JACKSON HOLE AIRPORT

Dear Transportation Security Officer Applicant:

Thank you for your interest in joining the Jackson Hole Airport Board (JHAB) Security Screening Team. The Jackson Hole Airport has a contract with the Transportation Security Administration (TSA) to provide security screening services. If you are selected as a Transportation Security Officer (TSO), you will play an important part in the overall mission of the Department of Homeland Security (DHS) by contributing to the daily security requirements at the Jackson Hole Airport. TSOs at the Jackson Hole Airport are not federal employee but work directly for the Jackson Hole Airport Board.

JHAB may apply a gender-specific (male or female) hiring preference to fill TSO positions in order to meet security mission and same gender pat-down job-related requirements. Where it is necessary to apply the hiring preference, candidates of the needed gender will be given priority in the scheduling of the computer-based aptitude test, airport assessments, processing and selection.

To assist you in your consideration of employment as a TSO at Jackson Hole Airport, we have outlined some important information for your review:

The starting wage for a TSO is \$18.50 per hour. Full-time, year-round employees are currently eligible for full family health insurances (which currently includes dental and vision coverage), Wyoming Retirement, and paid leave (personal and sick). All medical insurance premiums are paid 100% by JHAB. Additionally, Full-time employees are eligible for a 500.00 per month transportation/housing allowance.

Our officers are responsible for providing frontline security and protection for air travelers. Tasks include but are not limited to: identifying dangerous objects in bags, cargo, and/or on passengers, and preventing these objects from being transported onto aircrafts.

TSA requires that applicants meet the following criteria:

- 1) Be a United States Citizen.
- 2) Be at least 18 years of age.
- 3) Have a High School Diploma or GED.
- 4) Be able to read, write and understand the English language.
- 5) Be physically capable of performing the job.
- 6) Pass a color vision test.
- 7) Be able to hear alarms generated by screening equipment.
- 8) Be registered with Selective Service as required by law [The law requires virtually all Male U.S citizens (regardless of where they live) and male immigrants residing in the

- U.S (permanent resident aliens), to register with in 30 days of the 18th birthday. Late registrations are accepted up to 26 years of age.]
- 9) Be available to work weekends, holidays and rotating shifts between 5:00am and 8:00pm.

The hiring process includes the following steps:

- 1) Credit Check: applicants will be required to submit to a credit check performed by TSA.
 - a. The standard for finding an applicant ineligible based on financial responsibility is based on:
 - i. Cumulative "bad debt" that exceeds \$7500 or any debt associated with a Federal and/or state tax lien, or any amount of back child support payments.
 - ii. Bad Debt is defined as past due accounts consisting of accounts placed for collection, repossessions, foreclosures, etc.
- 2) Screening Assessment Battery (SAB): Applicants will be required to pass a computerized test that measures language aptitude and object recognition.
- 3) Color Vision Test: Applicants must pass a color vision test.
- 4) Interview: Applicants will be interviewed by a JHAB staff member.
- 5) Fingerprints: Applicants will be fingerprinted to determine criminal history.
- 6) Preliminary Criminal History Check.
- 7) E-QIP: Applicants will fill out an extensive on-line background investigation form to be used by TSA to administer a background investigation.
- 8) Self Certification: Applicants will sign a form certifying their physically able to perform the job.
- 9) Medical Exam and Drug Test: Applicants will have a medical exam and drug test to assure compliance with TSA standards at a medical provider of our choice.

In addition to the application, you will find a set of release forms, these forms must be filled out to allow TSA to perform a credit check. The credit check must be completed prior to any applicant being scheduled for testing.

If while considering the above information, you have questions, please contact us: Sallie DuMond, 307-733-5694 or Jamey Miles, 307-733-5760. Thank you for your application.



