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REQUEST TO OBTAIN MY FREE CREDIT REPORT

**Important Information & Instructions**

In order to protect your personal information we will validate your identity before making your credit report to your applicable home address. You must provide a photograph of the front and back of:

- 1. A printed government identification (e.g. driver's license, health card, birth certificate, passport etc.)
- 2. If your address is not up-to-date on either identification, you must also provide an additional document showing your current address (e.g. mortgage statement, utility bill, etc.)

DO NOT WRITE IN ANY OTHER AREAS OF THIS DOCUMENT. We will not accept documents that are photocopied or otherwise altered. Please print clearly and legibly. We will not accept documents that are handwritten.

If you provide your Social Insurance Number (SIN), we will cross-reference it with our records to ensure that we display the correct information to you. Having your SIN helps us locate files and provides to date another individual's identifying information (such as name and address) is similar to your own.

If you provide a credit card statement or copy of your credit card as proof, please ensure to include your CVR. The above information will be used to confirm your identity and will not be used to update or change your credit file information (apart from the name, date of birth or address in our records to different from the proof you provide, we will update your credit report to reflect the correct information. We will keep a copy of the information you provide to document that we complied with our obligation to obtain reasonable identification from you.

Please send your completed form with proof of identity to: National Consumer Relations, P.O. Box 190, Station Jean Yvanne Montreal Quebec H3Z 1Z2 Tel: 1-877-662-8262. Send it to the nearest branch or delivery point. Any corrections to your credit report are necessary you must complete the Credit Report Update form enclosed with your package, or call 1-877-662-8262, and click on "Then I saw an inaccuracy in my Equifax report" under Other Credit Services.

NAME: LAST NAME FIRST NAME, INITIAL BIRTH DATE (M, D, Y, A) (4)

ADDRESS: CURRENT STREET ADDRESS APT. CITY PROVINCE POSTAL CODE

PREVIOUS ADDRESSES (WITHIN LAST 5 YEARS)

NAME: PREVIOUS STREET ADDRESS APT. CITY PROVINCE POSTAL CODE

NAME: PREVIOUS STREET ADDRESS APT. CITY PROVINCE POSTAL CODE

DATE OF BIRTH (YYYYMMDD) SEX (M/F) NAME & LAST 4 DIGITS OF MAJOR DEBIT CARD (OPTIONAL)

IDENTITY PROOF

DATE

THIS SERVICE IS PROVIDED AS IS. WE DO NOT PROVIDE ANY GUARANTEE OF ACCURACY. THIS SERVICE IS NOT AVAILABLE TO RESIDENTS OF QUEBEC AND ALBERTA.

Cardholder Name: \_\_\_\_\_ Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Note: Cheque and cash payments are not accepted. Cardholder's name must be same as recipient's name.

**Annual Credit Report Request Form**

You have the right to get a free copy of your credit file annually, no matter what your credit status is. This information is available to you every 12 months. You can use this information to check for errors in your credit file, and to see how your credit score is changing. You can also use this information to help you make better financial decisions.

For more information on obtaining your free credit report, and how to use the information you receive, see our website at [www.equifax.ca](http://www.equifax.ca) or call 1-877-662-8262.

Use this form to request your credit report. You must provide a valid identification document and your current and previous addresses. The following information is required to process your request: Date of Birth, Social Insurance Number (SIN), and your current and previous addresses. If you are unable to provide this information, please call 1-877-662-8262 for assistance.

**Personal Information**

Requester Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

**Current Mailing Address:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Previous Mailing Address (complete only if different from current address for more than 60 days):**

Street: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Identification**

Identify the document you are providing:  Driver's License  Passport  Health Card  Other (Specify) \_\_\_\_\_

**Consent**

I consent to Equifax, Experian, and TransUnion providing my credit report to me. I understand that I can cancel my consent at any time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Additional Information**

Other contacts to your credit report are necessary you must complete the Credit Report Update form enclosed with your package, or call 1-877-662-8262, and click on "Then I saw an inaccuracy in my Equifax report" under Other Credit Services.

Is annual credit report request service legitimate.

Se posiar o frígida por postal, este estarĀ em vigor trĀs Āo te is apĀ's a agĀncia de crĀ. © said to receive your request. An insurer can only share its condition by hand © tip with MIB if you give written permission. Then send it to: The credit information agency © said (Equifax, Experian, or TransUnion) The information provider who gave the inaccurate information to the credit information agency © said. A credit information company © said usually can report most of the negative information for seven years. Information about a lawsuit or trial against you can be reported for seven years or up to © that the limitation period expires, whichever is longer. Your report can only be updated when applying for an insurance policy with a member company of MIB, and give them permission to submit their terms and conditions. © tips A MIB. Request Your Free Medical History Report VocĀ tem o direito de obter uma cĀpia gratuita do seu relatĀrio de histĀria mĀ © every year. You have the right to obtain a copy of your MIB report, the company that manages and is © proprietĀria da database de relatĀrios. Sources of information for a ReportĀrio de HistĀrico MĀ © © If you have reported a state of health in an insurance claim, the insurer may want to report it to the MIB. These providers include banks and credit card companies © said. Find an example dispute letter and get detailed instructions on how to report errors. It is the credit information agency © said (CRA) and the information provider are responsible for correcting their credit report © said. 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Report unresolved disputes to the Consumer Financial Protection Bureau. Unless you remove the color freeze said, it remains in effect. Lift a credit freeze If you don't want creditors and other companies to be able to access your credit files again, you won't need to lift your credit freeze permanently or temporarily. EspaĀol Main Navigation expanded current page previous next All 3 3 3 p 3 p 3 and services About branches of the American flag of enlargement of the US government Data and statistics About US government agencies and elected officials History and history documents 9 Disaster and Emergency Services Education Government Agencies and Elected Officials Jobs and Unemployment Laws and Quests Equifax Credit Report Services Phone: 1-800-685-1111 By mail, write to: Equifax Information Services LLC PO Box 105788 Atlanta, GA 30388 Telephone: 1-888-909-8872 Por. Write to: Transunion LLC PO Box 2000 Chester, PA 19016 INNOVONLINE: Innovis Innovis eht dedivop tabt ynapmoc eht dna ycnega gnitroper tiderc eht htob tcatnoc: noitamrofni etelpmoci ro etaruccani sniatnoc ti fi dexit troper tiderc ruoy teg nac uoy. troper eht no desab tiderc uoy seined ynapmoc a fi syad 06 nitw troper eorf a tseuger ot thgir eht evah uoy.) 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