

To: Yamaha Motor Co., Ltd.

Date (YYYY/MM/DD): / /

Request Form for Retained Personal Data

< Precautions >

1. Please fill in “✓” in “□” where applicable.
2. If there are any errors in the Request Form, or if the required documents (such as identification or a letter of attorney) are incomplete, the submitted documents will be returned to you. Additionally, if there are any unclear points in the content, we may contact you for clarification. Please note that if we are unable to confirm certain details, we may not be able to fulfill your request.
3. For Request for Disclosure, as a service charge, 800 yen (tax-included) is required to make each request. We will contact you the payment details after receiving and confirming the necessary documents.
4. Please note that we may not be able to respond to your request in accordance with the Personal Information Protection Act.
5. Personal information we acquired in the request will be used only to the extent necessary to respond to the request. Once we completed the process, identification documents and the seal registration certificate you submitted will be returned to you along with our written response to your request by mail.

☐ I have read and agree to the above precautions.

1. Category of Requester

- | | |
|------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Individual
(owner of personal information) | <input type="checkbox"/> Individual's Representative
(legal or mandatory) |
|------------------------------------------------------------------------|------------------------------------------------------------------------------|

2. Relationship between Individual and Yamaha Motor Co., Ltd. (YMC)

- | | | |
|------------------------------------|-------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Customers | <input type="checkbox"/> Shareholders/Investors | <input type="checkbox"/> Business Partners |
| <input type="checkbox"/> Employees | <input type="checkbox"/> Others (_____) | |

3. Information of Individual:

Please fill in details about individual whose personal information is being requested.

Name		Date of Birth	(YYYY/MM/DD)
Phone Number		Email Address	
Address			

4. (Only if applicable) Information of Representative

Please fill in details about representative (legal or mandatory).

Name		Date of Birth	(YYYY/MM/DD)
Phone Number		Email Address	
Address			
Relationship with Individual			

5. Category of the Request

- ☐ Notification for purpose of use of personal information
- ☐ Disclosure of retained personal data
- ☐ Disclosure of third party provision record of retained personal data
- ☐ Correction, addition, or deletion of retained personal data
- ☐ Utilization cease or deletion of retained personal data
- ☐ Third-party provision cease
- ☐ Others (_____)

6. Details and Reason for the Request

If you choose to request for “Correction, addition, or deletion of retained personal data,” “Utilization cease or deletion of retained personal data,” or “Third-party provision cease”, please describe the details and reason for the request.

E.g., I request to correct my personal data because registered information is incorrect.

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7. Contents of the Personal Information

- (1) Please describe the circumstances under which the personal information was provided to YMC, including when, where, how, and intended purpose.

E.g., I purchased TMAX at YSP XX store at XX city in Shizuoka in January 2025.

I registered to smartphone application, “Y-Connect,” on February 2025.

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- (2) Yamaha Products related to the Request:

If the request is related to the purchase of YMC products or catalog requests, please provide below information. (For catalog request, please provide the “Product Name” and “Model”)

Product Name	
Model	
Registered Model Name	
Product Identification Number E.g., Vehicle Identification Number (VIN), Hull Identification number (HIN), etc.	

- (3) Personal Information Provided

<input type="checkbox"/>	Name	<input type="checkbox"/>	Gender	<input type="checkbox"/>	Date of Birth
<input type="checkbox"/>	Phone Number	<input type="checkbox"/>	Email Address	<input type="checkbox"/>	Country
<input type="checkbox"/>	Address	<input type="checkbox"/>	Product Identification Number	<input type="checkbox"/>	Workplace Address, Contact information
<input type="checkbox"/>	Other Please specify: ()				

8. Method of Disclosure (written document or electronic record)

If the request is either “Disclosure” or “Disclosure of third-party provision record,” please choose the method of disclosure. The electronic record will be saved on a CD-ROM and sent to you. If the method is not selected, we will provide you in a written document.

☐ Written Documents

☐ Electronic Record (CD-ROM)

(Notes)

1. Please submit a copy of individual's identity verification document (driver's license, health insurance card, or front side of individual number card, or certificate of residence)
2. If the request is made by representative, please submit a copy of representative's identity verification document. In addition, please provide the necessary documents depending on the type of representation: if legal representative, a document confirming legal authority such as a family register is required; if mandatory, a letter of attorney and the individual's seal registration certificate must be submitted.
3. Please confirm Yamaha Motor Co., Ltd. website for details of the necessary documents.
<https://global.yamaha-motor.com/privacy/jp/disclose/>

<Attachment Area>

Identity Verification Documents and Documents Confirming Authority of Representation

1. Identity Verification Document of Individual

Please affix or attach a copy of any one of the documents listed below in this section.

Please ensure that the submitted document includes the same address as your current residence (document delivery address).

Driver's License	Only those within the expiration date. Please ensure that the copy clearly shows your current address.
Health Insurance Card	Only those within the expiration date. Please ensure that the copy clearly shows your current address.
Front side of Individual Number Card (My Number Card)	Please submit a copy of the front side which includes your address. We do not accept a copy of the reverse side that contains your individual number (My Number).
Certificate of Residence	Only those within 3 months from issuance. Please send the one with only required items such as name, address, etc.

2. (Only if applicable) Identity Verification Document of Representative

Please affix or attach a copy of any one of the documents listed below in this section.

Please ensure that the submitted document includes the same address as your current residence (document delivery address).

Driver's License	Only those within the expiration date. Please ensure that the copy clearly shows your current address.
Health Insurance Card	Only those within the expiration date. Please ensure that the copy clearly shows your current address.
Front side of Individual Number Card (My Number Card)	Please submit a copy of the front side which includes your address. We do not accept a copy of the reverse side that contains your individual number (My Number).
Certificate of Residence	Only those within 3 months from issuance. Please send the one with only required items such as name, address, etc.

3. (Only if applicable) Document to Verify Authority of Representative

[In case of Legal Representative]

Please affix or attach a document that confirms the legal authority of representative as applicable below.

If the individual is minor	Family register or certificate of residence that includes the individual and the representative, and clearly indicates their relationship
If the individual is adult ward under guardianship:	Certificate of registered matters
If the individual is minor ward under guardianship:	Family register

[In case of mandatory]

Please affix or attach the seal registration certificate corresponding to the seal affixed by the individual on the letter of attorney. (Only documents issued within the last three months will be accepted.)

*Please make sure to send the **Letter of Attorney** together with this Request Form.

You may download the template for Letter of Attorney from below link.

<https://global.yamaha-motor.com/privacy/jp/disclose/pdf/attorney-eng.pdf>

[Submission Address]

Yamaha Motor Co., Ltd. Customer Communication Center
Inquiry Desk for Personal Information,
2500 Shingai, Iwata, Shizuoka 438-8501