

We are the BRIDGE

Notice on / Consent to Handling of Personal Information

(For Travel Insurance)

【 Notice on Handling of Personal Information 】

We use personal information (including the personal information already acquired in the past and that to be acquired in the future – which applies correspondingly to the following) in order to implement insurance contracts (including adjudicating on payment of insurance money and calculation of the amount), to determine whether or not to underwrite, and to provide various services.

We hereby represent that we will not use any acquired personal information for any purposes other than the purpose referred to above unless its use is approved by laws and ordinances.

Messrs. Sompo Japan Nipponkoa Insurance Inc.

【 Written Consent 】

Having confirmed the content of the above Notice on Handling of Personal Information, I hereby give my consent to your acquisition, use and provision of my personal information within the range of your necessity for accomplishing the following business purposes:

1. To provide with or to be provided by the parties related to insured accidents*, the agents and representatives to which relevant business is consigned (including insurance agencies), the police stations, fire stations and other organizations concerned, personal information which is necessary to identify the causes and details of the insured accident, degrees of damage and liabilities, and to follow claim proceedings against the person liable for indemnity.

* The above “parties related to insured accidents” means the persons/parties directly involved in the accident, non-life insurance companies or mutual aid enterprises, medical institutions and repairers.

2. To provide policy holders with information on the facts of the accident, course, and detail of the payment.

3. To provide with personal information, to register personal data with, or to be provided such information and/or data by the General Insurance Association of Japan, the Non-Life Insurance Rating Organization of Japan, your affiliated companies, other non-life insurance companies or mutual aid enterprises for the purpose of ensuring appropriate payment of insurance money, prevention of illegal insurance claims, and sound operations of insurance institutions.

4. To provide reinsurance underwriters with personal information necessary to receive reinsurance money.

【 Handling of Sensitive Information 】

To acquire, use, or have third parties and/or consignees acquire and use, within the range required for conducting business, sensitive medical and/or health information (including the sensitive information already acquired in the past or to be acquired in the future) so as to secure appropriate business operations.

※For Participants Use Only

Date: (Day) (Month) (Year)

■ Assentient (Parents of JA or PA (Under the age of 20) / Chaperon / PA (Adult))

- Name:

- Address:

- Relationship to the Subject Person: principal / spouse / person in parental authority / legal heir / others ()

- Signature (Hand-Written Signature) _____

■ Subject Person (JA / Chaperon / PA)

- Name:

- Address:

*Date of Birth (Only for JA or PA (Under the age of 20)): (Day) (Month) (Year)

* In case the Assentient is the principal of the subject person, these columns for the person’s name and address may be left blank.
The person’s date of birth only should be indicated.

【 Handling of Inquiries 】

Please note that any inquiry to us is received and answered only when it is confirmed that the inquirer is the principal of the subject person.