Jackson Hole Airport 1250 E. Airport Rd PO Box 159

Jackson, WY 83001

Transportation Security Officer Employment Application

	Applica	ant Information	Todovis	-44	
Full Name:			Today's Date:		
	Last First	M.I.			
Address:	Street Address	City Ste	ate.	Zip Code	
	Olioti Addross	Oity Sie	216	Zip Code	
	Mailing Address	City S	tate	Zip Code	
Phone:	-	Email		· · · · · · · · · · · · · · · · · · ·	
Date Availat	ole: Position Applied For: _				
Type of Emp	ployment Desired: Full-Time YES NO	☐ Part-Time ☐ Year-Round [] Seasona	al 🗌	
Have you ev	er worked for this company?	If yes, when?	The Association of the Control of th		
Have you ev	ver been convicted of a felony?				·····
Are you a cit	tizen of the United States?		YES	NO	
If hired, are	you able to show verification of citizenship a	s required on INS Form I-9?	YES	NO	
Are you regi	stered for the Selective Service as required	by law? (Male applicants only)	YES	NO	
	form all job functions specified in the positio onable accommodation?	n's job description with or	YES	NO	
	form all the tests/demonstrations/interviews out reasonable accommodation?	required in the hiring process	YES	NO	
Are you at le	ast 18 years of age?		YES	NO	
Do you objec	ct to working rotating shifts?	•	YES	NO D	
Do you objec	ct to working weekends?		YES	NO	
Do you objec	ct to working holidays?		YES	NO	
	your present employer for a reference?		YES	NO	
Hire may be esting. If hir	subject to DOT drug and alcohol testing, inc red for a position that requires drug and alco	cluding pre-employment drug whol testing, will you submit to	YES	NO	

	Educa	ation		
High School	: City, State:	:		
From:	To: Did you graduate?	YES	NO	Diploma::
College:	City, State:			
From:	To: Did you graduate?	YES	NO	Degree:
Other:	City, State:	•		
From:	To: Did you graduate?	YES	NO	Degree:
		inces		
Full Name:	ree professional references.			Phone:
Full Name:				Relationship:
Company:				Phone:
Address:				
Full Name:			•	Relationship:
Company:				Phone:
Address:				
	Previous En	nployi	ment	
List previous	10 years of employment with most recent position	on first.	Includ	de additional sheets as necessary.
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting Sa	ılary: <u>\$</u>		Ending Salary:\$
Responsibilit	ies:		· · · · · · · · · · · · · · · · · · ·	
From:	To:	Reason	n for Le	eaving:
May we cont	act your previous supervisor for a reference?	YES		NO D
				<u> </u>
Company:				Phone:
Address:				Supervisor:
Job Title:	Starting Sa	alary: <u>\$</u>		Ending Salary:\$

Responsibilities:					· · · · · · · · · · · · · · · · · · ·
From: To:		Reason f	or Leaving:		
•	previous supervisor for a reference?	YES	NO 🔲	·	
	The state of the second	es light state of the light	Service and the service of the		t in nes difficulty extitutes directors
Company:				Phone:	
Address:		-	Sı	upervisor:	
Job Title:	Starting S	Salary:\$		Ending Salary: <u>\$</u>	
Responsibilities:					for the state of t
From:	To:	Reason fo	or Leaving:		
	Other In	formation			
Do you have any milit to the position you are	tary experience relevant e applying for?				
Language skills (note	fluency):				
List computer prograr	ns and proficiency:				
Other relevant skills:					
Other interests or hob	bies:				
Where did you hear a	bout this job?				
Additional remarks:					

Disclaimer and Signature

Employees of the Jackson Hole Airport Board are employed "At-Will". Employees have the right to end their work relationship with the employer, with or without advance notice for any reason. The employer has the same right.

The Jackson Hole Airport is an EEO/AA employer and does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on jobrelated factors.

For certain positions, an offer of employment may be contingent on passing a job-related physical test.

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

The Jackson Hole Airport is a Drug Free Workplace and all employees are subject to our Drug & Alcohol Policies.

If employed, I agree that material created and produced during my employment are the exclusive property of the company to use and/or sell and that subsequent to my employment with this company I will not disclose, use or reveal any confidential information related to the company without first obtaining written consent from an officer of the company.

I consent to the Jackson Hole Airport to verify job-related information provided by me as needed in connection with this application.

5	Signature:	Date:
	Received by:	

APPLICANT AFFIRMATIVE ACTION INFORMATION

It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to race, color, religion, national origin, sex, age, veteran status or disability. As an affirmative action employer under E.O. 11246 we invite all applicants to identify themselves as indicated below.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

PLEASE PRINT						
Name				Date		
	Last	First	Middle			
Position appl	lied for (list only	one)				
☐ I elect	t not to identify					
Racial origin	(You may mar	k one or more of the	e following):			
☐ White-	—A person having	origins in any of the orig	ginal peoples of Europe, the	Middle East, or North Africa.		
			aving origins in any of the o tains tribal affiliation or con	riginal peoples of North and South nmunity attachment.		
☐ Black (or African Ameri	can—A person having or	igins in any of the black rac	ial groups of Africa.		
				Southeast Asia, or the Indian subcontinent in, the Philippine Islands, Thailand, and		
	Hawaiian or Oth other Pacific Islan		person having origins in any	of the original peoples of Hawaii, Guam,		
Ethnicity:						
Hispan or origin,	ic or Latino—A pregardless of race.	erson of Cuban, Mexica	n, Puerto Rican, South or Ce	entral American, or other Spanish culture		
Sex: ☐Ma	le 🗌 Fema	le				
Signature						



