

[ANA] Disclosure Request Form <For Kingdom of Thailand Residents>

Request Date: / /

<How to apply>

1. Print and fill out this form.
2. Please enter the necessary information in the URL below, and upload the application form and identification document entered in 1 to the attached file in the URL.

<https://ana.force.com/enjp/s/atmint-en>

Please be careful not to forget to fill in the required items in the bold frame.

Note: Use of this form is not mandatory, but please clarify the matters listed in this form when making a request, and send to the relevant Center at ANA.

Information for Identifying Person to Whom Disclosure Pertains

(Please fill out all items enclosed within the bold lines as there is a possibility that another person's personal information may be disclosed by mistake, etc.)

Last Name		Birth Date	Day	Month	Year
First Name			/	/	
Address					Zip Code
Telephone	—	—	*As we may call for identity verification, please fill in the daytime phone number.		
Documents to confirm identification of the principal	Note: In order to confirm identification, please enclose one of the documents listed below with this form. Please be aware that there may be cases in which the presentation of additional documents may be necessary in order for our company to complete confirmation. 1. Driver's license 2. Passport 3. Health insurance card (masking insurance card numbers and identification symbols / numbers of insured individuals) 4. Basic resident registration card with photo 5. Pension book 6. Resident card or Special permanent resident certificate 7. Certificate of seal registration 8. Individual Number Card (front page only)				

Information on Person Requesting Disclosure

(Please fill this out only if the request is being made through a representative.)

Last Name		Birth Date	Day	Month	Year
First Name			/	/	
Address					Zip Code
Telephone	—	—	*As we may call for identity verification, please fill in the daytime phone number.		

Documents to Verify Identity of Person Requesting Disclosure (in the case of a representative)

Relationship to the individual	Document to verify relationship to the individual	
1.A person with parental authority	Person's family register	
2.Guardian of an adult	Guardian certificate	
3.Representative ()	Power of attorney that identifies you as a representative	

Details of Disclosure Request

Please make sure to fill in all necessary information to verify the details of the disclosure request.

Reservation and boarding information

If you request disclosure of your reservation and boarding information, please fill in the information below to verify your information. If you request disclosure of your reservation/boarding information for more than two flights, please provide your reservation/boarding information on a separate sheet and submit the request form with it. Please note that we may contact you if the scope of the request is broad.

(1) ①Reservation name of passenger: _____
②Flight Number: NH _____ ③Date: ____ / ____ / ____ ④Sector: _____ ~

(2) ①Reservation name of passenger: _____
②Flight Number: NH _____ ③Date: ____ / ____ / ____ ④Sector: _____ ~

Information related to ANA Mileage Club

ANA Number											
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If you are requesting the disclosure of information related to your ANA Mileage Club, please fill in the disclosure information you are requesting for. If the inquiry is regarding of the mileage accrual history, we are able to verify transactions up to the past 36 months.

Transaction History	Disclosure Topic	Details of your request
	(Ex.)Mileage Account History	Details of the miles accrued between MM/DD/20XX to MM/DD/20XX

Registered Information	Disclosure Topic	Details of your request
	(Ex.)Phone Number	Phone number registered with ANA Mileage Club

Others (If you are requesting the disclosure of information other than the above, please fill in the disclosure request in detail below. Also, please be aware that ANA may contact you if you are requesting the disclosure of a great deal of information.)

For general inquiries such as reviewing your reservation and/or boarding information, you can obtain more details free of charge on our website at www.ana.co.jp or from our ANA Call Centers. You can also review your registered ANA Mileage Club member information on the ANA website or at the telephone counter (ANA Mileage Club Service Center).

Handling of ANA disclosure request form

The personal data obtained in this form is only taken for this request, and we will dispose of this form and other related documents one month after our reply by an appropriate method in line with our Privacy Policy, which can be found below.

<https://www.ana.co.jp/wvs/privacy/e/ana.html>

If we decide not to disclose the requested information, we will notify you to that effect and the reason for the non-disclosure.

Please be informed that, in some cases, we may not be able to disclose the information requested because it does not exist or because the request cannot be met due to laws and regulations. Should such case occur, we will notify you of the denial of disclosure and the reasons.

■For official use by ANA

Acceptance date and time	Received: Year_____ Month____ Date____ Time____:	Management representative validation	
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