



## Identity Theft Information and Affidavit

The attached Identity Theft Affidavit is being given to you because you may have been a victim of Identity Theft. Identity Theft is defined as the theft or misuse of personal or financial identifiers in order to gain something of value and/or to facilitate other criminal activity. Identity Theft is a violation of the Texas Penal Code section 32.51 and is a State Jail Felony Offense.

The Grand Prairie Police Department is diligent in its efforts to apprehend and stop those individuals responsible for committing Identity Theft. This packet is essential in helping the Investigator understand, evaluate, and ultimately bring your case to closure. It is important that you take the time to complete this packet and return it to the Grand Prairie Police Department. Upon the return of your completed, signed, and notarized affidavit, it will be assigned to a Financial Crimes Investigator and a case number will be assigned. However, if it is determined the Grand Prairie Police Department is not the appropriate agency to investigate your case or does not have jurisdiction then the affidavit will be forwarded to the appropriate agency.

The attached Identity Theft Affidavit is a sworn statement and will be used as evidence in court should an arrest be made. It is essential that the information you provide be accurate and true. The first 3 pages of the affidavit require basic information. The fourth page, the Fraudulent Account Statement, details where your personal information has been used and what lines of credit have been opened. The last two pages, the Personal Statement of Fact, are where you describe your case and will initially serve as a summary. The affidavit must be signed in front of a Notary in two places, on page 4 and at the conclusion of the Personal

If you believe you are a victim of Identity Theft, you should take the following steps to protect yourself and your credit. The sooner you take action to limit the fraudulent use of your personal information, the easier it will be correct any damage already done.

- ☐ Complete the attached Identity Theft Affidavit and return it to the Grand Prairie Police Dept.
- ☐ Contact the three major credit bureaus and place a "security freeze" on your credit.
  - Credit Bureaus
  - Equifax 1-800-525-6285
  - Experian 1-888-397-3742
  - Trans Union 1-800-680-7289
- ☐ Obtain a copy of your credit history and check it for unauthorized accounts or lines of credit.
- ☐ Contact the Federal Trade Commission and make a report of Identity Theft
  - Identify Theft Hotline 1-877-438-4338
  - <http://www.consumer.gov/idtheft/>
- ☐ Contact the fraud department at each creditor, bank or service where unauthorized credit was obtained.

If you believe your personal checks or bank account information has been compromised, you may need to contact the following organizations:

- National Check Fraud Service 1-843-571-2143
- TeleCheck 1-800-710-9898
- CrossCheck 1-707-586-0551
- Equifax Check System 1-800-437-5120

Detach this page from the Identity Theft Affidavit and retain it for your records. Mail the completed Identity Theft Affidavit in its' entirety to :

**Grand Prairie Police Department**  
**Attn: Records**  
**1525 Arkansas Lane**  
**Grand Prairie, Texas 75052**

If you have questions concerning the Identity Theft Affidavit please contact the Financial Crimes Unit at **972-237-8750**.



## Identity Theft Affidavit

**All questions must be answered completely.**

### Complainant Information

(1) My full legal name is \_\_\_\_\_

(First)

(Middle)

(Last)

(Jr., Sr., III)

(2) (If different from above) When the events described in this affidavit took place, I was known as \_\_\_\_\_

(First)

(Middle)

(Last)

(Jr., Sr., III)

(3) My date of birth is \_\_\_\_\_  
(day/month/year)

(4) My Social Security number is \_\_\_\_\_.

(5) My driver's license or identification card state and number are \_\_\_\_\_.

(6) My current address is \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

(7) I have lived at this address since \_\_\_\_\_  
(month/year)

(8) (If different from above) When the events described in this affidavit took place, my address was \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

(9) My daytime telephone number is (\_\_\_\_) \_\_\_\_\_

(10) My email address or alternate phone number is \_\_\_\_\_

**Is this report being filed for informational purposes only?** Yes ☐ No ☐

As a result of this offense, how much financial loss have you suffered where the companies or banks have not reimbursed you to this point? \$ \_\_\_\_\_



Name \_\_\_\_\_ Service number \_\_\_\_\_

### **How the Fraud Occurred**

#### **Check all that apply for items 11 - 17:**

(11) ☐ I did not authorize anyone to use my name or personal information to seek the money, credit, loans, goods or services described in this report.

(12) ☐ I did not receive any benefit, money, goods or services as a result of the events described in this report.

(13) ☐ My identification documents (for example: credit cards, birth certificate, driver's license, Social Security card, etc.) were stolen or lost on or about

\_\_\_\_\_.  
(Month/Day/Year)

(14) ☐ To the best of my knowledge and belief, the following person(s) used my information (for example: my name, address, date of birth, existing account numbers, Social Security number, mother's maiden name, etc.) or identification documents to get money, credit, loans, goods or services without my knowledge or authorization:

\_\_\_\_\_  
Name (if known)

\_\_\_\_\_  
Address (if known)

\_\_\_\_\_  
Phone number(s)

\_\_\_\_\_  
Additional information (if known)

(15) ☐ I do NOT know who used my information or identification documents to get money, credit, loans, goods or services without my knowledge or authorization.

(16) How and when were you notified of this offense? Who notified you? If by mail, you should provide a copy of any documentation received. **Brief summary**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Name \_\_\_\_\_ Service number \_\_\_\_\_

### **Victim's Law Enforcement Actions**

(17) (check one) I ☐ am ☐ am **not** willing to assist in the prosecution of the person(s) who committed this fraud.

(18) (check one) I ☐ **am** ☐ am **not**: authorizing the release of any information to law enforcement for the purpose of assisting them in the investigation and prosecution of the person(s) who committed this fraud.

