



## Incident # :\_\_\_\_\_

# **Identity Theft Packet**

This packet will provide victims with a list of resources and instructions when dealing with an identity theft situation. The Franklin Police Department will assist victims associated with this crime, but unfortunately, the victims themselves are burdened with resolving their own credit problems. Victims of identity theft must act quickly and assertively to minimize the damage to their good name and credit history.

When dealing with the authorities and financial institutions, try to keep a log of all your conversations, including dates, times, names, and phone numbers. In this packet, there will be a worksheet for your convenience when logging this contact information. There will also be an id theft affidavit supplied by the Federal Trade Commission, which has been adapted by all financial and credit institutions when filing fraudulent activities to your personal accounts.

## If you find that you're a victim of identity theft, the Franklin Police Department immediately urges you to take the following steps:

1. Contact the fraud departments of one of the three major credit bureaus and report the theft. Ask that a **''fraud alert''** be placed on your file and that no new credit be granted without your approval.

•	Equifax:	1-800-525-6285	www.equifax.com
•	<b>Experian:</b>	1-888-397-3742	www.experian.com
•	Trans Union:	1-800-680-7289	www.transunion.com

- 2. For any accounts that have been fraudulently accessed or opened, contact the security department of the appropriate creditor or financial institution. Close these accounts and put passwords (**not** your mother's maiden name or Social Security number) on any new accounts you open.
- 3. To report fraudulent use of your personal checks, contact the following national checking agencies:

٠	CheckRite:	1-800-766-2748
٠	Chexsystems:	1-800-428-9623
٠	CrossCheck:	1-800-843-0760
٠	Certigy/Equifax:	1-800-437-5120
٠	International Check:	1-800-526-5380
٠	SCAN:	1-800-262-7771
٠	TeleCheck:	1-800-710-9898

- 4. You must file a report with your local police department or the police department where the identity theft took place. Get the report number or a copy of the report in case the bank, credit card company or others need proof of the crime later.
- 5. Call the ID Theft Clearinghouse toll-free at 1-877-IDTHEFT (1-877-438-4338) to report the theft. Counselors will take your complaint and advise you on how to deal with the credit-related problems that could result from ID theft. The Identity Theft Hotline gives you **one** place to report the theft to the federal government and receive helpful information.

#### For more information, the following (non-profit) websites are great resources on identity theft:

- Federal Trade Commission <u>www.consumer.gov/idtheft</u>
- Identity Theft Resource Center <u>www.idtheftcenter.org</u>
- Privacy Rights Clearinghouse <u>www.privacyrights.org</u>
- Social Security Online

www.ssa.gov/pubs/idtheft.htm

U.S. Postal Inspection Service <u>www.usps.com/postalinspectors</u>

If you need further assistance, please feel free to contact the Franklin Police Department Detective Division and a detective will try to answer questions regarding your case.

#### (508) 528-1212

## **Identity Theft Victim Worksheet**

**Credit Bureaus** – Request a fraud alert be placed in your file and a victims statement asking that creditors call you before opening any new accounts or changing your existing accounts. Ask for a free copy of your credit report (if inaccurate due to fraud)

Bureau	Phone Number	Date Contacted	<b>Contact Person</b>	Notes
Equifax	1-800-525-6285			
Experian	1-888-397-3742			
Trans Union	1-800-680-7289			

**Banks, Credit Cards, and Other Creditors** – Contact each creditor promptly then follow-up with a letter to protect your legal rights. Check for fraudulent charges and/or changes-of-addresses. Close the accounts that have been compromised and open new ones, being sure to use different, non-obvious Pins and passwords.

Creditor	Address Phone	Date Contacted	Contact Person	Notes

**Law Enforcement Authorities** – File a police report and get a copy of it to use as proof of the crime when dealing with creditors. Also contact the Federal Trade Commission and file a claim in regards to your case.

Agency / Dept	Phone Number	Date Contacted	Contact Person	Report # / Notes
Franklin Police Dept.	1-508-528-1212			
MA State Police	1-508-820-2370			
MA R.M.V.	1-800-858-3926			
U.S. Postal Inspector	1-617-556-4400			
Federal Trade Comm.	1-877-438-4338			
Social Security Admin	1-800-269-0271			

**Public Utilities** – Request a security password be placed in your account file and make sure these utilities understand your dilemma.

