

request for investigation of Experian RentBureau Rental History Report

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rst name: MI:	Last name:	Gen (SR, etc.):_
ther name(s) used for credit:		
ocial Security number:	Date of birth:	
none number(s):		
urrent mailing address:		Apt:
ty:	_ State: ZIP code:	
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First dispute Company name: Account number: I believe this item is incorrect because (Choose only one): Payment never late Account closed Paid in full - On what date? //	Second dispute Company name: Account number: I believe this item is incorrect because (Ch Payment never late Account close Paid in full - On what date? //	oose only one): sed / er:
First dispute Company name: Account number: I believe this item is incorrect because (Choose only one): Payment never late Account closed Paid in full - On what date? // Account included in bankruptcy - Chapter:	Second dispute Company name: Account number: Account number: I believe this item is incorrect because (Ch Payment never late Account close Paid in full - On what date? / Account included in bankruptcy - Chapter	oose only one): sed / er:
First dispute Company name:	Second dispute Company name: Account number: Account number: I believe this item is incorrect because (Ch Payment never late Account clos Paid in full - On what date? / Account included in bankruptcy - Chapter Filing date: // Not my account	oose only one): sed / er:
First dispute Company name: Account number: I believe this item is incorrect because (Choose only one): Payment never late Account closed Paid in full - On what date? // Account included in bankruptcy - Chapter: Filing date: // Not my account /	Second dispute Company name: Account number: Account number: I believe this item is incorrect because (Ch Payment never late Account clos Paid in full - On what date? / Account included in bankruptcy - Chapter Filing date: / Not my account	oose only one): sed / er:

Please provide any additional documentation to assist in this investigation, such as cancelled checks, utility bills and legal documentation. You may make copies of this form to submit additional disputes or use a separate piece of paper. Send copies of any documentation you send to us and always retain your original documents.

contact information

Mail this form to P.O. Box 26, Allen, TX 75013; or call us at 877 704 4519.