



BATTLE CREEK POLICE DEPARTMENT **IDENTITY THEFT VICTIM'S PACKET**

Information and Instructions

This packet is to be completed once you have contacted the Battle Creek Police Department and have been advised to complete the Identity Theft Victim Packet related to your identity theft case. Once the packet has been fully completed and returned to the Battle Creek Police Department, a detective will contact you and advise you of your complaint number. Please keep track of your complaint number as creditors, financial institutions and credit reporting agencies will ask you for it.

Your willingness to complete this document and return it to the Battle Creek Police Department will determine if further criminal investigation will continue.

This packet contains information to assist you in the correction of your credit and to help ensure that you are not held responsible for the debts incurred by the identity thief. In addition, this packet includes information that will allow you to obtain financial records related to the fraudulent accounts and provide those records to law enforcement, with out which we can not conduct an investigation for prosecution. We recognize that some victims are only interested in the correction of their credit and do not necessarily wish for prosecution; therefore, we request that you only submit this packet to the Battle Creek Police Department if you desire prosecution. It is important to understand that in the event that a suspect is identified and arrested and the case proceeds to court, you as the victim would more than likely be required to appear and testify.

Completion of dispute letters that provide us with necessary documentation is required before we can begin investigation of your case for prosecution. In identity theft cases it is difficult to identify the suspects as they often use inaccurate information such as addresses and phone numbers. Often, the cell phones that identity thieves use are non-traceable, prepaid phones or opened with fraudulent information. Frequently the investigator can not find evidence to prove who actually used the victim's name and/or personal information over the phone or Internet.

It is important to note that even if the suspect can not be identified for prosecution, it will not affect your ability to correct the fraudulent accounts and remove them from your credit.

NOTE: If you suspect someone is using your personal information for employment and there is no evidence of other identity fraud, please see the section for contacting the Social Security Administration under Additional Useful Information. Do not contact the employer directly as they may warn the suspect employee. It may not be necessary to complete this packet.

If your name and/or information are used by someone else to avoid a traffic ticket or any criminal prosecution, please contact the agency investigating the original crime. It may not be necessary to complete this packet.

BCPD 6/12/2014

Helpful Hints

- Remember that each creditor has different policies and procedures for correction of fraudulent accounts.
- Do not provide originals and be sure to keep copies of everything you provide to the creditors or companies involved in the identity theft.
- Write down all dates, times, and the names of individuals you speak to regarding the identity theft and correction of your credit.

STEP 1: CONTACT YOUR BANK AND OTHER CREDIT CARD HOLDERS

If the theft involved existing bank accounts (checking or savings accounts, as well as credit or debit cards), you should do the following.

- Close the account that was fraudulently used or put stop payments on all outstanding checks that might have been written without your knowledge.
- Close all credit card accounts that were used fraudulently.
- Close any account accessible by debit card if it has been accessed fraudulently.
- Open up new accounts protected with a secret password or personal identification number (PIN).

If the identity theft involved the creation of new bank accounts, you should do the following

- Call the involved financial institution and notify them of the identity theft.
- They will likely require additional notification in writing (See Step 4).

STEP 2: CONTACT ALL THREE (3) MAJOR CREDIT REPORTING BUREAUS

First, request the credit bureaus place a “Fraud Alert” on your file. A fraud alert will put a notice on your credit report that you have been the victim of identity theft. Merchants and financial institutions may opt to contact you directly before any new credit is taken out in your name.

Some states allow for a Security Freeze in which a PIN can be designated on your credit file and subsequently the PIN must then be given in order for credit to be extended. Ask the credit reporting bureaus if your state is participating in the Security Freeze Program.

The following is a list of the three (3) major credit reporting bureaus for victims to report fraud.

| | | |
|--|--|--|
| Equifax www.equifax.com Consumer Fraud Division 1-800-525-6285 Fraud Alert 1-888-766-0008 Receive copy of credit report by phone: 1-800-685-1111 | TransUnion www.transunion.com Fraud Victim Assistance Dept 1-800-680-7289 Free annual credit report 1-877-322-8228 Dispute item on credit report 1-800-916-8800 | Experian www.experian.com National Consumer Assistance 1-888-397-3742 |
|--|--|--|

www.scamsafe.com – provides useful information related to identity theft and indicates which states participate in the Security Freeze Program.

www.annualcreditreport.com – provides one free credit report, per credit bureau agency per year, with subsequent credit reports available at a nominal fee.