Company	Phone Number	Date Contacted	Contact Person	Notes
Electric				
Phone Service				
Heating				
Cable Service				

### Instructions for Completing the ID Theft Affidavit

To make certain that you do not become responsible for any debts incurred by an identity thief, you must prove to each of the companies where accounts were opened or used in your name that you didn't create the debt.

A group of credit grantors, consumer advocates, and attorneys at the Federal Trade Commission (FTC) developed an ID Theft Affidavit to make it easier for fraud victims to report information. While many companies accept this affidavit, others require that you submit more or different forms. Before you send the affidavit, contact each company to find out if they accept it.

It will be necessary to provide the information in this affidavit anywhere a **new** account was opened in your name. The information will enable the companies to investigate the fraud and decide the outcome of your claim. If someone made unauthorized charges to an **existing** account, call the company for instructions.

This affidavit has two parts:

- Part One the ID Theft Affidavit is where you report general information about yourself and the theft.
- **Part Two** the Fraudulent Account Statement — is where you describe the fraudulent account(s) opened in your name. Use a separate Fraudulent Account Statement for each company you need to write to.

When you send the affidavit to the companies, attach copies (NOT originals) of any supporting documents (for example, driver's license or police report). Before submitting your affidavit, review the disputed account(s) with family members or friends who may have information about the account(s) or access to them. Complete this affidavit as soon as possible. Many creditors ask that you send it within two weeks. Delays on your part could slow the investigation.

Be as accurate and complete as possible. You may choose not to provide some of the information requested. However, incorrect or incomplete information will slow the process of investigating your claim and absolving the debt. Print clearly.

When you have finished completing the affidavit, mail a copy to each creditor, bank, or company that provided the thief with the unauthorized credit, goods, or services you describe. Attach a copy of the Fraudulent Account Statement with information only on accounts opened at the institution to which you are sending the packet, as well as any other supporting documentation you are able to provide.

Send the appropriate documents to each company by certified mail, return receipt requested, so you can prove that it was received. The companies will review your claim and send you a written response telling you the outcome of their investigation. Keep a copy of everything you submit.

If you are unable to complete the affidavit, a legal guardian or someone with power of attorney may complete it for you. Except as noted, the information you provide will be used only by the company to process your affidavit, investigate the events you report, and help stop further fraud. If this affidavit is requested in a lawsuit, the company might have to provide it to the requesting party. Completing this affidavit does not guarantee that the identity thief will be prosecuted or that the debt will be cleared.

If you haven't already done so, report the fraud to the following organizations:

- Any one of the nationwide consumer reporting companies to place a fraud alert on your credit report. Fraud alerts can help prevent an identity thief from opening any more accounts in your name. The company you call is required to contact the other two, which will place an alert on their versions of your report, too.
  - Equifax: 1-800-525-6285; www.equifax.com
  - Experian: I-888-EXPERIAN (397-3742); www.experian.com
  - **TransUnion:** I-800-680-7289; www.transunion.com

In addition to placing the fraud alert, the three consumer reporting companies will send you free copies of your credit reports, and, if you ask, they will display only the last four digits of your Social Security number on your credit reports.

 The security or fraud department of each company where you know, or believe, accounts have been tampered with or opened fraudulently. Close the accounts. Follow up in writing, and include copies (NOT originals) of supporting documents. It's important to notify credit card companies and banks in writing. Send your letters by certified mail, return receipt requested, so you can document what the company received and when. Keep a file of your correspondence and enclosures.

When you open new accounts, use new Personal Identification Numbers (PINs) and

passwords. Avoid using easily available information like your mother's maiden name, your birth date, the last four digits of your Social Security number or your phone number, or a series of consecutive numbers.

- 3. Your local police or the police in the community where the identity theft took place to file a report. Get a copy of the police report or, at the very least, the number of the report. It can help you deal with creditors who need proof of the crime. If the police are reluctant to take your report, ask to file a "Miscellaneous Incidents" report, or try another jurisdiction, like your state police. You also can check with your state Attorney General's office to find out if state law requires the police to take reports for identity theft. Check the Blue Pages of your telephone directory for the phone number or check www.naag.org for a list of state Attorneys General.
- 4. The Federal Trade Commission. By sharing your identity theft complaint with the FTC, you will provide important information that can help law enforcement officials across the nation track down identity thieves and stop them. The FTC also can refer victims' complaints to other government agencies and companies for further action, as well as investigate companies for violations of laws that the FTC enforces.

