SafeRent SOLUTIONS

Phone (888) 333-2413 | Fax (800) 204-9871
Consumer@SafeRentSolutions.com
P.O. Box 3890, Coppell, TX 75019

Identity Theft Suppression Request

Pursuant to Section 605B(d)2 of the FCRA, **if you are a victim of Identity Theft**, you may request a suppression of any potential record(s) affected by the Identity Theft that are within your SafeRent Solutions Consumer File (credit report information not included), if any. Please be sure to have a copy of your Identity Theft Affidavit 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 9554, Allen, TX 75013 **Online:** https://www.experian.com/help/credit-freeze
Equifax	**Phone:** 888-298-0045 **Mail:** Equifax Information Services LLC, P.O. Box 105788, Atlanta, GA 30348-5788 **Online:** https://www.equifax.com/personal/credit-report-services/credit-freeze/
TransUnion	**Phone:** 800-916-8800 **Mail:** TransUnion, P.O. Box 160, Woodlyn, PA 19094 **Online:** https://www.transunion.com/credit-freeze

Identity Theft Disputes With the Credit Bureaus

SafeRent Solutions can only suppress items in your SafeRent Solutions Consumer File. To dispute identity theft on your credit report or place a fraud alert, contact the credit bureaus directly:

	Phone	Dispute online
Experian	**1-800-493-1058**	experian.com/help/dispute-credit
Equifax	**1-800-525-6285**	equifax.com/personal/credit-report-services/credit-dispute
TransUnion	**1-800-680-7289**	transunion.com/credit-disputes

You can also report identity theft to the FTC at **IdentityTheft.gov** or **1-877-438-4338**.

Required Documentation

To initiate an Identity Theft Suppression Request, *you would need to submit the following documentation:*

- ☐ An Identity Theft Report must be submitted containing the specific fraudulent items resulting from Identity Theft. This can be an FTC ID Theft Report, copy of a police report, or report from another Federal, State, or Local law enforcement agency.
- ☐ A complete and legible list of all affected account names, numbers, and all other related details. This information must be listed in the filed Identity Theft Report.
- ☐ A statement such as: "The information is not information relating to any transactions made by me"; or similar verbiage must be printed on the list of affected account names, unless the statement is on the FTC ID Theft Report you are providing.
- ☐ 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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Identity Theft Suppression Request

Victim Information

First Name: Middle Name: Last Name:

Suffix (Jr., Sr., III): Maiden or Other Names Used:

Date of Birth (MM/DD/YYYY): SSN or ITIN:

Current Street Address: Apt/Unit #:

City: State: Zip Code:

Phone: Email:

Preferred Delivery Method

Preferred delivery method for receiving communication and results (Please select one):

- ☐ Mail (Information will be mailed to the above victim information address)
- ☐ Email (Information will be emailed to the above victim information email address)
- ☐ Fax: to

Information to be suppressed as a result of Identity Theft

Items to be suppressed as a result of Identity Theft. *Please include as much specific information as possible, including the case number, plaintiff, and/or offense, (if applicable):*

Certification

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 Identity Theft.

Printed Name:

Signature: Date:

How to Submit

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

Please send your completed form, along with the required identification and victim determination documentation, by email to Consumer@SafeRentSolutions.com or by mail to:

SafeRent Solutions Consumer Support
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