(19) (check one) I ☐ have ☐ have **not** reported the events described in this affidavit to other law enforcement agency.

(20) The other police agency ☐ did ☐ did **not** write a report. *In the event you have contacted another law enforcement agency, please complete the following:*

\_\_\_\_\_  
**(Agency #1)** (Officer/Agency personnel taking report)

\_\_\_\_\_  
(Date of report) (Report number, if any)

\_\_\_\_\_  
(Phone number) (email address, if any)

\_\_\_\_\_  
**(Agency #2)** (Officer/Agency personnel taking report)

\_\_\_\_\_  
(Date of report) (Report number, if any)

\_\_\_\_\_  
(Phone number) (email address, if any)

\_\_\_\_\_  
**(Agency #3)** (Officer/Agency personnel taking report)

\_\_\_\_\_  
(Date of report) (Report number, if any)

\_\_\_\_\_  
(Phone number) (email address, if any)

(21) If your identity was used for counterfeit checks, have you obtained a copy of the check from your bank? Yes ☐ No ☐ Please provide a **certified copy from your bank**.



Name \_\_\_\_\_ Service number \_\_\_\_\_

(22) If your identity was used to obtain credit or credit cards, were you provided with the suspect address? Yes ☐ No ☐ **(If more than one, please continue on page 8)**

Address: \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Account #: \_\_\_\_\_

Date opened: \_\_\_\_\_ Type of credit: \_\_\_\_\_

Financial loss: \$ \_\_\_\_\_

(23) If your identity was used to obtain utilities or phone service, please provide the following: **(If more than one, please continue on page 8)**

Company: \_\_\_\_\_ Account #: \_\_\_\_\_

Service address: \_\_\_\_\_

Dates of service: \_\_\_\_\_

(24) If your identity was used to open a bank account (checking or savings, etc.) Please provide the following: **(If more than one, please continue on page 8)**

Bank: \_\_\_\_\_ Account number(s): \_\_\_\_\_

Were checks or debit cards obtained? Yes ☐ No ☐ If so: \_\_\_\_\_

Address sent: \_\_\_\_\_

Date opened: \_\_\_\_\_ Location opened if known: \_\_\_\_\_

Financial loss: \$ \_\_\_\_\_

(25) Was your identity used to open other accounts not already covered in this report? Example (mortgage, vehicle purchases/auto loans, employment, other) Yes ☐ No ☐ If yes, please provide as much documentation as possible regarding these occurrences.

(26) Do you know how your identifying information was obtained (lost wallet or purse, mail theft, burglary, etc.) Yes ☐ No ☐ If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I declare all the above information listed in this affidavit is true and accurate to the best of my knowledge. I understand making a false statement is a violation of Texas Penal Code section 37.08 and that may be prosecuted if it determined that any portion of this affidavit is knowingly false.**

Signature: \_\_\_\_\_

Notary: \_\_\_\_\_



Name \_\_\_\_\_ Service number \_\_\_\_\_

**Personal Statement of Fact**

**Your personal narrative is the main factor in determining if your case will be investigated. Please be as detailed as possible in your narrative. Cases that have minimal details and information will be suspended. Please write legibly.**

**I hereby declare under penalty of perjury the following facts about this case:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Notary:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

Name \_\_\_\_\_ Service number \_\_\_\_\_



**Personal Statement of Fact**

**Your personal narrative is the main factor in determining if your case will be investigated. Please be as detailed as possible in your narrative. Cases that have minimal details and information will be suspended. Please write legibly.**

**I hereby declare under penalty of perjury the following facts about this case:**

**Signature:**\_\_\_\_\_

**Date:**\_\_\_\_\_

**Notary:**\_\_\_\_\_

**Expiration Date:**\_\_\_\_\_

**Name** \_\_\_\_\_ **Service number** \_\_\_\_\_



**Credit Card Accounts continued:**

Address: \_\_\_\_\_  
Financial Institution: \_\_\_\_\_ Account #: \_\_\_\_\_  
Date opened: \_\_\_\_\_ Type of credit: \_\_\_\_\_  
Financial loss: \$ \_\_\_\_\_

Address: \_\_\_\_\_  
Financial Institution: \_\_\_\_\_ Account #: \_\_\_\_\_  
Date opened: \_\_\_\_\_ Type of credit: \_\_\_\_\_  
Financial loss: \$ \_\_\_\_\_

Address: \_\_\_\_\_  
Financial Institution: \_\_\_\_\_ Account #: \_\_\_\_\_  
Date opened: \_\_\_\_\_ Type of credit: \_\_\_\_\_  
Financial loss: \$ \_\_\_\_\_

**Utility/Phone Account continued:**

Company: \_\_\_\_\_ Account #: \_\_\_\_\_  
Service address: \_\_\_\_\_  
Dates of service: \_\_\_\_\_

Company: \_\_\_\_\_ Account #: \_\_\_\_\_  
Service address: \_\_\_\_\_  
Dates of service: \_\_\_\_\_

**Bank Accounts continued:**

Bank: \_\_\_\_\_ Account number(s): \_\_\_\_\_  
Were checks or debit cards obtained? Yes ☐ No ☐ If so: \_\_\_\_\_  
Address sent: \_\_\_\_\_  
Date opened: \_\_\_\_\_ Location opened if known: \_\_\_\_\_  
Financial loss: \$ \_\_\_\_\_

Bank: \_\_\_\_\_ Account number(s): \_\_\_\_\_  
Were checks or debit cards obtained? Yes ☐ No ☐ If so: \_\_\_\_\_  
Address sent: \_\_\_\_\_  
Date opened: \_\_\_\_\_ Location opened if known: \_\_\_\_\_  
Financial loss: \$ \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Notary:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_