You can file a complaint online at www.consumer.gov/idtheft. If you don't have Internet access, call the FTC's Identity Theft Hotline, toll-free: I-877-IDTHEFT (438-4338); TTY: I-866-653-4261; or write: Identity Theft Clearinghouse, Federal Trade Commission, 600 Pennsylvania Avenue, NW, Washington, DC 20580.

## **ID** Theft Affidavit

	/	me is(First)		(Last)	(Jr., Sr., II
(2)	(If different fron	n above) When the eve	ents described in this af	fidavit took place, l v	was known as
	(First)	(Middle)	(Last)	(]ı	r., Sr., III)
(3)	My date of birt	h is(day/month/ye	ear)		
(4)	My Social Secu	rity number is			
(5)	My driver's lice	ense or identification c	ard state and number	are	
(6)	My current add	lress is			
	City		State	Zip Code	
(7)	l have lived at t	his address since	(month/year)		
(8)	(If different fron	n above) When the eve	ents described in this af	fidavit took place, m	y address was
	City		_State	Zip Code _	
( <b>9</b> )	l lived at the ad	Idress in Item 8 from _ (	until month/year) (mo	nth/year)	
	My daytime tel	ephone number is (	)		
(10)					

#### How the Fraud Occurred

#### Check all that apply for items 11 - 17:

- (11) I did not authorize anyone to use my name or personal information to seek the money, credit, loans, goods or services described in this report.
- (12) I did not receive any benefit, money, goods or services as a result of the events described in this report.

(day/month/year)

(14) To the best of my knowledge and belief, the following person(s) used my information (for example, my name, address, date of birth, existing account numbers, Social Security number, mother's maiden name, etc.) or identification documents to get money, credit, loans, goods or services without my knowledge or authorization:

Name (if known)	Name (if known)		
Address (if known)	Address (if known)		
Phone number(s) (if known)	Phone number(s) (if known)		
Additional information (if known)	Additional information (if known)		

- (15) I do NOT know who used my information or identification documents to get money, credit, loans, goods or services without my knowledge or authorization.
- (16) Additional comments: (For example, description of the fraud, which documents or information were used or how the identity thief gained access to your information.)

(Attach additional pages as necessary.)

#### Victim's Law Enforcement Actions

- (17) (check one) I am am not willing to assist in the prosecution of the person(s) who committed this fraud.
- (18) (check one) I am am not authorizing the release of this information to law enforcement for the purpose of assisting them in the investigation and prosecution of the person(s) who committed this fraud.
- (19) (check all that apply) I have have not reported the events described in this affidavit to the police or other law enforcement agency. The police did did not write a report. In the event you have contacted the police or other law enforcement agency, please complete the following:

(Agency #I)	(Officer/Agency personnel taking report)
(Date of report)	(Report number, if any)
(Phone number)	(email address, if any)
(Agency #2)	(Officer/Agency personnel taking report)
(Date of report)	(Report number, if any)
(Phone number)	(email address, if any)

#### Documentation Checklist

Please indicate the supporting documentation you are able to provide to the companies you plan to notify. Attach copies (NOT originals) to the affidavit before sending it to the companies.

- (20) A copy of a valid government-issued photo-identification card (for example, your driver's license, state-issued ID card or your passport). If you are under 16 and don't have a photo-ID, you may submit a copy of your birth certificate or a copy of your official school records showing your enrollment and place of residence.
- (21) Proof of residency during the time the disputed bill occurred, the loan was made or the other event took place (for example, a rental/lease agreement in your name, a copy of a utility bill or a copy of an insurance bill).

(22) A copy of the report you filed with the police or sheriff's department. If you are unable to obtain a report or report number from the police, please indicate that in Item 19. Some companies only need the report number, not a copy of the report. You may want to check with each company.

#### Signature

I certify that, to the best of my knowledge and belief, all the information on and attached to this affidavit is true, correct, and complete and made in good faith. I also understand that is affidavit or the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may constitute a violation of 18 U.S.C. §1001 or other federal, state, or local criminal statutes, and may result in imposition of a fine or imprisonment or both.

(signature)

(date signed)

(Notary)

[Check with each company. Creditors sometimes require notarization. If they do not, please have one witness (non-relative) sign below that you completed and signed this affidavit.]

Witness:

(signature)

(printed name)

(date)

(telephone number)

## **Fraudulent Account Statement**

#### **Completing this Statement**

- Make as many copies of this page as you need. Complete a separate page for each company you're notifying and only send it to that company. Include a copy of your signed affidavit.
- List only the account(s) you're disputing with the company receiving this form. See the example below.
- If a collection agency sent you a statement, letter or notice about the fraudulent account, attach a copy of that document (**NOT** the original).

