



BACKGROUND INVESTIGATION DISCLOSURE REQUEST

Complete and return this form by mail to:

COMMERCIAL INVESTIGATIONS LLC
622 Loudon Rd Suite 201
Latham NY, 12110

If your reason for disclosure is number five (5) below, you must enclose a money order in the amount of \$9.00 made payable to COMMERCIAL INVESTIGATIONS LLC. Upon receipt of this form, the requested information will be mailed directly to you.

I request the disclosure of the nature and substance of all information on myself in the Agency's files, including the sources of the information and identification of the recipients of all reports furnished within the past two years.

I understand that if the Agency named above is unable to establish proper identification it will decline my request.

REASON FOR DISCLOSURE: (check one)

1. _____ Employment denied or terminated within the past 60 days by _____
_____ (name of facility) (no charge).
2. _____ I am unemployed and plan to seek employment within 60 days (no charge).
3. _____ I am a recipient of public welfare assistance (no charge).
4. _____ My report contains inaccurate information due to fraud (no charge).
5. _____ Other — charge is \$9.00 (explain) _____

The following information is required to establish a firm identity:

Name: _____

Date of Birth: _____ **Social Security Number:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

County: _____ **Daytime Telephone Number:** _____

Driver's License Number: _____ **State of Issue of Driver's License:** _____

I certify that I am the person named above and I understand that federal law provides that a person who obtains information from a consumer reporting agency under false pretenses shall be liable to the consumer reporting agency for actual damages or \$1,000, whichever is greater.

Signature: _____ **Date:** _____