

# Employment Data Freeze Placement

An employment data freeze is one step you can take to help prevent access to your employment data by a third party. To request an employment data freeze, simply complete and return this form along with a photocopy of the following:

**Proof of Identity – provide one (must include current/legal name):**

- Driver's License (Must Be Valid)
- State or Government Identification Card (Must Be Valid)
- Social Security Identification Card
- Military Identification Card
- Passport (U.S. Only & Must Be Valid)
- W-2 or 1099 Form (Current Year)
- Paystubs - Must be dated within the last 60 days
- Birth Certificate

**Proof of Address – provide one (must include current mailing address and be dated within the last 60 days)**

- Utility Bill (phone, water, gas, electric, trash or sewer, etc.)
- Paystub
- Housing Rental Agreement or Mortgage document - Must be current & in your name
- Driver's License
- W-2 or 1099 Form (Current Year)

**\*Indicates a mandatory field. If you are requesting an Employment Data Freeze for a minor or incapacitated individual, please contact us through The Work Number Employee Service Center: 1-866-222-5880; TTY-hearing impaired: 1-800-424-0253 Mon-Fri; 9:00 a.m. – 8:00 p.m. ET**

**1**

After completing this form, please return it with the required proof documentation by mail or email.

**If using email, be sure to only send the completed form via our Secure Email channel, Virtru. If you have not received a secure email, send an email to the following, [TWNFreeze@equifax.com](mailto:TWNFreeze@equifax.com), requesting a secure email to return the form and proof documentation.**

Equifax Workforce Solutions  
ATTN: Employment Data Freeze  
3470 Rider Trail South  
Earth City, MO 63045  
Email: [TWNFreeze@equifax.com](mailto:TWNFreeze@equifax.com)

**Please read and sign the following statement. Your signature acknowledges your agreement.**

**2**

By submitting this form, I certify that I am the individual completing this form and state that all of the information contained is true to the best of my knowledge.

\*Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**3**

\*Name: \_\_\_\_\_  
First Last Suffix

\*Mailing Address (residence): \_\_\_\_\_

\*City, State, Zip Code: \_\_\_\_\_

Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

\*Your Social Security Number:  -  -

**Your request will be processed within 3 days of receipt and confirmation of placement and a PIN number will be sent to you in the mail.** You must provide us with your PIN in order to remove your freeze. Your PIN is for your personal use only and should not be provided to potential verifiers or service providers.

**Questions: Contact The Work Number Employee Service Center: 1-866-222-5880; TTY-hearing impaired: 1-800-424-0253 Mon-Fri; 9:00 a.m. – 8:00 p.m. ET**