

Form 12 (Re: Articles 66-3 and 67) (1)

|  |                             | Application for License/Reissue of License Card<br>Application for Change in License Card/Renewal of License   |   |  |   |  |                    |
|--|-----------------------------|--|---|--|---|--|--------------------|
| Form category  |                             | (1) Application category   | (2) Category of license newly applied for |  |   |  | (Acceptance stamp) |
| 38011 (Image 56)   |                             | 1. New issue 2. Reissue<br>3. Change 4. Renewal<br>Enter the applicable number.<br>(Image 57)  | Image 58                                  |  | * Fill in required only by applicant for a new license.<br>* Fill in the license code by referring to the table of license codes provided in Form 12 (2). |  |                    |
| Name of applicant  |                             |  |   | Gender   |   | To: Director of Labour Bureau  |                    |
|  |                             |  |   | Male / Female                                  |   | Date:  |                    |
| Date of birth  |                             | Registered domicile  |   |  |   |  |                    |
| Current address  |                             | Postal code:   |   | Telephone number:                              |   |  |                    |
| Contact information  |                             | Address of workplace etc.  |   | Postal code:                                   |   | Telephone number:  |                    |
| (3) Family name  |                             | Image 59   |   | (4) Given name                                 |   | Image 60   |                    |
| (Image 61)   | (5) Postal code             |  | Image 63                                  |  | (6) Date of birth   |  | (Image 62)         |
|  |                             | (7) Gender   |   | Image 64                                       |   | 1. Male 3. Female<br>Enter the applicable number.<br>(Image 65)  |                    |
| (8) Registered domicile  |                             | (9) Current address  |   |  |   |  |                    |
| Image 66   |                             | Image 67   |   |  |   |  |                    |
| Enter the code by referring to the list of codes for permanent addresses, current addresses and issuing offices provided in Form 12 (2).   |                             | Fill in the code by referring to the list of codes for permanent addresses, current addresses and issuing offices provided in Form 12 (2).   |   |  |   |  |                    |
| (a) Application for new issue  |                             | (10) Code of region where you took examination   |   | (11) Date of examination                       |   | (12) Examinee's number (right justify)   |                    |
| Examination passed   |                             | 1. Hokkaido 2. Tohoku 3. Kanto<br>4. Chubu 5. Kinki 6. Chugoku and Shikoku 7. Kyushu   |   | Image 69                                       |   | Image 70   |                    |
| (b) Application for new issue Examination exempted   |                             | Content of qualification   |   | (13) Acquisition date of qualification         |   | Image 71   |                    |
|  |                             |  |   |  |   | (14) Qualification code *Image 72  |                    |
| (c) Application for reissue  |                             | Reason for reissue   |   |  |   | (15) Code of reason for reissue *Image 73  |                    |
| (d) Application for change   |                             | Name before change   |   | Registered domicile (prefecture) before change |   | (16) Code of reason for change *Image 74   |                    |
| (Image 76)   | (e) Application for renewal |  | Expiration date of old license            |  | (17) Expiration date of boiler w/e  |  | (Image 79)         |
|  |                             | Date:  |   | Image 77                                       |   | (18) Code of renewal disapproval *Image 78   |                    |
|  |                             |  |   |  |   | (19) Accounting code *Image 81   |                    |
|  |                             |  |   |  |   | (20) Number of License Card *Image 84  |                    |
|  |                             |  |   |  |   | Image 83   |                    |
|  |                             |  |   |  |   | When applying for reissue ("c" above) or renewal ("e" above) of a license card based on an old form (meaning a card issued before October 1, 1988), fill |                    |
| (22) Category of license   |                             | (23) Issuing office  |   | (24) Number of License Card (right justify)    |   | (25) Date of issue   |                    |
| Image 85   |                             | Image 86   |   | Image 87                                       |   | Image 88   |                    |
| Enter the license code by referring to the table of license codes provided in Form 12 (2).   |                             | Enter the code by referring to the list of codes for permanent addresses, current addresses and issuing offices provided   |   |  |   |  |                    |
| (26) Whether you have other old license card(s)  |                             |  |   |  |   |  |                    |
| 1. Yes<br>Enter the number.<br>(Image 89)  |                             | If you have other old license card(s), enter "1" in this section, circle the applicable license column by referring to the table of license codes provided in Form 12 (2), and enter the applicable code in the section for the notification of other licenses held (Annex). |   | Crane  |   | Mobile crane   |                    |
|  |                             |  |   | Derrick  |   | Cargo lifting  |                    |
|  |                             |  |   | Slinging                                       |   | Special boiler   |                    |
|  |                             |  |   | Class-1 boiler                                 |   | Class-2 boiler   |                    |
|  |                             |  |   | Special boiler welder                          |   | Ordinary boiler welder   |                    |
|  |                             |  |   | Boiler maintenance                             |   | Specified C-1 pressure vess.   |                    |
|  |                             |  |   | Gas welding                                    |   | Forestry cableway  |                    |
|  |                             |  |   | Blasting                                       |   | Fuse blasting  |                    |
|  |                             |  |   | Electric blasting                              |   | Health officer   |                    |
|  |                             |  |   | Industrial hygiene                             |   | Compressed air   |                    |
|  |                             |  |   | Diving   |   | X-rays   |                    |
|  |                             |  |   | Gamma rays                                     |   |  |                    |
|  |                             |  |   |  |   | Do not write in the sections marked with an asterisk (*). (These sections are for use by Labour Bureau personnel.)                                       |                    |
| Notes  |                             |  |   |  |   |  |                    |
| 1. Do not mark, punch, glue or fold the form because entries in the framed sections (hereinafter referred to as "entry frames") are read by an optical character and image reader (OCR).   |                             |  |   |  |   |  |                    |
| 2. Leave the sections and entry frames blank where there is nothing to enter. Circle the applicable item when selection of an item is necessary.   |                             |  |   |  |   |  |                    |
| 3. Be sure to use a black ballpoint pen to write in the entry frames, and write the letters clearly and as large as possible inside the designated frame.  |                             |  |   |  |   |  |                    |
| 4. When you apply for issue of a license, attach a document that verifies the entries in "Name of applicant," "Date of birth" and "Current address" (hereinafter referred to as an "Identity Verification Document") and a document that certifies qualification for the applicable license. |                             |  |   |  |   |  |                    |
| 5. When you apply for reissue of the License Card, attach an Identity Verification Document in case of loss or attach the damaged License Card in case of damage.  |                             |  |   |  |   |  |                    |
| 6. When you apply for change(s) in the License Card, attach the card and a document that certifies the change(s) indicated.  |                             |  |   |  |   |  |                    |
| 7. When you apply for renewal of a license, attach the former license card and a document certifying that you are eligible for renewal for the effective term of the license.  |                             |  |   |  |   |  |                    |

