



Nor Cal Rental Property Association

# Consumer Report Dispute Request Form

Nor Cal RPA is a consumer reporting agency that issues consumer reports to customers who obtain authorization to run a background check from individuals when they apply for residency and/or for employment. In order to protect your privacy and ensure that Nor Cal RPA has in fact issued a consumer report on you, Nor Cal RPA will require that you provide some additional information as proof of your identity.

## Instructions for Completing the Consumer Report Request Form

The below required fields must be completed with your information, to the best of your ability. Missing or incomplete information may result in processing delays. Upon completion, please return this form with a legible photocopy of your current Driver's License or other Government issued Photo ID to Nor Cal RPA by one of the following:

Email: [consumerdispute@norcalrpa.org](mailto:consumerdispute@norcalrpa.org)

Fax: 209-476-9717, ATTN: Consumer Disputes

Mail: Nor Cal RPA Consumer Disputes, 2375 W. March Lane, Stockton, CA 95207

Once we have verified your identity and determined that Nor Cal RPA has issued a consumer report on you, Nor Cal RPA will mail to you a copy of your consumer report via the United States Postal mail, to the address you provide below. Nor Cal RPA will be unable to transmit your consumer report via e-mail or facsimile.

## Consumer Information and Identification

Full Legal Name: *(First, Full Middle Name, Last Name)* \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Name of Owner/Company Applied with: \_\_\_\_\_

Approximate Date(s) of Original Application: \_\_\_\_\_

Have you previously contacted Nor Cal RPA regarding your consumer report? ·  Yes ·  No

If Yes, Please Provide Date: \_\_\_\_\_

## Authorization for Release of Consumer Report

*(First, Full Middle Name, Last Name)*

I, \_\_\_\_\_, hereby certify that I am the individual named above. By signing below, I hereby authorize, without reservation, Nor Cal RPA to furnish me with a free copy of my consumer report. I understand that my consumer report contains personal, identifying information *(and may contain a criminal history on me, if applicable)* which I have privacy interest in, but pursuant to this authorization I hereby authorize Nor Cal RPA to mail my consumer report to the above-listed mailing address.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For additional questions regarding your request for a consumer report, please contact Nor Cal RPA at 209-476-0320.