



West Thurston Regional Fire Authority

“Serving Better Together”

10828 Littlerock RD. SW, Olympia WA 98512 ♦ <http://www.westthurstonfire.org>

Ph: (360) 352-1614 ♦ Fax: (360) 352-1696

PERSONAL DATA	POSITION APPLYING FOR			CELL PHONE
	NAME		WORK PHONE	HOME PHONE
	ADDRESS		D.O.B	SOCIAL SECURITY NUMBER
	CITY	STATE	ZIP	DRIVERS LICENSE #
	EMAIL ADDRESS			
Do you have any conditions which would prevent you from performing in this position? Yes No				
If yes, what accommodations would you need, if any, to assist you in performing your duties? (please attach)				

EDUCATION	NAME OF SCHOOL, UNIVERSITY OR VOCATIONAL SCHOOL	DEGREE	DATES ATTENDED FROM/TO	MAJOR	GPA
	HIGH SCHOOL				
	COLLEGE				
	COLLEGE				
	OTHER				
	OTHER				

EMPLOYMENT HISTORY	List your work experience for the last 3 years including self employment, military service and periods of unemployment. Attach additional sheets if necessary		
	MOST RECENT EMPLOYER	PHONE	FROM-TO
	ADDRESS	HOURS WORKED	
	TITLE/POSITION	IMMEDIATE SUPERVISOR	
	JOB DESCRIPTION		
	REASON FOR LEAVING		
	EMPLOYER	PHONE	FROM-TO
	ADDRESS	HOURS WORKED	
	TITLE/POSITION	IMMEDIATE SUPERVISOR	
	JOB DESCRIPTION		
	REASON FOR LEAVING		
	EMPLOYER	PHONE	FROM-TO
	ADDRESS	HOURS WORKED	
	TITLE/POSITION	IMMEDIATE SUPERVISOR	
	JOB DESCRIPTION		
REASON FOR LEAVING			

For internal use only:
 Date received: _____ By: _____ Followed up: _____ By: _____

List any organizations you have volunteered for		
VOLUNTEER ORGANIZATION	PHONE	FROM-TO
ADDRESS	HOURS WORKED	
TITLE/POSITION	IMMEDIATE SUPERVISOR	
JOB DESCRIPTION		
REASON FOR LEAVING		
VOLUNTEER ORGANIZATION	PHONE	FROM-TO
ADDRESS	HOURS WORKED	
TITLE/POSITION	IMMEDIATE SUPERVISOR	
JOB DESCRIPTION		
REASON FOR LEAVING		
VOLUNTEER ORGANIZATION	PHONE	FROM-TO
ADDRESS	HOURS WORKED	
TITLE/POSITION	IMMEDIATE SUPERVISOR	
JOB DESCRIPTION		
REASON FOR LEAVING		

CERTIFICATES	EXPIRATION DATE	SKILLS
TYPING SPEED	HOW MANY YEARS OF COMPUTER EXPERIENCE DO YOU HAVE?	
WHAT COMPUTER SOFTWARE ARE YOU PROFICIENT WITH?		
OTHER RELATED EXPERIENCE		

List names and telephone numbers of three business/work references who are <i>not</i> related to you, and are <i>not</i> previous supervisors. If not applicable, list three school or personal references who are not related to you.				
NAME	TITLE	RELATIONSHIP	PHONE	YEARS KNOWN

PLEASE LIST PRIMARY AND SECONDARY EMERGENCY CONTACTS		
NAME	RELATIONSHIP	PHONE NUMBER
NAME	RELATIONSHIP	PHONE NUMBER

CONVICTION/CRIMINAL HISTORY INFORMATION

This form must be completed to be considered for employment

When considering individuals for employment (both career and volunteer), conviction/criminal history records are reviewed as they are related to the content and nature of the work, and the safety and security of the fire district staff and the public. A conviction/criminal history does not necessarily disqualify an individual for employment/volunteer membership. Criminal history records will be subject to a satisfactory criminal conviction report. Applicants will be asked to sign a separate release form. Applicants who do not sign the release will be removed from the consideration for the employment/volunteer membership.

Note If you have had a felony arrest, you can not proceed with the application process. If you have had a misdemeanor crime against person within the past 10 years, or any other misdemeanor arrest within the past 5 years, you may not proceed with the application process.

