

Seal of Personal Information Manager	<u>Action</u>		<u>Receipt of Request</u>	
	Seal of Immediate Manager	Seal of Clerk in Charge	Seal Immediate Manager	Seal of Clerk in Charge

## Request for Amendment/Deletion of Personal Information

*Please complete the following chart to make a request.*

Date of Request	
Name	
Address	
<u>Content of Request</u>	
Type of Request	<input type="checkbox"/> Disclosure of Information <input type="checkbox"/> Amendment of Information <input type="checkbox"/> Deletion of Information
Name when personal information was originally provided	<i>Are you that person?</i> <input type="checkbox"/> Yes • <input type="checkbox"/> No
Amended information (in case of request for amendment of information)	<i>I hereby request that the following amendment be made:</i>  Old Information:  New Information:
Preferred Method of Contact regarding the Status of Your Request	<input type="checkbox"/> Telephone <input type="checkbox"/> Post <input type="checkbox"/> Other
Contact Information	

*For office use only*

<u>Receipt of Request</u>	
Date and Time Request Was Received	
Name of Clerk in Charge	
ID Presented by Customer	<input type="checkbox"/> Driver's license <input type="checkbox"/> Health insurance card <input type="checkbox"/> Passport <input type="checkbox"/> Seal certificate/Other
<u>Action</u>	
Date and Time Requested Action Was Taken	
Name of Clerk in Charge	
Description of Action Taken and Contact with Customer	