#### I declare (check all that apply):

As a result of the event(s) described in the ID Theft Affidavit, the following account(s) was/were opened at your company in my name without my knowledge, permission or authorization using my personal information or identifying documents:

<b>Creditor Name/Address</b> (the company that opened the account or provided the goods or services)	Account Number	Type of unauthorized credit/goods/services provided by creditor (if known)		Amount/Value provided (the amount charged or the cost of the goods/services)
Example Example National Bank 22 Main Street Columbus, Ohio 22722	01234567-89	auto loan	01/05/2002	\$25,500.00

During the time of the accounts described above, I had the following account open with your company:

Billing name

Billing address\_\_\_\_\_

Account number

## **Identity Theft Victim's Complaint and Affidavit**

A voluntary form for filing a report with law enforcement, and disputes with credit reporting agencies and creditors about identity theft-related problems. Visit ftc.gov/idtheft to use a secure online version that you can print for your records.

#### Before completing this form:

- I. Place a fraud alert on your credit reports, and review the reports for signs of fraud.
- 2. Close the accounts that you know, or believe, have been tampered with or opened fraudulently.

#### About You (the victim)

#### Now

(1)	My full le sel nemes					Leave (3)
(1)	My full legal name: _	First	Middle	Last	Suffix	blank until you provide
(2)	My date of birth:		1 indulo	Luot	<b>G</b> uilli	this form to
( )	/	mm/dd/yyyy				someone with
(3)	My Social Security nu	umber:				a legitimate business need,
(4)						like when you
(ד)	My driver's license:	State	Number			are filing your report at the
(5)	My current street ad	dross				police station
(5)	My current street ad	lui ess.				or sending the form
	Number & Stre	et Name		Apartment, Sui	te etc	to a credit
		et i tume		, ipai ciricite, ea		reporting
	City	State	Zip Code		Country	agency to correct your
					Sound y	credit report.
(6)	I have lived at this ad	dress since	mm/yyyy			
(7)	My daytime phone: (	)				
	My evening phone: (					
	My email:					
<u>At tl</u>	he Time of the Fr	aud				
						Skip (8) - (10)
(8)	My full legal name w	as: First	Middle	Last	Suffix	if your information
( <b>-</b> )					Juliix	has not
(9)	My address was:	Number 9 Street		Anorthogon	- Suite ate	changed since
		Number & Stree	et Name	Apartmen	t, Suite, etc.	the fraud.
	C:		Zia Cada			
	City	State	Zip Code	C	Country	
(10)	My daytime phone: (	)	My ev	vening phone: (	()	
	My email:					
Th	e Paperwork Reduction Act					
	botoro wo con collect	or choncor the	ollection of – your inf	ormation or requ	ure you to pro	and out

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(14):

Enter what

you believe was involved (even if you don't have complete information).

you know about anyone

#### **About You** (the victim) (Continued)

#### **Declarations**

(11)	Ι	□ did	OR	□ did not	authorize anyone to use my name or personal information to obtain money, credit, loans, goods, or services — or for any other purpose — as described in this report.
(12)	Ι	🗆 did	OR	□ did not	receive any money, goods, services, or other benefit as a result of the events described in this report.
(13)	Ι	🗆 am	OR	🗌 am not	willing to work with law enforcement if charges are brought against the person(s) who committed the fraud.

#### About the Fraud

(14) I believe the following person used my information or identification documents to open new accounts, use my existing accounts, or commit other fraud.

Name:					
_	First	Middle	Last	Suffix	
Address:					

Number & Street Name

City

Apartment, Suite, etc.

Country

State

Zip Code

Phone Numbers: (\_\_\_\_)\_\_\_\_\_ (\_\_\_)\_\_\_\_\_

Additional information about this person: \_\_\_\_\_

(14) and (15):

Attach additional

(15) Additional information about the crime (for example, how the identity thief gained access to your information or which documents or information were used):



#### Documentation

- (16) I can verify my identity with these documents:
  - □ A valid government-issued photo identification card (for example, my driver's license, state-issued ID card, or my passport).

If you are under 16 and don't have a photo-ID, a copy of your birth certificate or a copy of your official school record showing your enrollment and legal address is acceptable.

