



Security Freeze Request Form

To place/lift a Security Freeze on your credit file, please complete and return this form, along with a photocopy of one item from each category below:

- Activate Security Freeze Remove Security Freeze

Identity

- Driver's License
- Passport
- State issued ID

SSN

- Social Security Card
- Pay Stub with SSN
- IRS W2 Form with SSN

Address

- Utility Bill with Address and Your Name
- Pay Stub with SSN

Personal Identification Number (PIN): _____

_____ Last Name	_____ First Name	_____ Initial	_____ Suffix
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_____ Current Address	_____ City	_____ State	_____ Zip
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_____ Previous Address	_____ City	_____ State	_____ Zip
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Maiden Name or other Last Name

_____-_____-_____ Social Security Number	_____/_____/_____ Date of Birth	_____ Driver's License Number	_____ State
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In the event a creditor needs to contact me, please use the telephone numbers I provide below:

_____ Home Phone	_____ Cell Phone	_____ Work Phone
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By signing below, I certify that I am requesting a Security Freeze to be placed/lifted on my personal credit report.

_____ Signature	_____ Date
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Please send this form, via US Mail only, along with the required documents to:

Mail: FactorTrust, Inc. P.O. Box 390 Woodlyn, PA 19094	Phone: 844-773-3321
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