



It's easy to request your free Consumer Disclosure by mail. Simply follow these steps:

Complete the attached form

Make sure all of the following information is filled out:

- Name (required information)
- Current address (required information)
- Previous address (required if less than two years at current address)
- Date of birth (required information)
- Social Insurance Number (optional)
- Employment information (optional)
- Telephone number (optional)
- Signature (required information)

Gather required identifying information

TransUnion also requires both sides of two pieces of photocopied identification from the following list. Together these combined pieces **must contain your name, current address, date of birth and signature**. Do NOT send any original copies of identification. If submitting a request for more than one consumer in the same envelope, please ensure that the request and identification for each consumer are submitted on separate request forms and separate 8½" x 11" sheets of white paper.

Acceptable primary identification

We require one piece of valid, non-expired Canadian Government issued identification. Examples include:

- Drivers licence
- Canadian Passport
- Certificate of Indian Status
- Birth Certificate
- Permanent Resident Card
- Citizenship and Immigration form
- Health Card (excluding provinces of ON, MB, PEI)
- Old Age Security Card
- Department of National Defence card

Additional pieces of acceptable identification

Examples include:

- Utility bill indicating current address (within 60 days of issue)
- Credit card statement indicating current address (within 60 days of issue)
- Signed credit card
- Social insurance card
- Notice of Assessments (current tax year)
- Child Tax Benefits (current tax year)
- CNIB card
- T4 slip (current tax year)
- GST/HST Refunds (current tax year)

Together these combined pieces **must contain your name, current address, date of birth and signature**.

Mail form and identifying information

Please send the completed form and a photocopy of both sides of your two pieces of identifying information to:

All provinces except Quebec

TransUnion Consumer Relations Department
P.O. Box 338, LCD1
Hamilton, ON, L8L 7W2

Quebec residents

Centre De Relations Aux Consommateurs TransUnion
1 Place Laval Ouest
Suite 370
Laval, Quebec
H7N 1A1



CREDIT BUREAU REQUEST FORM

(If you would like to receive a copy of your credit report with this request, please complete fully **and** attach photocopies of both sides of 2 pieces of ID)

CONSUMER RELATIONS CENTRE
PO Box 338 LCD1
Hamilton, Ontario L8L 7W2
Tel (905) 525-0262/ (800) 663-9980
www.transunion.ca

You may also request your credit report by phone using our Interactive Voice Response system:
1(800) 663-9980 (Prompt 1)

The information on this form is requested to enable our associates to confirm your identity and access your file as mandated by consumer reporting legislation. If our system does not currently contain a file with the information you provided, your inquiry will result in a file being created or updated accordingly.

PERSONAL INFORMATION

Last Name:		First Name:	
Middle Name:	Date of Birth: (MM/DD/YYYY)	JR/SR	
Social Insurance Number: (Optional)		Home Phone Number: (Optional). No Cell Phones Please	
Referred By (Institution/Company/Website):			

ADDRESS INFORMATION

Present Address:			Apt #:
City:	Province:	Postal Code:	How Long:
Previous Address: (If Present is less than two years)			Apt #:
City:	Province:	Postal Code:	How Long:

EMPLOYMENT INFORMATION (OPTIONAL)

Employer:	How Long:
<i>I understand and consent to the information provided above being used to update my credit file. I understand that my identification will be used for authentication purposes and will be stored electronically.</i>	
<i>I am the person named above and I understand that I could be prosecuted under federal or provincial legislation for obtaining information from a consumer reporting agency by fraudulent means or under false pretences.</i>	
Signature:	Date:

Your request CANNOT be fulfilled without including both sides of 2 pieces of acceptable photocopied ID. Please see attached letter for list of acceptable ID.