

Complaint Form regarding Handling of Personal Information

I would like to lodge the following complaint regarding the handling of personal information at HHT.

Details

Date of request	
Address	
Name	(and signature/personal seal)
Phone No.	
Fax No.	
Email address	
Relationship with HHT	<input type="checkbox"/> Individual customer (Product purchased: _____) <input type="checkbox"/> Executive or employee at business partner Name of affiliated corporation or organization: Head office, business office or branch with HHT affiliation: <input type="checkbox"/> Shareholder <input type="checkbox"/> HHT employee (Employee No.: _____) <input type="checkbox"/> Retired staff (Employee No. at retirement, affiliated head office, business office or branch: _____) <input type="checkbox"/> Other. Please enter specifics:
Complaint (Please enter details.)	