Instructions: Complete ALL sections and sign below. The information you provide will be used only as it relates to consideration for employment (paid and volunteer)

NAME

SOCIAL SECURITY NUMBER

POSITION APPLIED FOR

CRIMES AGAINST PERSONS AND CRIMES RELATING TO FINANCIAL EXPLOITATION

Have you ever been convicted of any of the crimes listed below? NO YES - If yes, check all that apply and describe in space below.

- | | | |
|---|--|---|
| <input type="checkbox"/> Arson | <input type="checkbox"/> Extortion | <input type="checkbox"/> Promoting Prostitution |
| <input type="checkbox"/> Assault, Custodial | <input type="checkbox"/> Forgery | <input type="checkbox"/> Prostitution |
| <input type="checkbox"/> Assault, Simple | <input type="checkbox"/> Incest | <input type="checkbox"/> Robbery |
| <input type="checkbox"/> Assault | <input type="checkbox"/> Indecent Exposure-Felony | <input type="checkbox"/> Rape |
| <input type="checkbox"/> Burglary | <input type="checkbox"/> Indecent Liberties | <input type="checkbox"/> Rape of Child |
| <input type="checkbox"/> Child Abandonment | <input type="checkbox"/> Kidnapping | <input type="checkbox"/> Selling/Distr. Erotic Materials to a Minor |
| <input type="checkbox"/> Child abuse or Neglect | <input type="checkbox"/> Malicious Harassment | <input type="checkbox"/> Sexual Exploitation of a Minor |
| <input type="checkbox"/> Child Buying or Selling | <input type="checkbox"/> Manslaughter | <input type="checkbox"/> Sexual Misconduct with a Minor |
| <input type="checkbox"/> Child Molestation | <input type="checkbox"/> Murder, Aggravated | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Communication with a Minor | <input type="checkbox"/> Murder | <input type="checkbox"/> Unlawful Imprisonment |
| <input type="checkbox"/> Criminal Abandonment | <input type="checkbox"/> Patronizing a Juvenile Prostitute | <input type="checkbox"/> Vehicular Homicide |
| <input type="checkbox"/> Criminal Mistreatment | <input type="checkbox"/> Promoting Pornography | <input type="checkbox"/> Violation of Child Abuse Restraining Order |
| <input type="checkbox"/> Custodial Interference | | |

Explanation of Violation(s):

X

SIGN HERE

DRIVING RECORD EVALUATION

This form must be completed to be considered for employment

All applicants for career and volunteer positions with West Thurston Regional Fire Authority will have their driving records evaluated. West Thurston Regional Fire Authority uses the violation points system listed below. If your permanent driving record reflects a total of six (6) points or more for a period of 36 months (3 years) preceding the date of your application, you will not be allowed to continue the process. Therefore, if you know that your driving record is less than six points, you may apply. However, any new violations that occur before the completion of the probationary process, which put your total score over six points will disqualify you. Annual evaluation of a member's driving record may be made during a member's employment or volunteer service. Any current member found in violation of this evaluation will result in the suspension of the driving privileges and/or termination of employment with West Thurston Regional Fire Authority .

Violations	Points
Revocation of Driver's License	8
Denial of Issuance of Driver's License	8
Negligent Homicide	8
Driving while Intoxicated (involving an accident)	8
Driving while Intoxicated (not involving an accident)	6
Reckless Driving (involving an accident)	8
Reckless Driving (not involving an accident)	6
Negligent Driving (involving an accident)	5
Negligent Driving (not involving an accident)	4
Hit and Run (attended, occupants in vehicle)	8
Hit and Run (unattended, no occupants in vehicle)	6
Driving while license is Suspended (DWLS)	4
<i>Speeding in Excess of the Posted Limit:</i>	
0-14 mph over	2
15-19 mph over	3
20-25 mph over	4
26 mph and over	5
<i>Convictions of forfeitures for other moving violations:</i>	
Each Violation Involving an Accident	4
Each Violation not Involving an Accident	2

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I hereby certify, under the penalty of perjury in the state of Washington, that this application contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application may be rejected, my name may be removed from consideration or I may be discharged from my employment.

I authorize my current and former employers and all schools or educational and technical institutions which I have attended to provide Fire Department representatives any information regarding my current and former employment, including performance, discipline and attendance, scholastic records or ratings. I hereby release any such current or former employers or institutions, their agents or employees from any and all liability resulting from the release of such information. My authorization and release from liability are knowing, intelligent and voluntary acts. I hereby waive any claims against West Thurston Fire District No. 1 for relying on any information from my prior employers. I am willing to submit to a pre-employment physical examination if required.