FAIR CREDIT REPORTING ACT AUTHORIZATION

Fair Credit Reporting Act of 1970, as amended)

PLEASE TAKE NOTICE THAT ONE OR MORE CONSMER CREDIT REPORTS MAY BE OBTAINED FOR EMPLOYMENT PURPOSES PURSUANT TO THE FIAR CREDIT REPORTING ACT, AS AMENDED, 15 U.S.C., §1681, ET SEZ. SHOULD A DECISION TO TAKE ANY ADVERSE ACTION AGAINST YOU BE MADE, BASED EITHER IN WHOLE OR IN PART ON THE CONSUMER CREDIT REPORT, THE CONSUMER REPORTING AGENCY THAT PROVIDED THE REPORT PLAYED NO ROLE IN THE AGENCY'S DECISION TO TAKE SUCH ADVERSE ACTION.

Information provided by you on this form will be furnished to the consumer reporting agency in order to obtain information in connection with an investigation to determine your (1) fitness for employment, (2) clearance to perform contractual service for the Federal Government, and/or (3) security clearance or access. The information obtained may be disclosed to other Federal agencies for the above purposes and in fulfillment of official responsibilities to the extent that the law permits such disclosure.

I hereby authorize the Jackson Hole Airport Board to obtain such report(s) from any consumer/credit reporting agency for employment purposes.

Signature (sign in ink)		Full Name (pri	nt legibly)
Date Signed	Date of Birth (n	nm/dd/yyyy)	Social Security Number
Current Address (Street, City)		State	Zip Code
If at current address less than 2	years, please en	ter former addre	ess (Street/City/State/Zip)

Privacy Act Statement

<u>Purpose</u>: Your Authorization, including your Social Security number, is needed to permit JHAB to obtain a copy of your credit report. Your credit report will be used to determine your suitability for employment in the position for which you are being considered. Completing this authorization, including providing your Social Security number, is voluntary; however, failure to do so may affect your employment prospects, eligibility for continued employment, ability to obtain a security clearance or work on a government contract.

Routine Uses: Information you provide will be disclosed to consumer reporting agencies for the purpose of obtaining your credit report. This information may also be disclosed to JHAB contractors when necessary to perform a function or service related to this record for which they have been engaged.



AUTHORIZATION FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I authorize the Jackson Hole Airport Board (JHAB), through its employees, agents, or contractor, to obtain any information relating to my activities from criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, or other relevant sources of information. This information may include, but is not limited to, any criminal history record information, and financial and credit information.

I understand that the purpose of this authorization is to permit JHAB to conduct a background investigation for the purpose of making a determination of suitability or eligibility for employment and/or a security clearance, or for work on a government contract. I authorize the custodians of records and other sources of information pertaining to me to release such information upon request of JHAB, or its contractor, regardless of any previous agreement to the contrary. I understand that the information released by custodians of records and other sources of information is for official use and only for the purposes stated above. This information may be redisclosed by JHAB only as authorized by law.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with JHAB, whichever is sooner.

Signature (sign in ink)	Full Name (print legibly)		Date Signed	
Other Names Used	Social S	Security Number	Mother's Ma	iden Name
Current Address (Street, City)	State	Zip Code	Home Telep (Including A	hone Number rea Code)

Privacy Act Statement

<u>Purpose</u>: Your Authorization and this information, including your Social Security number, is needed to permit JHAB to complete a background investigation to establish that applicants and incumbents either employed by JHAB or working under contract are suitable for the job and/or eligible for a public trust or sensitive position, and/or a security clearance. Completing this authorization, including providing your Social Security number, is voluntary; however, failure to do so may affect your employment prospects, eligibility for continued employment, ability to obtain a security clearance or work on a government contract.

Routine Uses: Information you provide and copies of this form may be disclosed to any potential source from which information is requested in the course of this background investigation to the extent necessary to identify you, inform the source of the nature and purpose of the investigation, and to identify the type of information requested. This form may also be disclosed the JHAB contractors when necessary to perform a function or service related to this record for which they have been engaged.



FAIR CREDIT REPORTING ACT

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Employer ("the Company") may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report is an employment history or verification. These searches will be conducted by TruDiligence, LLC, 3190 S Wadsworth Blvd, Suite 260, Lakewood, CO 80227, 800-580-0474. The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports throughout the course of your employment to the extent permitted by law.

