	rom OEPC>	
personal info (please fill in			☐ Electricity Charge / Usage (From / to /) ☐ Electricity Bill Payment Record (From / to /)									
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				'ype of Electri	icity Demand ar	nd Suppl	ly Cont	tract				
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			1	<electricity a="" contract="" contract:="" electricity="" oepc="" sell="" supply="" to=""> □ Power Purchase Price / Purchased Amount (From / to /)</electricity>								
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	able to a	ccept your	r reques	st if required i	items are not en	itered and	d persc	onal informatio	on relate	ed to the disclo	sure request	
cannot be ide	entified,	so please e	enter the	e details.			-				_	
					d, passport, etc.)					ed when makir	ng a request.	
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			olumn 1	of this disclo	osure request is	also acc	eptable	as a power of	f attorne	ey) is requirea.		
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本人確認 方法		運転免許 その他(証 ——	□健康保険	食被保険者証 ——————	□/	パスポ)		
		_	_		受付			開示		印保管責任者署	審査欄(※1)	
					左				文書名			
						月 日承 日本			社印の 押 印			
処理結果						手 応 于 係 長		<u>-</u> 所属長		押印日	審査印	
						***	$\stackrel{\circ}{\longrightarrow}$	171 neve-		Ji to ex	FI	
									年	F 月 日		

Personal Information Disclosure Request Form (and Power of Attorney) Information on Electricity Demand Dupply Contract / Electric Power Supply Contract (Solar Light, etc.) Example To: The Okinawa Electric Power Co., Inc. Date of Submission: An individual making a request for □Concerned Individual of Personal Information (→Go to Column 2. No entry required for Column 1.) disclosure (Disclosure Requester) shall check (✔) the relevant item. Column 1 X If the Disclosure Requester is a representative, the "concerned individual" of personal information must complete the entry. (If a separate Power of Attorney is prepared, no entry is required; go to Column 2) Name The "concerned individual of personal Concerned information" (Contracting Customer) Individual must complete the entry only when the Address Disclosure Requester is a representative. I have designated the following person as my representative and delegate the authority regarding the disclosure of my personal information with this disclosure request form. Date: Colun Put a Vafter confirming the contents. To be entered by Disclosure Requester. Name Disclosure Requester Address Column 3 Disclosure of personal information is requested as follows based on the Act on the Protection of Personal Information 1. Customer No. ΟΦΔΟΦ - $\blacklozenge O - O - \Delta$ (Multiple entries can be made 2 only if the concerned 3 individual is the same.) Please confirm this from the Notice of Electricity 2. Items of applicable < Con Comsumption (meter reading slip) or the electricity bill. act to purchase electricity from OEPC> personal information Electricity Charge / Usage (From MM/YYYY to MM/YYYY) (please fill in the details.) ☐ Electricity Bill Payment Record (From ☐ Contract Load Facility / Contract Power Supply Facility ☐ Type of Electricity Demand and Supply Contract Check (✓) on items <Electricity Supply Contract: A contract to sell electricity to OEPC> (information) for which disclosure is requested. If ☐ Power Purchase Price / Purchased Amount (From) there is no applicable item, enter this in detail under < Others > <Others> <Notes> ☐ We are unable to accept your request if required items are not entered and personal information related to the disclosure request cannot be identified, so please enter the details. □ Documents (driver's license, health insurance card, passport, etc.) for identity confirmation are required when making a request. (Documents that can confirm the representative's identity will also be required for the representative) ☐ If the request is made by a representative, in addition to the above documents, a document certifying the legal representative's status or a power of attorney (column 1 of this disclosure request is also acceptable as a power of attorney) is required. 【沖縄電力処理欄】 □運転免許証 □健康保険被保険者証 本人確認 口その他(方法 **No Entry Required** 文書名 日社印の種類 認手続き 押印数 処理結果 担当 所属長 押印日 審査印

開示する書面へ会社印を押印する場合は、「社印保管責任者審査欄」に必要事項を記載のうえ押印すること