I understand that as a condition of employment I must provide documentation to prove my eligibility to obtain employment along with personal identification information as required by the Immigration Reform and Control Act of 1986.

I UNDERSTAND THAT MY APPLICATION WILL NOT BE CONSIDERED UNLESS IT IS SIGNED.

X

Date:



WEST THURSTON REGIONAL FIRE AUTHORITY

10828 Littlerock Rd SW Olympia WA 98512
Phone 360.352.1614 Fax 360.352.1696

BACKGROUND INFORMATION

Last Name: _____ First: _____ Middle: _____

Other Names/Alias: _____

Social Security* #: _____

Date of Birth* _____ / _____ / _____
Month Day Year

Driver's License #: _____ State of Driver's License* _____

Present Address _____

City/State/Zip _____
City State Zip Code

Phone Number _____

E-mail _____

*This information will be used for background screening purposes only and will not be used as hiring criteria.

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND INVESTIGATION

I acknowledge receipt of the separate documents entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION, DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORT (if applicable), A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and OTHER STATE LAW NOTICES and certify that I have read and understand those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by **EMPLOYER** (the "Company ") at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Background Screeners of America, 9333 Melvin Ave, Northridge, CA 91324, (866) 570-4949, <https://backgroundscreenersofamerica.com>** and/or the Company. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Signature: _____ Date: _____

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

West Thurston Regional Fire Authority ("the Company") may obtain information about you from a third-party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks.

The investigations will be conducted by **Background Screeners of America, 9333 Melvin Ave, Northridge, CA 91324 (866) 570-4949, <https://backgroundscreenersofamerica.com>**

Signature: _____

Date: _____

Driving Record Release of Interest

Employers, prospective employers, volunteer organizations, or their agent can get driving records for an employee, prospective employee, or volunteer when authorized. Use this form to get their authorization.

- Complete the Company section.
- Give this form to your employee, prospective employee, or volunteer to complete their section.
- For audit purposes, keep this completed form in your files for at least two years. Do not mail it to the Department of Licensing.

Sealed juvenile records. Information contained in a driving record related to a sealed juvenile record may not be used for any purpose unless required by federal law. The employee or prospective employee may furnish a copy of the court order sealing the juvenile record to the employer, prospective employer, or their agent.

Company – To be completed by the company or the agent of the company

PRINT or TYPE Company name	
Agent company name (if applicable)	
Company/Agent company address	
Authorized representative name	Title
<p>Answer the following</p> <p>1. Is this company an employer, prospective employer, or volunteer organization of the individual whose driving record is being requested? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Is the record you are requesting necessary for employment purposes related to driving by the employee or prospective employee as a condition of employment or related to driving by the volunteer at the direction of the volunteer organization? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Do you agree to use the information contained in the record exclusively for this purpose and not divulge it to a third party? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Do you agree to hold harmless the Washington State Department of Licensing for all matters relating to the release of the requested driving record? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Certification</p> <p><i>I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.</i></p>	
<p>_____</p> <p>Date and place signed</p>	<p style="text-align: center;">X</p> <p>_____</p> <p style="text-align: center;">Authorized representative signature</p>

Employee, prospective employee, or volunteer – Complete this section and return the form to the company

PRINT or TYPE Full name (First, Middle, Last) of employee/prospective employee/volunteer	Date of birth (mm/dd/yyyy)	WA driver license number
<p>Authorization from</p> <p><input type="checkbox"/> Employee – for release of my driving record for employment purposes, at my employer’s discretion for the full term of my employment</p> <p><input type="checkbox"/> Prospective employee – for release of my driving record for employment purposes, not to exceed 30 days from date signed</p> <p><input type="checkbox"/> Volunteer – for release of my driving record for a position applied for that requires me driving at the direction of the volunteer organization</p>		
Employer, prospective employer, or volunteer organization name		
Employer agent company name if acting on behalf of the company for employment purposes		
<p>Authorization</p> <p><i>I am an employee, prospective employee, or volunteer of the company named above and I request that a copy of my Washington State driving record be sent to them/their agent.</i></p>		
<p style="text-align: center;">X</p> <p>_____</p> <p style="text-align: center;">Signature</p>	<p>_____</p> <p style="text-align: center;">Date</p>	

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

Para información en español, visite www.consumerfinance.gov/learnmore o escriba a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need—usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

Applicant Copy

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General.

