## IDENTITY THEFT VICTIM'S FRAUDULENT ACCOUNT INFORMATION REQUEST INSTRUCTIONS

The account information request form will enable the San Diego Police Department to evaluate your case for investigation. We need the attached forms completed, signed and returned to us so that we can determine how and when your identity was used. Please complete the attached forms and return them to us as soon as possible. Send the forms back as soon as possible. Failure to return the forms will hinder the detective's investigation.

Mail to: San Diego Police Department Economic Crimes Section – MS- 723 1401 Broadway San Diego, CA 92101-5729

**Fax to:** 619-446-1032

Instructions to complete the Account Information Request:

1) Complete only # 5 through #9, sign and date.

The Detective will complete the rest of the remainder of the form before he sends it out to the financial institutions.

## **IDENTITY THEFT VICTIM'S** FRAUDULENT ACCOUNT INFORMATION REQUEST

Made pursuant to California Financial Code 22470, Civil Code 1748.95 and Penal Code 530.8

1) TO:	2) FAX:
3) Account No	_ 4) Reference No
5) From:	

I am formally disputing an account that I have learned has been opened or applied for with you. I did not open or apply for this account and have not authorized anyone else to do so for me. You may consider this account to be fraudulent. Below is my identifying information. I have filed a report with my local police department and a copy is attached. Under California law, all credit grantors and utilities must provide information relating to fraudulent accounts opened in an identity theft victim's identity, including a copy of the application and a record of any charges associated with the account.

A copy of the relevant California law is enclosed. In most cases, the account information must be provided free of charge within 10 business days of your receipt of the police report and the victim's identifying information. The victim is generally permitted to authorize your release of the account information to a specified law enforcement officer. I am designating San Diego Police Department; and the detective listed below as additional recipients of all account information and documents. I authorize the release of all account documents and information to the law enforcement officer designated. I am requesting the following:

- **o** Application Records or screen prints of Internet/phone applications
- **o** Statements
- Payments/Charge Slips
- **o** Investigator's Summary
- **o** Delivery addresses
- **o** Any other documents associated with the account
- **o** All records of phone numbers used to activate the account.
- All records used to access the account

6) Name: 7)	Social Security No:
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8) Date of Birth: \_\_\_\_\_\_ 9) Address: \_\_\_\_\_\_

Please fax the requested information to the below listed department in attention to the below listed detective. San Diego Police Department – Economic Crimes Section

Case #	Detective:
Phone #	Fax #
Disclosure Time Frame:	

I am aware that I may revoke this disclosure authorization in writing at any time.

15) Signed: 16) Date: