Consumer Privacy: Incapacitated Adult Request Form

What Are My Options?

Fill out this form on behalf of an incapacitated adult to request one of the following:

- **Right to know**: Request to view personal information collected by Equifax within the past 12 months.*
- **Right to opt out**: Request that Equifax stop selling the personal information to third parties.
- **Right to delete**: Request that Equifax delete personal information collected from the incapacitated adult. Please note that not all personal information is subject to deletion (for example, information on the incapacitated adult's Equifax credit report is not subject to deletion rights and will not be deleted).
- **Right to opt in**: If you previously exercised the right to opt out of Equifax selling the incapacitated adult's personal information, you can permit Equifax to begin selling his or her personal information to third parties.

*You are allowed to make this request twice in a 12-month period. There are no restrictions on other requests.

What Do I Need?

You will need to provide copies of documents to verify your identity, the incapacitated adult's identity and your ability to legally act on the incapacitated adult's behalf.

**Required documents**

For the guardian, please provide ONE from each category:

**To verify your identity/address**
- A copy of your driver's license or other government-issued identification
- A copy of your Social Security card
- A copy of your birth certificate

**To verify you are the incapacitated adult's authorized representative**
- A copy of a court order
- A copy of a lawfully executed and valid Power of Attorney

For the incapacitated adult, please provide BOTH of the following:

- A copy of the incapacitated adult's Social Security card
- A copy of the incapacitated adult's birth certificate

What Should I Do?

Please fill out the second page of this form and send your completed form via U.S. mail, along with the above-listed documents, to:

Equifax Information Services LLC
P.O. Box 740041
Atlanta, GA 30348

Once we receive your request, we'll notify you via U.S. mail. Fulfillment of requests may take up to 45 days. Questions? Give us a call at (866) 295-6801.

Thank you for allowing us the opportunity to serve you.

Equifax Information Services LLC
Consumer Privacy: Incapacitated Adult Request Form

Please select one service from the below:

____ Right to know: Request to view personal information collected by Equifax within the past 12 months.

____ Right to opt out: Request that Equifax stop selling the personal information to third parties.

____ Right to delete: Request that Equifax delete personal information collected from the incapacitated adult. Please note that not all personal information is subject to deletion (for example, information on the incapacitated adult's Equifax credit report is not subject to deletion rights and will not be deleted).

____ Right to opt in: If you previously exercised the right to opt out of Equifax selling the incapacitated adult's personal information, you can permit Equifax to begin selling his or her personal information to third parties.

Representative Information (please print)

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Social Security number

Date of Birth (MM/DD/YYYY)

Phone number (optional)

Email address (optional)

Please note: Your phone number and email address will only be used to help find you in our system if you contact us.

Incapacitated Adult's Information (please print)

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Social Security number

Date of Birth (MM/DD/YYYY) Mailing address:

Equifax Information Services LLC
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Atlanta, GA 30348