

P.O. Box 3890 Coppell, TX 75019 Phone: (888) 333-2413 Fax: (800) 204-9871

Email: Consumer@SafeRentSolutions.com

Coerced Debt Suppression Request

Pursuant to Industry practices, **if you are a victim of Coerced Debt**, you may request a suppression of any potential record(s) affected by the Coerced Debt that are within your SafeRent Solutions Consumer File (credit report information not included), if any. Please be sure to have a copy of your Coerced Debt Attestation and/or Police Report available. Please call Consumer Support at (888) 333-2413 or email Consumer@SafeRentSolutions.com if you have any additional questions.



Please note, SafeRent Solutions, LLC. does not have the ability to place a file freeze or suppress individual items on your consumer credit report. If you suspect fraud or identity theft, you may also want to contact Experian®, Equifax®, and TransUnion® directly to request that a fraud alert or security freeze be placed on your consumer credit file. Please find the national repositories contact information listed below:

Experian

Phone: 888-397-3742

Mail: Experian Security Freeze
P.O. Box 4500, Allen, TX 75013

Online: https://www.experian.com/freeze/center.html

Equifax

Phone: 866-349-5191 **Mail:** Equifax

P.O. Box 105788, Atlanta, GA 30348-5788

Online: https://www.equifax.com/personal/credit-report-services/credit-freeze/

TransUnion

Phone: 888-909-8872
Mail: TransUnion
P.O. Box 160, Woodlyn, PA 19094
Online: https://www.transunion.com/credit-freeze

To initiate a Coerced Debt Suppression Request, you would need to submit the following documentation:

Coerced Debt supporting documentation is defined as a written determination that you are a victim of Coerced Debt. This document may be prepared by:

- A Police report that identifies the coerced debt and describes the circumstances under which the coerced debt was incurred.
- An order from a court setting forth findings of coerced debt
- Written verification on letterhead or on a form published by the Department of Financial and Professional Regulation, verified by certification under section 1-109 of the Code of Civil Procedure of 1963.
- Any other document that individually, or in combination with other documents, demonstrates that a person
 was subject to coerced debt, including but not limited to:
 - Text Messages
 - Email Messages
 - · Phone Records
 - Voicemail Messages
 - · Social Media Posts
 - Letters
 - Credit Card Applications
 - Orders of Protection from the Court



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A written statement of Coerced Debt which must contain:
 Identify any and all accounts that are the result of Coerced Debt
 A Statement that they did not willingly authorize the use of their name for the debt
 Provide facts describing how the debt was incurred
 Include their preferred contact methods where they authorized to receive information
 Includes an attestation stating, "By signing below, I am certifying that the information provided on this form is true and correct to the best of my knowledge and recollection and that I have been a victim of Coerced Debt."
Please include a legible copy of your government-issued identification card (for example, Driver's License, Passport,
Federal or Military Orders) containing your current address.
 Please provide a current or temporary identification card (ID).
 If your ID is expired longer than 30 days, please attach your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) card.
If your current address is different from that stated on your government-issued identification card, please provide a legible copy of one of the following documents that is within 60 days (please ensure your current address is included in the document(s) you provide):
• Utility Bill (Cell Phone, Landline, Cable, Electricity, Gas, or Internet)
 State or Federal Government Documents (VA Benefit Summary, Social Security Award Letter, SNAP Benefits, and/or Disability Benefits Letter)
Military Orders
• Insurance Policy
Bank Statement

Lease Agreement Pay Stub



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Coerced Debt Suppression Request

Victim Information		
Date:		
Last Name:	First Name:	Middle Initial:
Suffix (Jr., Sr., III):	Maiden Name or Other Last Nan	nes:
SSN/ITIN:	DOB (MM/DD/YYYY):	Phone: ()
Address:		Apt, Unit, Building, etc.
City:	State:	Zip/Postal Code:
Email:		
Preferred delivery method	d for receiving communication and re	sults (Please select one):
☐ Mail (Information will	be mailed to the above victim inform	nation address)
☐ Email (Information wil	ll be emailed to the above victim info	rmation email address)
□ Fax ()	to	,
Information to be sup	pressed as a result of Coerced De	ebt
	as a result of Coerced Debt. ific information as possible, including th	e case number, plaintiff, and/or offense, (if applicable):



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recollection and that I have been a victim of Coerced Debt.		
Printed Name:		
Signature:	Date:	

Please be sure to include all necessary information including proof of identity and victim determination documentation.

Due to the sensitivity of the documentation, we can only accept the documents via US Mail.

Mail to: SafeRent Solutions Consumer Support P.O Box 3890, Coppell, TX 75019