Signature:	Date:
Printed Name:	SSN:

BACKGROUND CHECK AUTHORIZATION

APPLIC	ANT Complete the following information as accurate	ely as possible. (Please Print Clearly.)
Last:	· · · · · · · · · · · · · · · · · · ·	First:	MI:
SSN*:_		D.L. #:	State:
Birth date	9*:	Phone:	
ACKNO	WLEDGMENT AND AUTHORIZATION FOR BACKG	ROUND CHECK	
and A S understa reports" authoriz universit insurance Suite 26 Employe characte behalf, f release any rele confiden causes authorizato this au	wledge receipt of the FCRA required documents DISC UMMARY OF YOUR RIGHTS UNDER THE FAIR Cland both of those documents. I hereby authorize the obtat any time after receipt of this authorization and, if I are, without reservation, any law enforcement agency, are y (public or private), information service bureau, emple company to furnish any and all background information, Lakewood, CO 80227, 800-580-0474, or another erritself. I understand that these files may contain near and personal reputation; therefore I agree to defend from any and all liability arising through the investigation of my confidential report to any Third Party directly involves to a third party will not occur until that party has tial information. I agree to release, hold harmless, and of action, damages, or expenses resulting from: any ation; the unauthorized use of this information by the Thuthorization.	REDIT REPORTI taining of "consun mired, through administrator, stare boyer, workers of the considering of the considering and hold harmles on of my backgrous of my backgrous of the hiring completed a cert of the consultation of the hiring completed a cert of the consultation of the hiring completed a cert of the consultation of the hiring completed a cert of the consultation of the c	NG ACT and certify that I have read and ner reports" and/or "investigative consumer out my employment. To this end, I hereby the or federal agency, institution, school or ompensation bureau, testing laboratory or ruDiligence, LLC, 3190 S Wadsworth Blvd, tion acting on behalf of Employer, and/or on about my background, mode of living, is TruDiligence and any agent acting on its fund. If applicable, I hereby authorize the or placement process and understand that iffication regarding the use and viewing of igence from any liability, claims, demands, nation to the Third Party pursuant to this y actions taken by the Third Party pursuant
backgrou	und check process. I agree that a facsimile ("fax"), eleas the original.		
Employ	ork applicants only: Upon request, you will be inform er, and if such report was requested, informed of the need the report. By signing below, you acknowledge rece	ame and address	s of the consumer reporting agency that
	ork City applicants only: You acknowledge and author state or local law to you at the address(es) and/or em		
Minnes	ota and Oklahoma applicants only:		
	Please check this box if you would like to receive a co	py of a consumer	report if one is obtained by the Company.
	nia applicants only: Under California Civil Code section with proper identification, as follows:	on 1786.22, you a	are entitled to find out what is in the CRA's
•	In person, by visual inspection of your file during norm request a copy of the information in person. The CRA providing you with a copy of your file.		
0	A summary of all information contained in the CRA file Code will be provided to you via telephone, if you h telephone disclosure, and the toll charge, if any, for th	ave made a writt	en request, with proper identification, for
•	By requesting a copy be sent to a specified addressee mailings shall not be liable for disclosures to third part the CRAs.		

"Proper Identification" includes documents such as a valid drive identification card, and credit cards. Only if you cannot identify additional information concerning your employment and personal or will provide trained personnel to explain any information furnished coded information contained in files maintained on you. This wr provided to you for visual inspection. You may be accompanied by reasonable identification. The CRA may require you to furnish a discuss your file in such person's presence.	yourself with such information may the CRA require family history in order to verify your identity. The CRA to you and will provide a written explanation of any itten explanation will be provided whenever a file is yone other person of your choosing, who must furnish
Please check this box if you would like to receive a copy or report at no charge if one is obtained by the Company who California law.	f an investigative consumer report or consumer credit enever you have a right to receive such a copy under
Signature:	Date:
Printed Name:	SSN:

*This information (Birth date and SSN) will be used for background screening purposes only and will not be taken into consideration in making any employment decisions.

