

CONSUMER CREDIT REPORT REQUEST FORM

All required fields with the **ASTERISK (*)** should be completed with **CAPITAL LETTERS**

PLEASE READ THE INFORMATION CAREFULLY BEFORE COMPLETING THIS FORM

CRR# _____

PERSONAL INFORMATION

*Title [] Miss [] Mrs [] Mr Other (please state) _____

*FIRST NAME

* MIDDLE NAME

*SURNAME

*TAX REGISTRATION NUMBER (TRN)

*DATE OF BIRTH: dd / mm / yyyy

* PLACE OF BIRTH (Parish) _____

*CURRENT ADDRESS _____

*TOWN

*PARISH

*TELEPHONE NUMBER (s)

*EMAIL ADDRESS

Please Note: CRIF will not provide the information you supply to any non-affiliated third party.

REQUIRED DOCUMENTS TO PROCESS CREDIT REPORT APPLICATION

1. Completed **CONSUMER CREDIT REPORT REQUEST FORM**
2. TRN and a valid government issued ID (**Driver's License, Passport or Voter's Registration Card**) of the authorised person pulling the company's report.

In the event that you do not have a valid government issued ID we will accept a passport size picture certified by an approved official (**Justice of the Peace, Medical Practitioner, Attorney-at-Law, Superintendent of Police or Bank Manager**).

3. Proof of address (**Recent utility bill or bank / credit card statement in your name; or address verification form / letter signed by one of the approved officials listed above**).

APPLICATION PROCESSING AND GUIDELINES

PLEASE TICK THE SUITABLE BOX

Online Processing

☐ Online (2 Working Days)

Type of Credit Report

☐ Free Credit Report (Without Score)

☐ Free Credit Report (With Score: JMD \$1,150 inclusive of GCT)

GUIDELINES AND FEE STRUCTURE FOR CREDIT REPORT APPLICATION PROCESSING

Every Jamaican over the age of 18 is entitled to receive a **FREE** copy of their credit report once each calendar year. However, additional credit reports within the same calendar year will attract a cost of JMD \$1000.00 (plus GCT and any applicable cost such as a credit score).

“Online Processing”	Banking Information
<p>Online application will be emailed ONLY</p> <p>Waiting Time: “2 Working Days”</p>	<p>Account Name: CRIF Information Bureau Jamaica</p> <p>Account Number: 5501831613</p> <p>Bank Name: Sagicor Bank of Jamaica Ltd</p> <p>Branch: New Kingston</p> <p>Account Type: Checking</p> <p>You must provide proof of payment by submitting a payment receipt or take a screenshot of the wire transfer.</p>
<p>Website: www.crif.com Email: customerservice.jm@crif.com</p>	

All documents sent via email must be certified by an approved official (**Justice of the Peace, Medical Practitioner, Attorney-at-Law, Superintendent of Police, or Bank Manager**). Or take a clear headshot (selfie) with your ID below your chin and submit it along with the required documents.

I _____, hereby grant CRIF Information Bureau Jamaica Limited the authorization to release to me, a copy of my Credit Report. I am aware that I have the legal right to challenge incorrect, incomplete or unreliable information should this arise.

*Customer’s Signature

*Date

Approved Officials	
<input type="checkbox"/> Justice of the Peace <input type="checkbox"/> Medical Practitioner <input type="checkbox"/> Bank Manager <input type="checkbox"/> Minister of Religion <input type="checkbox"/> Police Officer (Inspector and above) <input type="checkbox"/> Attorney-at-Law	<p>Stamp or seal of Referee (where applicable)</p>