STEP 3: FILE A REPORT WITH THE FEDERAL TRADE COMMISSION

You can go online to file an identity theft complaint with the FTC.

www.consumer.gov/idtheft.com or by calling 1-877-IDTHEFT (1-877-438-4338).

STEP 4: CONTACT CREDITORS INVOLVED IN THE IDENTITY THEFT BY PHONE AND IN WRITING

This step involves contacting all the companies or institutions that provided credit or opened new accounts for the suspect or suspects. Some examples include banks, mortgage companies, utility companies, telephone companies, cell phone companies as well as others. Provide the creditors with the completed Identity Theft Affidavit (some may require that you use their own affidavit), Letter of Dispute, and a copy of the FACTA Law.

FTC Identity Theft Affidavit

A copy of the FTC Identity Theft Affidavit can be found at the end of this packet. This is the same affidavit that the FTC makes available to victims of identity theft. The affidavit requests information regarding you, as the victim, how the fraud occurred, law enforcement's actions, documentation checklist and Fraudulent Account Statement. NOTE: Some creditors, financial institutions or collection agencies have their own affidavit forms that you may have to complete.

Letter of Dispute

Sample copies of the Letter of Dispute can also be found at the end of this packet. This letter needs to be completed for every creditor involved in the identity theft. The Letter of Dispute should contain information related to the fraudulent account(s), your dispute of the account(s), and your request for the information to be corrected. In addition, the letter should reference

FACTA and make a request for copies of any and all records related to the fraudulent account(s) be provided to you and made available to the Holland Police Department.

FACTA Law

A portion of the FACTA Law can also be found at the end of this packet. As previously discussed in this packet, FACTA allows for you to obtain copies of any and all records related to the fraudulent account(s). You are then permitted to provide law enforcement with copies of the records you received related to the fraudulent account(s); thereby allowing us to bypass the sometimes difficult process of obtaining subpoenas for the very same information. It also allows you to request the information be made available to the Battle Creek Police Department. We have found it useful to provide a copy of the FACTA Law with the submission of the Identity Theft Affidavit Letter of Dispute to the individual creditors.

STEP 5: SUBMIT THE IDENTITY THEFT AFFIDAVIT AND COPIES OF ALL INFORMATION AND RECORDS OBTAINED FROM CREDITORS WITH REGARD TO THE FRAUDULENT ACCOUNTS(S)

Bring copies of all information to the Battle Creek Police Department *Atten: Sgt. Jim Martens*

OR

Send the information to:

Battle Creek Police Department
20 N Division
Battle Creek MI, 49014
Attn: [Sgt. Jim Martens]

To avoid confusion and to ensure that all items are forwarded to the assigned detective, we request that you submit everything at once and if possible to not send items separately. The information can be hand delivered or mailed.

Please remember that some victims are only interested in the correction of their credit and do not necessarily wish for prosecution. Therefore, we request that you only submit this packet to the Battle Creek Police Department if you desire prosecution and would be willing and available to appear and testify should a suspect be identified and arrested.

ADDITIONAL USEFUL INFORMATION

Other entities you may want to report your identity theft to:

- Post Office – Contact your local postal inspector if you suspect that your mail has been stolen or diverted with a false change of address. You can obtain the address and telephone number of the postal inspector for your area at the United States Postal Service website:

<http://www.usps.com/ncsc/locators/findis.html>

OR

1-800-275-8777

- Social Security Administration
 - If you suspect that someone is using your social security number to obtain employment, contact the Social Security Administration's fraud hotline at 1-800-269-0271.
 - Order a copy of your Personal Earnings and Benefit Estimate Statement (PEBES) to check the accuracy of your work history on file with the Social Security Administration. You can obtain a PEBES application at your local Social Security Office or at the following site:
<http://www.ssa.gov/online/ssa-7004.Ddf>
- State Department – If your passport has been stolen, notify the passport office in writing. You can obtain additional information from the State Department website at:

<http://iravel.state.gov/reDortppt.html>

- If you are contacted by a collection agency about a debt for which you are not responsible, immediately notify them that you did not create the debt and that you are a victim of identity theft. Follow up with the collection agency and creditor in writing and include a copy of your police report, Identity Theft Affidavit, Letter of Dispute and a copy of the FACTA law.

www.ic3.gov

- Combined site for FBI and white collar crime to report Internet crimes including frauds.