Para información en español, visite <u>www.consumerfinance.gov/learnmore</u> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - o a person has taken adverse action against you because of information in your credit report;
 - o you are the victim of identity theft and place a fraud alert in your file;
 - o your file contains inaccurate information as a result of fraud;
 - o you are on public assistance;
 - o you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.	b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480
c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations	c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
d. Federal Credit Unions	d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

Para información en español, visite <u>www.consumerfinance.gov/learnmore</u> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

Remedying the Effects of Identity Theft

You are receiving this information because you have notified a consumer reporting agency that you believe that you are a victim of identity theft. Identity theft occurs when someone uses your name, Social Security number, date of birth, or other identifying information, without authority, to commit fraud. For example, someone may have committed identity theft by using your personal information to open a credit card account or get a loan in your name. For more information, visit www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The Fair Credit Reporting Act (FCRA) gives you specific rights when you are, or believe that you are, the victim of identity theft. Here is a brief summary of the rights designed to help you recover from identity theft.

- 1. You have the right to ask that nationwide consumer reporting agencies place "fraud alerts" in your file to let potential creditors and others know that you may be a victim of identity theft. A fraud alert can make it more difficult for someone to get credit in your name because it tells creditors to follow certain procedures to protect you. It also may delay your ability to obtain credit. You may place a fraud alert in your file by calling just one of the three nationwide consumer reporting agencies. As soon as that agency processes your fraud alert, it will notify the other two, which then also must place fraud alerts in your file.
 - Equifax: 1-800-525-6285; www.equifax.com
 - Experian: 1-888-397-3742; <u>www.experian.com</u>
 - TransUnion: 1-800-680-7289; www.transunion.com

An <u>initial fraud alert</u> stays in your file for at least one year. An <u>extended alert</u> stays in your file for seven years. To place either of these alerts, a consumer reporting agency will require you to provide appropriate proof of your identity, which may include your Social Security number. If you ask for an <u>extended alert</u>, you will have to provide an <u>identity theft report</u>. An <u>identity theft report</u> includes a copy of a report you have filed with a federal, state, or local law enforcement agency, and additional information a consumer reporting agency may require you to submit. For more detailed information about the <u>identity theft report</u>, visit <u>www.consumerfinance.gov/learnmore</u>.

2. You have the right to free copies of the information in your file (your "file disclosure"). An initial fraud alert entitles you to a copy of all the information in your file at each of the three nationwide agencies, and an extended alert entitles you to two free file disclosures in a 12-month period following the placing of the alert. These additional disclosures may help you detect signs of fraud, for example, whether fraudulent accounts have been opened in your name or whether someone has reported a change in your address. Once a year, you also have the right to a free copy of the information in your file at any consumer reporting agency, if you believe it has inaccurate information due to fraud, such as identity theft. You also

have the ability to obtain additional free file disclosures under other provisions of the FCRA. See www.consumerfinance.gov/learnmore.

- 3. You have the right to obtain documents relating to fraudulent transactions made or accounts opened using your personal information. A creditor or other business must give you copies of applications and other business records relating to transactions and accounts that resulted from the theft of your identity, if you ask for them in writing. A business may ask you for proof of your identity, a police report, and an affidavit before giving you the documents. It may also specify an address for you to send your request. Under certain circumstances a business can refuse to provide you with these documents. See www.consumerfinance.gov/learnmore.
- 4. You have the right to obtain information from a debt collector. If you ask, a debt collector must provide you with certain information about the debt you believe was incurred in your name by an identity thief like the name of the creditor and the amount of the debt.
- 5. If you believe information in your file results from identity theft, you have the right to ask that a consumer reporting agency block that information from your file. An identity thief may run up bills in your name and not pay them. Information about the unpaid bills may appear on your consumer report. Should you decide to ask a consumer reporting agency to block the reporting of this information, you must identify the information to block, and provide the consumer reporting agency with proof of your identity and a copy of your identity theft report. The consumer reporting agency can refuse or cancel your request for a block if, for example, you don't provide the necessary documentation, or where the block results from an error or a material misrepresentation of fact made by you. If the agency declines or rescinds the block, it must notify you. Once a debt resulting from identity theft has been blocked, a person or business with notice of the block may not sell, transfer, or place the debt for collection.
- 6. You also may prevent businesses from reporting information about you to consumer reporting agencies if you believe the information is a result of identity theft. To do so, you must send your request to the address specified by the business that reports the information to the consumer reporting agency. The business will expect you to identify what information you do not want reported and to provide an identity theft report.
- 7. The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely

approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

To learn more about identity theft and how to deal with its consequences, visit www.consumerfinance.gov/learnmore, or write to the Consumer Financial Protection Bureau. You may have additional rights under state law. For more information, contact your local consumer protection agency or your state Attorney General.

In addition to the new rights and procedures to help consumers deal with the effects of identity theft, the FCRA has many other important consumer protections. They are described in more detail at www.consumerfinance.gov/learnmore.