□ Proof of residency during the time the disputed charges occurred, the loan was made, or the other event took place (for example, a copy of a rental/lease agreement in my name, a utility bill, or an insurance bill).

(16): Reminder: Attach copies of your identity documents when sending this form to creditors and credit reporting agencies.

#### About the Information or Accounts

(17) The following personal information (like my name, address, Social Security number, or date of birth) in my credit report is inaccurate as a result of this identity theft:

(A)	
(B)	
(C)	

(18) Credit inquiries from these companies appear on my credit report as a result of this identity theft:

Company Name:	
Company Name:	
Company Name:	

withdrawn from the account.

Below are details about the different frauds committed using my personal information. (19)

Name of Institution	Contact Person	Phone	Extension	(19): If there were more than three
	Routing Number	es □Loan	heck Number(s)	frauds, copy this page blank, and attach as many additional copies as necessary.
Select ONE:	opened fraudulently. Ig account that someone ta	ampered with.	ount Obtained (\$)	Enter any applicable information that you have, even if it is incomplete or an estimate. If the thief committed two
				types of fraud at
Name of Institution	Contact Person	Phone	Extension	one company, list the company twice, giving
☐ Governr	Routing Number Bank  Phone/Utilitie nent Benefits  Internet	es 🗆 Loan	heck Number(s)	the information about the two frauds separately. <i>Contact Person</i> : Someone you
Select ONE: This account was o This was an existin	opened fraudulently. Ig account that someone ta	ampered with.		dealt with, whom an investigator can call about this fraud.
Date Opened or Misused (mm,	/yyyy) Date Discovered (mm	ı/yyyy) Total Amc	ount Obtained (\$)	Account Number:
Name of Institution	Contact Person Routing Number	Phone Affected C	Extension heck Number(s)	The number of the credit or debit card, bank account, loan, or other account that was misused.
Account Type:  Credit Governr Select ONE: This account was of This was an existin	Dates: Indicate when the thief began to misuse your information and when you discovered the problem.			
Date Opened or Misused (mm,	/yyyy) Date Discovered (mm	ı/yyyy) Total Amo	ount Obtained (\$)	Amount Obtained: For instance, the total amount purchased with the card or

You	r Law Enforcement Rep	bort	
(20)	related information from appea detailed law enforcement report an Identity Theft Report by tak office, along with your support your signature and complete the important to get your report in person or get a copy of the office.	ting agency to quickly block identity theft- aring on your credit report is to submit a ort ("Identity Theft Report"). You can obtain ting this form to your local law enforcement ting documentation. Ask an officer to witness he rest of the information in this section. It's number, whether or not you are able to file in icial law enforcement report. Attach a copy of ial law enforcement report you receive when orting agencies.	(20): Check "I have not" if you have not yet filed a report with law enforcement or you have chosen not to. Check "I was unable" if you tried to file a report but law enforcement refused to take it.
	<ul> <li>Select ONE:</li> <li>I have not filed a law enforcement report.</li> <li>I was unable to file any law enforcement report.</li> <li>I filed an automated report with the law enforcement agency listed below.</li> <li>I filed my report in person with the law enforcement officer and agency listed below.</li> </ul>		
Law E	nforcement Department	State	face-to-face interview with a law enforcement officer.
Repor	: Number	Filing Date (mm/dd/yyyy)	
Office	r's Name (please print)	Officer's Signature	
Badge	Number	() Phone Number	
Did th	e victim receive a copy of the re	eport from the law enforcement officer? $\Box$ Ye	s OR ⊟No

Victim's FTC complaint number (if available): \_\_\_\_\_

#### Signature

## As applicable, sign and date IN THE PRESENCE OF a law enforcement officer, a notary, or a witness.

(21) I certify that, to the best of my knowledge and belief, all of the information on and attached to this complaint is true, correct, and complete and made in good faith. I understand that this complaint or the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may violate federal, state, or local criminal statutes, and may result in a fine, imprisonment, or both.

Signature

Date Signed (mm/dd/yyyy)

#### Your Affidavit

(22) If you do not choose to file a report with law enforcement, you may use this form as an Identity Theft Affidavit to prove to each of the companies where the thief misused your information that you are not responsible for the fraud. While many companies accept this affidavit, others require that you submit different forms. Check with each company to see if it accepts this form. You should also check to see if it requires notarization. If so, sign in the presence of a notary. If it does not, please have one witness (non-relative) sign that you completed and signed this Affidavit.

Notary

Witness:

Signature

Printed Name