



Research Request Form

You may initiate an investigation request via the internet at www.investigate.equifax.com.

Or, mail this document to the following address:

Equifax Information Services LLC
P.O. Box 740256
Atlanta, GA 30348

Email Address (please print clearly): _____

**Please provide your email address if you would like to be informed once your reinvestigation is completed and if you would like to view the results of your reinvestigation online.*

Would you like Equifax to hide the first 5 digits of your social security number on our response to you? Circle: Yes No

Confirmation Number (please provide if you have a confirmation number): _____

Intentionally making any false statements to a consumer reporting agency for the purpose of having it placed on a consumer report is punishable by law in some states. To ensure that your request is processed accurately, please enlarge photocopies of any items that contain small print (i.e. driver's license, W2 forms, etc.). Photocopies that are not legible or contain highlighting may cause us to request that you resubmit your request for clarity.

If your identity information differs from the information listed on this form, please fill in the correct information in the space provided for each item. Please provide a photocopy of your driver's license, social security card, or recent utility bill that reflects the correct information.

Identification Information

Name Social Security Number Date of Birth

Current Address

Previous Address(es)

Daytime Phone Number Evening Phone Number

List other names which you have used in the past

Account Information

Company Name _____ Account Number _____

Reason for investigation: Not Mine Paid in Full Current/Previous Status Incorrect Account Closed
 Other (Please explain) _____

Company Name _____ Account Number _____

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