Form 12 (Re: Articles 66-3 and 67) (2)

|  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|--|---|--|---|---------------------------------------|--|--------------|-------------|--------------|-----------|-------------|----------|------------|-----------|-----------|-----------|---------------|--------------|-----------|-------------|---------------|-----------|---------------|--------------|------------|-----------|------------|-----------|---------------|----------|-----------|-----------|----------|----------|------------|--------------|--------------|--------------|--------------|--------------|-----------|---------------|---------------|-------------|-----------|-------------|-----------|-------------|-------------|------------|---------|-------------|-------------|--------------|
|  |   | Application for License/Reissue of License Card<br>Application for Change in License Card/Renewal of License |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   | (1) Application category<br>1 New issue 2 Reissue<br>3 Change 4 Renewal                                      |   | (2) Category of license applied for   |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Name of applicant  |   | Gender<br>Male / Female  |   | To Director of Labour Bureau<br>Date: |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Date of birth  | Registered domicile(prefecture)                                     |  |   |                                       | Photograph<br>(24 mm x 30 mm)  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Current Address  | Postal code:  | Telephone number:  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Contact information  | Address of workplace, etc.  |  | Postal code:  | Telephone number:                     |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Revenue stamp (Applicant must not cancel the stamp)  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Affix the revenue stamp after filling in   |   | Affix the revenue stamp after filling in all required sections.  |   | Date of examination                   |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   | Examinee's number                     |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Remove the cover of the photograph section in order to affix two full-face photos showing the upper third of the body with no hat that were taken within six months before submitting the application.   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| (Cutting line) Note: Applicant must not cut here. (For Labour Bureau use.)   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| (List of codes for permanent addresses, current addresses and issuing offices)   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| <table border="0"> <tr> <td>Hokkaido: 01</td> <td>Tochigi: 09</td> <td>Ishikawa: 17</td> <td>Shiga: 25</td> <td>Okayama: 33</td> <td>Saga: 41</td> </tr> <tr> <td>Aomori: 02</td> <td>Gunma: 10</td> <td>Fukui: 18</td> <td>Kyoto: 26</td> <td>Hiroshima: 34</td> <td>Nagasaki: 42</td> </tr> <tr> <td>Iwate: 03</td> <td>Saitama: 11</td> <td>Yamanashi: 19</td> <td>Osaka: 27</td> <td>Yamaguchi: 35</td> <td>Kumamoto: 43</td> </tr> <tr> <td>Miyagi: 04</td> <td>Chiba: 12</td> <td>Nagano: 20</td> <td>Hyogo: 28</td> <td>Tokushima: 36</td> <td>Oita: 44</td> </tr> <tr> <td>Akita: 05</td> <td>Tokyo: 13</td> <td>Gifu: 21</td> <td>Nara: 29</td> <td>Kagawa: 37</td> <td>Miyazaki: 45</td> </tr> <tr> <td>Yamagata: 06</td> <td>Kanagawa: 14</td> <td>Shizuoka: 22</td> <td>Wakayama: 30</td> <td>Ehime: 38</td> <td>Kagoshima: 46</td> </tr> <tr> <td>Fukushima: 07</td> <td>Niigata: 15</td> <td>Aichi: 23</td> <td>Tottori: 31</td> <td>Kochi: 39</td> <td>Okinawa: 47</td> </tr> <tr> <td>Ibaraki: 08</td> <td>Toyama: 16</td> <td>Mie: 24</td> <td>Shimane: 32</td> <td>Fukuoka: 40</td> <td>Overseas: 48</td> </tr> </table> |   |  |   |                                       |  | Hokkaido: 01 | Tochigi: 09 | Ishikawa: 17 | Shiga: 25 | Okayama: 33 | Saga: 41 | Aomori: 02 | Gunma: 10 | Fukui: 18 | Kyoto: 26 | Hiroshima: 34 | Nagasaki: 42 | Iwate: 03 | Saitama: 11 | Yamanashi: 19 | Osaka: 27 | Yamaguchi: 35 | Kumamoto: 43 | Miyagi: 04 | Chiba: 12 | Nagano: 20 | Hyogo: 28 | Tokushima: 36 | Oita: 44 | Akita: 05 | Tokyo: 13 | Gifu: 21 | Nara: 29 | Kagawa: 37 | Miyazaki: 45 | Yamagata: 06 | Kanagawa: 14 | Shizuoka: 22 | Wakayama: 30 | Ehime: 38 | Kagoshima: 46 | Fukushima: 07 | Niigata: 15 | Aichi: 23 | Tottori: 31 | Kochi: 39 | Okinawa: 47 | Ibaraki: 08 | Toyama: 16 | Mie: 24 | Shimane: 32 | Fukuoka: 40 | Overseas: 48 |
