

Identity Theft Victim's Packet

To obtain a police report number, call the non-emergency dispatch line at 623-930-3000 and then submit with any supporting documentation to the Glendale Police Records Unit located at 6835 N. 57th Dr, Glendale, AZ 85301.

Normal business hours are Monday – Friday, 8am to 5pm. Please keep track of your report number, as creditors, financial institutions and credit reporting agencies will ask for it.

My Glendale Police Department Report is: # _____

Please mail or drop off the following with the necessary supporting documents to:

Glendale PD
 Attn: Financial Crimes Squad
 6835 n 57th Dr
 Glendale, AZ 85301

Please indicate the supporting documentation you are able to provide for the companies you plan to notify. Attach copies (NOT originals) to the affidavit before forwarding.

- 1. A copy of a valid government-issued photo-identification card (for example, your driver's license, state-issued ID card, or your passport.) If you are under 16 and don't have a photo-ID, you may submit a copy of your birth certificate or a copy of your official school records showing your enrollment and place of residence.

Please attach actual copies of bank statements. If unavailable please complete the following:

Creditor Name/Address <small>(the company that opened the account or provided the goods or services)</small>	AccountNumber	Type of unauthorized Credit/goods/services Provided by Creditor <small>(if known)</small>	Date Issued or Opened <small>(if known)</small>	Amount/Valueprovided <small>(the amount charged or the cost of the goods/services)</small>

For Additional information and resources please go to the following links:

IDENTITY THEFT Pamphlet:

<https://www.glendaleaz.com/police/documents/IdentityTheftPamphlet.pdf>

Any request for reports, arrest records, photos, video/audio, or crime analysis statistical products requires a written request:

<http://www.glendaleaz.com/Police/upload/Police-Public-Records-Request.pdf>

Name _____ Glendale Police Department Report Number _____

Certification:

I certify that, to the best of my knowledge and belief, all the information on and attached to this affidavit is true, correct, and complete and made in good faith. I also understand that this affidavit and the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may constitute a violation of 18 U.S.C. 1001 or other federal, state or local criminal statutes, and may result in imposition of a fine or imprisonment or both.

_____ (Signature)

_____ (Notary)

[Check with each company. Creditors sometimes require notarization. If they do not, please have one witness (non-relative) sign below that you completed and signed this affidavit.]

Name _____ Glendale Police Department Report Number _____

Identity Theft File Consent Document (Optional)

By signing this document, I hereby provide the Glendale Police Department permission to enter my personal information into the Federal Bureau of Investigation's (FBI) Identity Theft File as well as the Arizona Criminal Information Center (ACIC) Identity Theft File. This information may include, but not limited to, physical descriptors and identifying information including my name, date of birth, place of birth, social security number, they type of identity theft, and a password provided to me for future identification verification purposes. I am also providing permission to enter my photograph and fingerprints into this file when that capability becomes available.

I understand that this information is being submitted as part of a criminal investigation in which I was a victim and will be available to entities having access to the Federal Bureau of Investigation's National Crime Center (NCIC) files for any authorized purpose. I am providing this data voluntarily as a means to memorialize my claim of identity theft and to obtain a unique password to be used for future identity verification purposes.

I understand that the FBI intends to remove this information from their respective active files no later than five years from date of entry. I understand that I may at any time submit a written request to the entering agency to have this information removed from the active file at an earlier date. I further understand that information removed from the active file will not thereafter be accessible via NCIC terminals, but it will be retained by the FBI as a record of the NCIC entry until such time as its deletion may be authorized by the National Archives and Records Administration (NARA).

I understand that this is a legally binding document reflecting my intent to have personal data entered into the FBI's Identity Theft File. I declare under penalty of perjury that the foregoing is true and correct. (See 28 U.S.C. § 1746)

SIGNATURE

DATE

PRINTED NAME

The Privacy Act of 1974 (5 United States Code § 552a) requires that Federal, state, or local agencies inform individuals whose social security number is being requested whether such disclosure is mandatory or voluntary, the basis of authority for such solicitation, and the uses which will be made of it. Accordingly, disclosure of your social security number if voluntary; it is requested pursuant to 28 U.S.C. § 534 for the purpose described above. The social security number will be used as an identification tool; consequently, failure to provide the number may result in a reduced ability to make such identifications or provide future identity verifications.

Name _____ Glendale Police Department Report Number _____

NCIC/ACIC ID Theft Detailed Information Form (Optional)

1. My full legal name is _____
(First) (Middle) (Last) (Jr., Sr., III)
2. I am Male Female
3. My race is _____
4. My place of birth was _____
5. My date of birth is _____ (month/day/year)
6. My height is _____
7. My weight is _____
8. My eye color is _____
9. My hair color is _____
10. My social security number is _____
11. I was a victim of _____ (what type of crime; i.e. ID Theft etc.)
12. I would like my password to be _____
(Your password cannot be longer than 20 characters and should be something you can remember if you are asked to provide it to law enforcement)