IDENTIFY THEFT VICTIM INFORMATION

Please complete this form and return it to the police agency investigating your case as soon as possible. Identity theft cases required the assistance of all victims involved, as accurate personal account information is only known by the victim. In many cases an investigation cannot begin until the investigator receives the information requested in this form. The information provided will be used to organize the investigative case, determine where evidence might be found, develop a theory of how the identity crime occurred, and determine what financial institutions should be contacted in the course of the investigation.

| | | | |
|--|-------------------------------------|--|-----------------|
| Today's Date | Date of Incident | Law Enforcement Incident Number Filled out by L.E. | |
| First Name | Middle Name | Last Name | |
| Driver's License Number/State | Date of Birth | Social Security Number | |
| Home Street Address | City | State | Zip Code |
| Home Area Code & Telephone # | Area Code & Cell Phone # | Pager | |
| E-Mail Address | Employer | Work Address | |
| Work Area Code & Telephone # | | | |
| 1: How did you become aware of the identity crime? Briefly describe within this section. Describe in detail within the attached timeline. | | | |
| 2: On what date did the fraudulent activity begin? | | | |
| 3: When did the fraudulent activity begin? | | | |
| 4: What is the full name, address, birth date, and other identifying information under which the fraudulent activity was made? | | | |
| 5: Are you aware of any documents and/or identifying information that were stolen and/or compromised; I.E. credit- cards, ATM cards, checks, driver's license, etc? | | | |
| 6: To assist law enforcement in pinpointing when and by whom your information was compromised, it is of value to retrace your actions in recent months with regard to your personal info. This information is not solicited to "blame the victim" for the crime, but to further the investigation toward who might have stolen your personal or financial identifiers. What circumstances and activities have occurred in the last six months may have led to the theft of personal identification? Please include activities done by you and on your behalf by a member of your family or a friend. | | | |
| <input type="checkbox"/> I carried my Social Security Card in my wallet. | | | |
| <input type="checkbox"/> I carried my bank account passwords, PINs, or codes in my wallet. | | | |
| <input type="checkbox"/> I gave out my Social Security Number. If so, to whom? | | | |
| <input type="checkbox"/> My mail was stolen. Give approximate date. | | | |
| <input type="checkbox"/> I went away, and my mail was held at the Post Office or collected by someone else. | | | |
| <input type="checkbox"/> I traveled to another location outside my home area. Where did you go and when? | | | |
| <input type="checkbox"/> Mail was diverted from my home, either by a forwarding order or in a way unknown to me. | | | |

| |
|---|
| <input type="checkbox"/> I did not receive a bill as usual or a credit card bill failed to come in the mail. Which one? |
| <input type="checkbox"/> Documentation with my personal information was thrown in the trash without being shredded. |
| <input type="checkbox"/> Credit card bills, pre-approved credit card offers, or credit card "convenience" checks in my name was thrown away without being shredded. |
| <input type="checkbox"/> My garbage was stolen or gone through. |
| <input type="checkbox"/> My ATM receipts and/or credit card receipts were thrown away without being shredded. |
| <input type="checkbox"/> My password or PIN was given to someone else. |
| <input type="checkbox"/> My home was burglarized. |
| <input type="checkbox"/> My car was stolen or burglarized. |
| <input type="checkbox"/> My purse or wallet was stolen. |
| <input type="checkbox"/> My checkbook was stolen |
| <input type="checkbox"/> I recently provided my personal information to a new source. Please list source. |
| <input type="checkbox"/> My personal information was given to a telemarketer or telephone solicitor. Please list. |
| <input type="checkbox"/> My personal information was given to a door-to-door salesperson or charity fundraiser. Please list. |
| <input type="checkbox"/> A charitable donation was made using my personal information. Please list. |
| <input type="checkbox"/> My personal information was given to enter a contest or claim a prize I had won. Please list. |
| <input type="checkbox"/> I recently opened a new bank account or a new credit card account. Please list. |
| <input type="checkbox"/> I re-financed my house or property. Please list. |
| <input type="checkbox"/> Online purchases were made using my credit card. Purchases were made through what company? |
| <input type="checkbox"/> My personal information was recently included in an e-mail. |
| <input type="checkbox"/> I released personal information to a friend or family member. What is the name of that person? |
| <u>For any items checked above, please explain the circumstances of the situation in as much detail as possible.</u> |
| 7: How many purchases over the Internet (retailer or auction sites) have you made in the last six months? |
| 8: What Internet sites have you bought from? Please list all. |
| 9: In the last six months, whom has your Social Security number been given to? Please list all. |
| 10: Do your checks have your Social Security Number or Driver's License Number imprinted on them? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list retail names where checks have been tendered. |
| 11: Have you written your Social Security Number or Driver's License Number on any checks in the last six months or has a retailer written those numbers on a check? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list instances and retailers names. |