| Hokkaido: 01   | Tochigi: 09   | Ishikawa: 17   | Shiga: 25   | Okayama: 33                           | Saga: 41   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Aomori: 02   | Gunma: 10   | Fukui: 18  | Kyoto: 26   | Hiroshima: 34                         | Nagasaki: 42   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Iwate: 03  | Saitama: 11   | Yamanashi: 19  | Osaka: 27   | Yamaguchi: 35                         | Kumamoto: 43   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Miyagi: 04   | Chiba: 12   | Nagano: 20   | Hyogo: 28   | Tokushima: 36                         | Oita: 44   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Akita: 05  | Tokyo: 13   | Gifu: 21   | Nara: 29  | Kagawa: 37                            | Miyazaki: 45   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Yamagata: 06   | Kanagawa: 14  | Shizuoka: 22   | Wakayama: 30  | Ehime: 38                             | Kagoshima: 46  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Fukushima: 07  | Niigata: 15   | Aichi: 23  | Tottori: 31   | Kochi: 39                             | Okinawa: 47  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Ibaraki: 08  | Toyama: 16  | Mie: 24  | Shimane: 32   | Fukuoka: 40                           | Overseas: 48   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| (Cutting line) Note: Applicant must not cut here. (For Labour Bureau use.)   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| (Table of license codes)   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Code   | License category  | Code   | License category  | Code                                  | License category   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 10   | Special class boiler expert   | 21   | Cargo hoisting equipment operator                       | 31                                    | Operation chief of forestry cableway (forestry cableway operator)            |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 11   | Class-1 boiler expert   | 22   | Derrick operator  | 32                                    | Fuse blasting expert   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 12   | Class-2 boiler expert   | 23   | Mobile crane operator                                   | 33                                    | Electric blasting expert   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 13   | Special class boiler welder   | 24   | Crane/derrick operator (limited to floor-driver type)*3 | 34                                    | Blasting expert  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 14   | Ordinary class boiler welder  |  |   | 50                                    | Class-1 health officer (health officer)                                      |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 15   | Boiler maintenance expert   |  |   | 51                                    | Health officer on industrial hygiene   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 16   | Operation chief of work handling specified class-1 pressure vessels | 25   | Crane operator (limited to floor-driver type)*4         | 52                                    | Class-2 health officer   |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| 20   | Crane/derrick operator (limited to cranes)*1                        |  |   | 60                                    | Operation chief of work in compressed air (high pressure chamber supervisor) |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  | Crane operator (no limitations)*2                                   |  |   | 30                                    | Operation chief of gas welding (welder) (Chief of acetylene welding work)    |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   | 61                                    | Diving worker  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   | 70                                    | Operation chief of radiography work with X-rays                              |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
|  |   |  |   | 71                                    | Operation chief of radiography gamma rays                                    |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| Notes  |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| *1 Refer to the crane/derrick operator license under which the type of machine to be handled is limited to cranes, but no restrictions are imposed on the type of crane.   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| *2 Refer to the crane operator license under which the type of crane to be handled is not limited. (Issued on or before March 31, 2006.)   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| *3 Refer to the crane/derrick operator license under which the type of machine to be handled is limited to a floor-driver crane.   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| *4 Refer to the crane operator license under which the type of crane to be handled is limited to a floor-driver crane. (Issued on or before March 31, 2006.)   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |
| *5 Refer to the crane/derrick operator license under which the type of machine to be handled is not limited.   |   |  |   |                                       |  |              |             |              |           |             |          |            |           |           |           |               |              |           |             |               |           |               |              |            |           |            |           |               |          |           |           |          |          |            |              |              |              |              |              |           |               |               |             |           |             |           |             |             |            |         |             |             |              |

