
The following are instructions on:

HOW TO CORRECT AN INACCURACY ON YOUR EQUIFAX CREDIT REPORT?

First you will need to complete a Consumer Credit Report Update Form on the Equifax Website. Please follow these simple steps:

- 1) Type: www.Equifax.ca <<http://www.Equifax.ca>> in the address line of your Internet browser
- 2) On the Home Page Click "About Equifax" in the top middle of the page.
- 3) On the Left Hand Menu Click "*Personal Information Solutions*"
- 4) On the Bottom Left Hand Side of the Page Click "Get Started" under Correct Errors on your Equifax Credit Report.
- 5) Follow the instructions listed and click on "*Consumer Credit Report Update*"
- 6) Complete the form as required.
- 7) Print the form and do the following. (As reported on the Equifax Website)

Telephone Equifax at 1 (800) 465 7166 between 8:00am and 5:00pm ET

Write to and send Consumer Credit Report Update Form to:

Equifax Canada Inc.
Consumer Relations Department
Box 190 Jean Talon Station
Montreal, PQ H1S 2Z2

By Fax (514) 355-8502

After they receive your call and/or letter request, they will begin the Dispute Resolution Process.

First, they review and consider the information you have sent to them about your dispute. If this initial review does not resolve the problem, they will continue their investigation. This involves contacting the submitter of the disputed information on your behalf to review the details. The disputer will investigate and report their conclusions to Equifax. Based on their findings, Equifax may make changes to your credit file. If the disputed information is correct, they will not make any changes.

Equifax will send you a revised credit report if changes are made as a result of the dispute resolution process.

They will also send your revised credit file to any company that request your credit file in the 60 days prior to the change. In some cases, it may be a period longer than 60 days.



CONSUMER CREDIT REPORT UPDATE FORM

EQUIFAX UNIQUE NUMBER: _____

DATE: _____

Upon review of your personal credit report, this form must be completed if you wish to make corrections.

Name:

Last Name

First Name

Initial

Suffix (Sr., Jr., etc.)

Current Address:

Street Address

Apt.

City

Province

Postal Code

Previous Address:

Street Address

Apt.

City

Province

Postal Code

Date of Birth:

Month/Day/Year

Social Insurance No.
Optional

Current Employment: _____

Public Record Information

Courthouse Name or Agency _____

Case Number or Account or Plaintiff _____

Reason for Investigation: Not Mine Satisfied Dismissed Discharged Released

Other (Please explain) _____

Courthouse Name or Agency _____

Case Number or Account or Plaintiff _____

Reason for Investigation: Not Mine Satisfied Dismissed Discharged Released

Other (Please explain) _____

Credit Account Information

Company Name _____

Account Number _____

Reason for investigation:

Not Mine Paid in full Account Closed Transferred/Refinanced Current/Previous Rating Incorrect

Other (Please explain) _____

Company Name _____

Account Number _____

Reason for Investigation:

Not Mine Paid in full Account Closed Transferred/Refinanced Current/Previous Rating Incorrect

Other (Please explain) _____

Signature: _____

Daytime Phone #: _____

Have you included photocopies of all necessary documents and identification to update your personal Credit Report?
(Ex: receipts, legal documents, 2 pieces of valid identification, including proof of current address)

Equifax will verify the necessary information and mail you a confirmation.

Please check here if you would like a revised copy of your credit report sent to creditors who have recently accessed your file.
(Please provide a contact name, fax and phone number for each creditor)

Please visit our Consumer Information Center at www.equifax.ca for more information

National Consumer Relations
P.O. Box 190, Station Jean-Talon,
Montreal, Quebec H1S 2Z2
Facsimile: (514) 355-8502
Tel: 1-877-323-2598 (514-493-2598)
Email: consumer.relations@equifax.com

There is another credit reporting company in Canada:
Trans Union of Canada
P.O. Box 338 L.C.D.I.
Hamilton, Ontario, L8L 7W2
Tel: 1-800-663-9980
Tel: 1-877-713-3393 (for Quebec)

Company Name:

Account #:

- No Knowledge of this Account
- Included in Bankruptcy
- Paid Before Collection/Write off
- Account Not Reporting

Other:

Company Name:

Account #:

- No Knowledge of this Account
- Included in Bankruptcy
- Paid Before Collection/Write off
- Account Not Reporting