| |
|--|
| <p>12: Do you own a business(es) that may be affected by the identity crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list names of businesses.</p> |
| <p>13: Do you have any information on a suspect in this identity crime case? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How do you believe the theft occurred?</p> |
| <p>14: Please list all fraudulent accounts that were obtained by use of your name and/or personal identity info (if multiple accounts, please include on the time line)</p> <p>Type of account and account number – if a bank account please list the account numbers for checking and savings as well as any other accounts, such as brokerage, pension, etc.</p> <p>Were there any fraudulent charges? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>15: Please list all legitimate accounts in your name/personal identity information which have incurred fraudulent charges or activity.</p> |
| <p>16: Please list any documents fraudulently obtained in your name; I.E., Driver’s License, Social Security cards, etc.</p> |
| <p>17: Have you contacted the following organizations and requested a Fraud Alert be placed on your account? Check all that you have contacted about a Fraud Alert.</p> <p><input type="checkbox"/> Equifax – Date of contact? <input type="checkbox"/> TransUnion – Date of contact? <input type="checkbox"/> Experian – Date of contact? <input type="checkbox"/> Secretary of State / Department of Motor Vehicles. <input type="checkbox"/> Social Security Administration. <input type="checkbox"/> Other – please list.</p> |
| <p>18: Have you contacted a financial institution, concerning either legitimate or fraudulently opened accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please list. Please give the name of the financial institution and phone number, name of person with whom you spoke.</p> |
| <p>In the “Time Line” below please list all fraudulent activity that you are aware of to date, with the locations and addresses where fraudulent applications or purchases were made, such as retailers, banks, etc. List in chronological order, if possible.</p> <p>For example, “On 09/18/2007 I received a letter from MM Collections stating that I had accumulated \$5,000 worth of charges on American Express Account 1234356789. On 09/18/2007 I called American Express and spoke with Jennifer Martin. She informed me that the account was opened on 05/12/2007 by telephone. I did not open this account, even though it was in my name. The account address was 123 Main St, Anytown, NE. Ms Martin said she would send me an Affidavit of Forgery to complete and return to her.” Please include this information in the time line section.</p> |
| <p><u>TIME LINE</u></p> |
| <ul style="list-style-type: none"> • Please return to the Investigator: all account documents, letter, correspondence, phone records, credit reports, and other documents regarding this case. • Please make a copy of this completed form for your records. • Keep and maintain a detailed log of all your correspondence and contacts since completing this form. Keep and maintain all original copies of correspondence related to the crime. |

| | |
|-------------|------------|
| Authority: | 1935 PA 59 |
| Compliance: | Voluntary |

IDENTITY THEFT AFFIDAVIT

Victim Information

1. My Full Legal Name _____
(First) (Middle) (Last)
- 2: (If different from above) when the events described in this affidavit took place.

I was known as: _____
(First) (Middle) (Last)
- 3: My date of birth is: _____
(day/month/year)
- 4: My Social Security Number is _____
- 5: My driver's license state and number or identification card state and number are:

- 6: My current address is _____
(Street # Street Name Apt # City State Zip Code)
- 7: I have lived at this address since _____
(Month/Year)
- 8: (If different from above) when the events described in this affidavit took place, my address was: _____
(Street # Street Name Apt # City State Zip Code)
- 9: I lived at the address in Item 8 from _____ until _____
(Month/Year) (Month/Year)
- 10: My daytime telephone number is (____) _____

My evening telephone number is (____) _____

How the Fraud Occurred

Check all that apply, for items 11 through 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.

- 13: My identification documents (for example: credit cards, birth certificate, driver's license, Social Security card, etc) were:

Stolen or lost on or about _____
(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)

Address (if known)

Phone number/s (if known)

Additional information

- 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 was used or how the identity thief gained access to your information).

Victim's Law Enforcement Actions

17: (Check only one)

- I am willing to assist in the prosecution of the person(s) who committed this fraud.
- I am NOT willing to assist in the prosecution of the person(s) who committed this fraud.

18: (Check only one)

- I am authorizing the release of this information to law enforcement for the purposes of assisting them in the investigation and prosecution of the person(s) who committed this fraud.
- I am NOT authorizing the release of this information to law enforcement for the purposes of assisting them in the investigation and prosecution of the person(s) who committed this fraud.

19: (Check all that apply)

- I have I 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 information.

Agency #1 Name _____
(Agency name and city location)

Officer/Agency personnel taking report _____

Date of Report _____

Report number, if any _____

Phone number of agency (_____) _____

Email address, if any _____

Documentation Check List

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 do not 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 filed with the police or sheriff's office. 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.

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 this 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/Local criminal statutes, and may result in imposition of a fine or imprisonment or both.

Signature _____ Date _____

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 _____ Date _____

Printed Name _____

Telephone Number () _____

FRAUDULENT ACCOUNT STATEMENT

Completing the Statement

- Make as many copies of this page as you need. Complete a separate page for each company you are notifying and only send it to that company. Include a copy of your signed Affidavit.
- List only the account(s) you are 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, account a copy of that document (NOT the original).

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

| Creditor | Account # | Unauthorized Credit | Date | Amount |
|---|-------------|---------------------|------------|-------------|
| Example: Smith National Bank Address, city, state, zip code | 01234567-89 | Auto Loan | 01/05/2002 | \$15,959.54 |

| Creditor | Account # | Unauthorized Credit | Date | Amount |
|----------|-----------|---------------------|------|--------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

Billing Name: _____

Billing Address: _____

Account Number: _____

SAMPLE DISPUTE LETTER

Date
Your Name
Your Address
Your City, State, Zip Code

Complaint Department
Name of Company
Address
City, State, Zip Code

Dear Sir or Madam:

I am writing to dispute the following information in my file. I have circled the items I dispute on the attached copy of the report I received.

This item (identify item(s) disputed by name or source, such as creditors or tax court, and identify type of item, such as credit account, judgment, etc), is (inaccurate or incomplete) because (describe what is inaccurate or incomplete and why). I am requesting that the item be removed (or request another specific change) to correct the information.

Enclosed are copies of *(use this sentence if applicable and describe any enclosed documentation, such as a police report, Identity Theft Affidavit, payment records, court documents)* supporting my position. Please reinvestigate this *(these)* matter(s) and *(delete or correct)* the disputed item(s) as soon as possible.

In addition, pursuant to FACTA, as a victim of identity theft I am requesting that you provide me with copies of any and all applications and business transaction records related to the fraudulent account(s). The copies of the records can be *(mailed to me at the address listed above or faxed to the following number)*. In addition, please make these records available to the *(Holland Police Department or other law enforcement department)* upon their request.

Sincerely,

Your name
Enclosures: *(list what you are enclosing)*

SAMPLE DISPUTE LETTER FOR EXISTING ACCOUNTS

Date
Your Name
Your Address
Your City, State, Zip Code
Your Account Number

Name of Creditor
Billing Inquiries
Address
City, State, Zip Code

Dear Sir or Madam:

I am writing to dispute a fraudulent (*charge or debit*) that has been placed on my account in the amount of \$_____. I am a victim of identity theft and I did not make this (*charge or debit*). I am requesting that the (*charge be remove or the debit reinstated*), that any finance and other charges related to the fraudulent amount be credited, as well, and that I receive an accurate statement.

Enclosed are copies of (*use this sentence to describe any enclosed information, such as a police report or Identity Theft Affidavit*) supporting my position. Please investigate this matter and correct the fraudulent (*charge or debit*) as soon as possible.

In addition, pursuant to FACTA, as a victim of identity theft I am requesting that you provide me with copies of any and all applications and business transaction records related to the fraudulent accounts. The copies of the records can be (*mailed to me at the address listed above or faxed to the following number*). In addition, please make these records available to the (*law enforcement department*) upon their request.

Sincerely,

Your Name
Enclosures: (*List what you are enclosing*)