Form 12 (Re: Articles 66-3 and 67) (Annex)

| Notification of Licenses Held   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
|---|-----------------------|---|---------------------|--|---------------------|-----------------------|------------------|-------------|---|---|----------------|--|-------------|---|--|
| Form category   |                       | Be sure to make entries in this notification section by confirming to the old license card that you have. |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
| 3 8 0 0 2   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
| Name  |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
| License card based on old form  | License category      |   |                     |  | Issuing Bureau      |                       | License category |             |   |   | Issuing Bureau |  |             |   |  |
|   | (1)                   |   |                     |  |                     | (4)                   |                  |             |   |   |                |  |             |   |  |
|   | (2)                   |   |                     |  |                     | (5)                   |                  |             |   |   |                |  |             |   |  |
| (3)   |                       |   |                     |  | (6)                 |                       |                  |             |   |   |                |  |             |   |  |
| (1) Family name   |                       |   |                     |  |                     | (2) Given name        |                  |             |   |   |                |  |             |   |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
| (3) Date of birth   |                       |   |                     |  |                     | (4) Permanent address |                  |             |   |   |                |  |             |   |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
|   |                       |   |                     |  |                     | Right align           |                  | Right align |   |   |                |  |             |   |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
| License card based on old form  | (5) License category  |   | (6) Issuing office  |  | (7) License number  |                       |                  |             | (8) Date of issue                       |   |                |  |             |   |  |
|   | (1)                   |   |                     |  |                     |                       |                  |             |   | Y |                |  | M           | D |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   | Right align    |  | Right align |   |  |
|   | (9) License category  |   | (10) Issuing office |  | (11) License number |                       |                  |             | (12) Date of issue                      |   |                |  |             |   |  |
|   | (2)                   |   |                     |  |                     |                       |                  |             |   | Y |                |  | M           | D |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   | Right align    |  | Right align |   |  |
|   | (13) License category |   | (14) Issuing office |  | (15) License number |                       |                  |             | (16) Date of issue                      |   |                |  |             |   |  |
|   | (3)                   |   |                     |  |                     |                       |                  |             |   | Y |                |  | M           | D |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   | Right align    |  | Right align |   |  |
|   | (17) License category |   | (18) Issuing office |  | (19) License number |                       |                  |             | (20) Date of issue                      |   |                |  |             |   |  |
|   | (4)                   |   |                     |  |                     |                       |                  |             |   | Y |                |  | M           | D |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   | Right align    |  | Right align |   |  |
|   | (21) License category |   | (22) Issuing office |  | (23) License number |                       |                  |             | (24) Date of issue                      |   |                |  |             |   |  |
|   | (5)                   |   |                     |  |                     |                       |                  |             |   | Y |                |  | M           | D |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   | Right align    |  | Right align |   |  |
|   | (25) License category |   | (26) Issuing office |  | (27) License number |                       |                  |             | (28) Date of issue                      |   |                |  |             |   |  |
|   | (6)                   |   |                     |  |                     |                       |                  |             |   | Y |                |  | M           | D |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   | Right align    |  | Right align |   |  |
| Sections completed by Labour Bureau personnel   | (29) License number   |   |                     |  |                     |                       |                  |             | (30) Processing of notification section |   |                |  |             |   |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
|   |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |
| For codes for permanent addresses, codes for license categories and issuing office codes, enter the applicable codes by referring to the list of codes for permanent addresses, current addresses and issuing offices and the table of license categories that are provided in Form 12 (2). |                       |   |                     |  |                     |                       |                  |             |   |   |                |  |             |   |  |

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