For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and Insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to Packers and Stockyards Act</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>

Applicant Copy

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

Applicant Copy

**STATE OF WASHINGTON
CONSUMER CREDIT REPORTING ACT
SUMMARY OF CONSUMER RIGHTS**

The State of Washington Fair Credit Reporting Act (WFCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records).

Here is a summary of your major rights under the WFCRA. The WFCRA is modeled after the Federal Fair Credit Reporting Act. The same rights are provided under the Federal Fair Credit Reporting Act and you have received A Summary of Your Rights Under the Federal Fair Credit Reporting Act. You can get the complete text of WFCRA RCW 19.182, from the Washington Code Revisers Office, P.O. Box 40551, Olympia, WA, 98504, or online at <http://apps.leg.wa.gov/rcw/default.aspx?cite=19.182&full=true#19.182.070>.

- **You must be told if information in your file has been used against you.** If a person takes an adverse action against you that is based, in whole or in part, on information contained in a consumer report, that person must tell you, and must give you the name, address, and telephone number of the consumer reporting agency that provided the information.

- **You have a right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency, although medical information may be withheld and given directly to your medical provider. You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You will not be charged for:

- ① a consumer report if a person has taken adverse action against you because of information in your credit report;
- ② the reinvestigation of information you dispute; or
- ③ corrected reports resulting from the deletion of inaccurate or unverifiable information.

In addition, you are entitled to one free consumer report every 12 months, upon request. You may be charged a limited fee for a second or subsequent report requested by you during a 12 month period.

- **You have a right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and you notify the consumer reporting agency directly of the dispute, the consumer reporting agency will reinvestigate without charge and record the current status of the disputed information before the end of thirty business days, unless your dispute is frivolous.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Upon completion of the reinvestigation, if the information you disputed is found to be inaccurate or cannot be verified, the consumer reporting agency will delete the information and notify you of the correction. If the reinvestigation does not resolve your dispute, you may file with the consumer reporting agency a brief statement setting forth the nature of your dispute. The statement will be placed in your consumer file and in any subsequent report containing the information you disputed.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than ten years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need — usually to consider an application with a creditor, insurer, employer, landlord, or other business. The WFCRA specifies those with a valid need for access.

- **You must be notified if reports are provided to employers.** A consumer reporting agency may not give out information about you to employers without your knowledge. A potential employer must make a clear and

conspicuous disclosure in writing to you or obtain your consent before obtaining a report. A current employer may not receive a report unless it has given you written notice that consumer reports may be used for employment purposes.

- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** You may elect not to receive unsolicited “prescreened” offers for credit and insurance by using the consumer reporting agency’s notification system to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

You may place a security freeze on your credit report. A security freeze prevents your credit file from being shared with potential creditors or insurance companies. You may request a security freeze by contacting us at A security freeze can be requested in writing by first-class mail, by telephone, or electronically. You also may request a freeze by calling the following toll-free telephone number(s): TransUnion: 888-909-8872, Experian: 888-397-3742, Equifax: 800-685-1111 (NY residents please call 1-800-349-9960). TransUnion, Experian and Equifax can also be reached at the following addresses:

TransUnion LLC
P.O. Box 2000
Chester, PA 19016
<https://freeze.transunion.com>

Experian Security Freeze
P.O. Box 9554
Allen, TX 75013
www.experian.com/freeze

Equifax Security Freeze
P.O. Box 105788
Atlanta, GA 30348
<https://www.freeze.equifax.com>

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- **You may be able to block information resulting from identity theft from appearing on your credit report.** If you are a victim of identity theft, a consumer reporting agency must permanently block misinformation resulting from that theft from appearing on your credit report. You must provide the consumer reporting agency with a copy of a police report as evidence of your claim before it can place the block on your report.
- **You may seek damages from violators.** If a consumer reporting agency, or in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the WFCRA, you may be able to sue in state or federal court.

COMPLAINTS

Any complaints by consumers under state law may be directed to:
Office of the Attorney General
Consumer Protection Division
800 5th Avenue, Suite 2000
Seattle, Washington 98104-3188
Phone 1-800-551-4636 or (206) 464-6684
Fax (206) 389-2801

Statewide Toll-Free TDD: **800 276-9883**

Complaints May Be Made Via U.S. Mail or E-Mail

Complaints: <http://www.atg.wa.gov/FileAComplaint.aspx>

(Include your U.S. Mail address with any complaint.)

Website & Forms: <http://www.atg.wa.gov/>