OF PROTECTED CONSUMER FREEZE:

A protected consumer is someone under the age of 16 or an incapacitated adult. The protected consumer freeze allows the parent, guardian or representative of the protected consumer to create a credit file in that person's name and place a freeze on it, helping to deter identity theft. This protective measure is FREE. Remember to place your request with EACH of the three credit reporting agencies listed below. The credit reporting agencies must place the freeze within 15 days of receiving your request.

	Parent/Guardian Information REQUIRED	Protected Consumer Information REQUIRED	SEND TO
EQUIFAX	 Send your written request to place the freeze, along with: complete name, including any suffix (e.g. Jr., Sr., etc.) complete address copy of a Social Security card, OR a certified OR official copy of a birth certificate copy of a driver's license, an ID card issued by the Motor Vehicle Administration OR any other government issued identification, OR a copy of a utility bill that shows name and home address.; AND 	 Send ALL of the following with your request: complete name, including any suffix (e.g. Jr., Sr., etc.) complete address copy of Social Security card FOR MINOR, a certified <u>OR</u> official copy of a birth certificate FOR PERSON UNDER GUARDIANSHIP <u>OR</u> POA, an order issued by a court of law, a lawfully executed and valid Power of Attorney, <u>OR</u> a written, signed and notarized statement that expressly describes your authority to act on behalf of the protected consumer. 	Equifax Security Freeze P.O. Box 105788 Atlanta, Georgia 30348



SOUTH CAROLINA DEPARTMENT OF CONSUMER AFFAIRS

2221 Devine Street, Ste. 200 • Columbia, SC 29205 • 800.922.1594 • www.consumer.sc.gov



	Parent/Guardian Information REQUIRED	Protected Consumer Information REQUIRED	SEND TO
EXPERIAN	 Send your written request to place the freeze, along with: complete name, including any suffix (e.g. Jr., Sr., etc.) Social Security number AND date of birth current mailing address AND previous addresses for the past two years copy of Gov't issued ID card, such as a driver's license, state ID card, etc. one copy of a utility bill, bank OR insurance statement, etc. [Make sure that each copy is legible, displays your name and current mailing address, and the date of issuestatement dates must be recent]. Credit card statements, voided checks, lease agreements, magazine subscriptions OR postal service forwarding orders will not be accepted as proof; AND 	 Send ALL of the following with your request: complete name, including any suffix (e.g. Jr., Sr., etc.) copy of the minor's Social Security card date of birth (copy of the minor's birth certificate) current mailing address AND previous addresses for the past two years. 	Experian P.O. Box 9554 Allen, TX 75013

	Parent/Guardian Information REQUIRED	Protected Consumer Information REQUIRED	SEND TO
TRANSUNION	Send a written request to place a "protected consumer freeze" on the named individual's file, including one of the following qualifying documents indicating that the requester has Proof of Authority of the named individual: • Court Order • Power of Attorney • written, notarized and signed Description of Authority; AND One of the following: • copy of Social Security card • a copy of a Gov't Issued ID Card, such as a driver's license, state ID card, etc. • a copy of a bill that shows a name and home address • copy of Birth Certificate; AND	 One of the following: copy of Social Security card a copy of a Gov't Issued ID Card, such as a driver's license, state ID card, etc. a copy of a bill that shows a name AND home address copy of Birth Certificate 	TransUnion Protected Consumer Freeze P.O. Box 380 Woodlyn, PA 19094