Other:

Company Name:

Account #:

- No Knowledge of this Account
- Included in Bankruptcy
- Paid Before Collection/Write off
- Account Not Reporting

Other:

Company Name:

Account #:

- No Knowledge of this Account
- Included in Bankruptcy
- Paid Before Collection/Write off
- Account Not Reporting

Other:

ADDITIONAL COMMENTS

To investigate your dispute we will contact the source of the disputed information by phone and/or fax. Each source will be advised as to the nature of your dispute and will be requested to verify the accuracy and/or the completeness of the information they reported. If our investigation does not resolve your dispute you may add an explanation statement to your report. All provinces allow a statement added of up to 100 words, except Saskatchewan - 200 words. If you would like to add a statement, please print the statement on a separate sheet of paper and attach it to this form.

****RETURN THIS FORM TO THE ADDRESS LISTED AT THE TOP OF YOUR REPORT****

If your credit report changes after our investigation, or if a consumer statement is added, an amended report will be sent according to provincial guidelines to companies in receipt of your credit file. You will also receive an updated copy of your report. We recommend that you do not apply for credit while your dispute is pending.

I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENTS AND HAVE PROVIDED INFORMATION THAT IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND ACCURATE. I AUTHORIZE YOU TO FOLLOW THE PROCEDURES OUTLINED ABOVE IN AN ATTEMPT TO VERIFY THE INFORMATION THAT I AM DISPUTING.

Signature

Date

The following are instructions on:

HOW TO CORRECT AN INACCURACY ON YOUR TRANS UNION CREDIT REPORT?

You can dispute your credit information or update personal information on our credit report in two ways:

- By Phone:** Trans Union 1.800.663.9980
What you will need before calling
- Full Legal Name
 - Social Insurance Number
 - Date of Birth
 - Current Address
 - Previous Address
 - Company Name of Disputed item (as listed on your credit report)
 - Reason for your Dispute (paid in full, cleared in bankruptcy etc)

By Mail:

Please follow these simple steps:

- 1) Type: www.TransUnion.ca <<http://www.TransUnion.ca>> in the address line of your Internet browser
- 2) On the Home Page Click "Personal" in the top left of the page.
- 3) On the Bottom Left Hand Side click "*Learn More*" under the title Credit Disputes.
- 4) Click on Mail on the Left Hand Side
- 5) Follow the instructions listed and download and print the "Investigations" form.

Write to and send to:

Trans Union Consumer Relations Department
P.O. Box 338, LCD1
Hamilton, Ontario
L8L 7W2



Consumer Relations Center
P.O. Box 338, LCD1
Hamilton, Ontario
L8L 7W2

Contact Information
Telephone: 1-800-663-9980
Fax: (905) 527-0401
www.transunion.ca

INVESTIGATION REQUEST FORM

The following information is gathered to assist in verifying your dispute. Please ensure to supply the required information and complete the authorization on the back of the form.

<p>Consumer's Name</p> <p>Last First Middle Jr/Sr</p> <hr/> <p>Current Address:</p> <p>Number & Street</p> <p>Apartment City Prov/Postal</p> <hr/> <p>Date of Birth</p> <hr/> <p>Employment (optional)</p> <hr/> <p>Home Phone (optional)</p>	<p>Social Insurance Number (Optional)</p> <hr/> <p>Previous Address:</p> <p>Number & Street</p> <p>Apartment City Prov/Postal</p> <hr/> <p><i>If any of the personal information supplied on this form is not listed in my credit file, I request that it be incorporated into TransUnion's file.</i> YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<p><i>Signature of Consumer (required)</i> _____ <i>Date</i> _____</p>	

IF YOU DISAGREE WITH ACCURACY OR COMPLETENESS OF YOUR INFORMATION, PLEASE NOTE BELOW. USE ADDITIONAL PAPER IF NECESSARY, ENSURING THAT EACH ADDITIONAL PAGE CONTAINS YOUR SIGNATURE.

Company Name:

Account #:

- No Knowledge of this Account Paid In Full
- Included in Bankruptcy
- Paid Before Collection/Write off
- Account Not Reporting

Other:

Company Name:

Account #:

- No Knowledge of this Account Paid In Full
- Included in Bankruptcy
- Paid Before Collection/Write off
- Account Not Reporting

Other: