

## Davis Police Department

2600 Fifth Street - Davis, California 95618-7718

Business: (530) 747-5400 - Fax: (530) 757-7102 - TDD: (530) 757-5666

Administration: (530) 747-5405 - Investigations: (530) 747-5430



# IDENTITY THEFT REPORTING

Penal Code 530.5

*530.6(a) A person who has learned or reasonably suspects that his or her personal identifying information has been unlawfully used by another, as described in subdivision (a) of the section 530.5, may initiate a law enforcement investigation by contacting the local law enforcement agency that has jurisdiction over his or her actual residence, which shall take a police report of the matter, provide the complainant with a copy of that report, and begin an investigation of the facts, or, if the suspected crime was committed in a different jurisdiction, refer the matter to the law enforcement agency where the suspected crime was committed for an investigation of the facts.*

Fraud and Identity theft are two of the fastest growing crimes in America. Perhaps you are reading this because you have become a victim. By following these instructions, the investigation and potential prosecution of the criminals who committed this crime against you, will be made much easier.

First, contact the three credit bureaus (Equifax, Experian and Trans Union) and have a "Fraud Alert/Victim's Impact" statement placed in your credit file and request a copy of your credit report be sent to you from each of the three bureaus.

Next, contact the Federal Trade Commission (FTC) and make a report, 1-877-ID-THEFT or [www.ftc.gov](http://www.ftc.gov).

Once you have contacted your banks, credit card companies, and any other agency that needs to be contacted, fill out the attached forms and return it to the Davis Police Department. **You will receive a case number after the forms are turned in.** The forms will be attached to the crime report you filed and will assist the investigating officer with your case. Please attach all supporting documents provided by any financial institution or agency, including the credit reports from the three bureaus.

You can obtain the "Identity Theft Reporting" forms from the Davis Police Department or the department's website at [www.davispd.org](http://www.davispd.org). Fill out as much information as you can. Most of the information needed on the forms will be provided to you when contacting the above companies. **The forms cannot be completed or transmitted online. They must be turned in at the Police Department so that you can meet with an officer to complete the report.**

If you can, try to determine where the crime(s) occurred.

Example: You are a Davis resident. Someone stole your identity and opened up a credit card using your personal information. The credit card was used to make purchases from Macy's at Arden Fair Mall in Sacramento. This crime occurred in Sacramento.

After receiving your report, the Davis Police Department will determine what investigative leads there are to the case before deciding to investigate. If the crime occurred in another jurisdiction, the case will be forwarded to the appropriate jurisdiction for review and/or investigation.

If you have any questions or need assistance in completing the forms, feel free to contact the Police Department in person or calling (530)747-5400.

**City of Davis**



# Davis Police Department

2600 Fifth Street Davis, CA 95618-7718  
(530) 747-5400  
Fax (530) 757-7102

## Identity Theft Victim's Complaint and Affidavit

A voluntary form for filing a report with law enforcement, and disputes with credit reporting agencies and creditors about identity theft-related problems. Visit [davispd.org](http://davispd.org) to use a secure online version that you can print for your records.

### Before completing this form:

1. Place fraud alerts on your credit reports, and review the reports for signs of fraud.
2. Close the accounts that you know, or believe, have been tampered with or opened fraudulently.

### About you (the Victim)

#### Now

1. My full legal name: \_\_\_\_\_  

	First	Middle	Last	Suffix
--	-------	--------	------	--------
2. My date of birth: \_\_\_\_\_  

Month/Day/Year
3. Physical: Height \_\_\_\_\_' \_\_\_\_\_" Weight \_\_\_\_\_lbs. Hair color \_\_\_\_\_ Eyes color \_\_\_\_\_
4. My Social Security number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
5. My driver's license: \_\_\_\_\_  

	State	Number
--	-------	--------
6. My current street address: \_\_\_\_\_  

Number & Street Name	Apartment, Suite, etc.
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City	State	Zip Code	Country
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7. I have lived at this address since \_\_\_\_\_  

month/year
8. My daytime phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 My evening phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 My Business/Work phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 My Cellular phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 My email(s): \_\_\_\_\_

Leave (4) blank until you provide this form to someone with a legitimate business need, like when you are filling your report at the police station or sending the form to a credit reporting agency to correct your credit report.

#### At the Time of the Fraud

9. My full legal name: \_\_\_\_\_  

	First	Middle	Last	Suffix
--	-------	--------	------	--------
10. My address was: \_\_\_\_\_  

Number & Street Name	Apartment, Suite, etc.
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City	State	Zip Code	Country
------	-------	----------	---------
11. My phone numbers: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_
12. My email(s): \_\_\_\_\_

Skip 9 – 12 if your information has not changed since the fraud.

Additional information: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**About you (the Victim) (Continued)**

**Declarations**

- 13. I  did OR  did not authorize anyone to use my name or personal information to obtain money, credit, loans, goods, or services — or for any other purpose — as described in this report.
- 14. I  did OR  did not receive any money, goods, services, or other benefit as a result of the events described in this report.
- 15. I  am OR  am not willing to work with law enforcement if charges are brought against the person(s) who committed the fraud.

**About the Fraud**

16. I believe the following person used my information or identification documents to open new accounts, use my existing accounts, or commit other fraud.

Name: \_\_\_\_\_  
                     First                                    Middle                                    Last                                    Suffix

Address: \_\_\_\_\_  
                                     Number & Street Name                                    Apartment, Suite, etc.  
 \_\_\_\_\_  
                     City                                    State                                    Zip Code                                    Country

Phone Number(s): (        )        - \_\_\_\_\_  
                                     (        )        - \_\_\_\_\_

16:  
 Enter what you know about anyone you believe may be responsible (even if you do not have complete information). Put unknown if you do not have suspect information.

Additional information about this person: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

17. Additional information about the crime (for example, how the identity thief gained access to your information or which documents or information were used):

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

16 and 17:  
Attach  
additional  
sheets as  
needed.

**Documentation**

18. I can verify my identity with these documents:

- A valid government-issued photo identification card (for example, my driver’s license, state-issued ID card, or my passport).  
*If you are under 16 and don’t have a photo-ID, a copy of your birth certificate or a copy of your official school record showing your enrollment and legal address is acceptable.*
- Proof of residency during the time the disputed charges occurred, the loan was made, or the other event took place (for example, a copy of a rental/lease agreement in my name, a utility bill, or an insurance bill.)

18: Reminder:  
Attach copies  
of your identity  
documents  
when sending  
this form to  
creditors  
and credit  
reporting  
agencies.

**About the Information or Accounts**

19. The following personal information (like my name, address, Social Security number, or date of birth) in my credit report is inaccurate as a result of this identity theft:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

20. Credit inquiries from these companies appear on my credit report as a result of this identity theft:

- Company Name: \_\_\_\_\_
- Company Name: \_\_\_\_\_
- Company Name: \_\_\_\_\_
- Company Name: \_\_\_\_\_
- Company Name: \_\_\_\_\_

21. Below are details about the different frauds committed using my personal information.

Name of Institution	Contact Person	Phone	Extension
Account Number	Routing Number	Affected Check Number(s)	
Account Type: <input type="checkbox"/> Credit <input type="checkbox"/> Bank <input type="checkbox"/> Phone/Utilities <input type="checkbox"/> Loan			
<input type="checkbox"/> Government Benefits <input type="checkbox"/> Internet or Email <input type="checkbox"/> Other			
Select ONE:			
<input type="checkbox"/> This account was opened fraudulently.			
<input type="checkbox"/> This was an existing account that someone tampered with.			
Date Opened or Misused (month/year)    Date Discovered (month/year)    Total Amount Obtained (\$)			

Name of Institution	Contact Person	Phone	Extension
Account Number	Routing Number	Affected Check Number(s)	
Account Type: <input type="checkbox"/> Credit <input type="checkbox"/> Bank <input type="checkbox"/> Phone/Utilities <input type="checkbox"/> Loan			
<input type="checkbox"/> Government Benefits <input type="checkbox"/> Internet or Email <input type="checkbox"/> Other			
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Select ONE:			
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Date Opened or Misused (month/year)    Date Discovered (month/year)    Total Amount Obtained (\$)			

21: If there were more than three frauds, copy this page blank, and attach as many additional copies as necessary. Enter any applicable information that you have, even if it is incomplete or an estimate. If the thief committed two types of fraud at one company, twice, give the information about the two frauds separately.

**Contact person:** Someone you dealt with, whom an investigator can call about this fraud.

**Account Number:** The number of the credit or debit card, bank account, loan, or other account that was misused.

**Dates:** Indicate when the thief began to misuse your information and when you discovered the problem.

**Amount Obtained:** For instance, the total amount purchased with the card or withdrawn from the account.

**Your Law Enforcement Report**

22. One way to get a credit reporting agency to quickly block identity theft-related information from appearing on your credit report is to submit a detailed law enforcement report (“Identity Theft Report”). You can obtain an Identity Theft Report by taking this form to your local law enforcement office, along with your supporting documentation. Ask an officer to witness your signature and complete the rest of the information in this section. It’s important to get your report number, whether or not you are able to file in person or get a copy of the official law enforcement report. Attach a copy of any confirmation letter or official law enforcement report you receive when sending this form to credit reporting agencies.

Select ONE:

- I have not filed a law enforcement report.
- I am in the process of filing a report with law enforcement.
- I was unable to file any law enforcement report.
- I filed an automated report with the law enforcement agency listed below.
- I filed my report in person with the law enforcement officer and agency listed below.

22:  
 Check “I have not...” if you have not yet filed a report with law enforcement or you have chosen not to. Check “I was unable to...if you tried to file a report but law enforcement refused to take it. Automated report: A law enforcement report filed through an automated system, for example, by telephone, mail, or the internet, instead of a face-to-face interview with a law enforcement officer.

\_\_\_\_\_  
Law Enforcement Department State

\_\_\_\_\_  
Report Number Filing Date (month/day/year)

\_\_\_\_\_  
Officer’s Name (please print) Officer’s Signature

\_\_\_\_\_  
Badge/ID Number ( ) - Phone Number

Other law enforcement agencies:

\_\_\_\_\_  
Law Enforcement Department State

\_\_\_\_\_  
Law Enforcement Department State

\_\_\_\_\_  
Law Enforcement Department State

Did the victim receive a copy of the report from the law enforcement officer?  Yes OR  No

Victim’s complaint/case number (if available): \_\_\_\_\_

**Signature**

**As applicable, sign and date *IN THE PRESENCE OF* a law enforcement officer, a notary, or a witness.**

23. I certify that, to the best of my knowledge and belief, all of the information on and attached to This complaint is true, correct, and complete and made in good faith. I understand that this complaint or 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 violate federal, state, or local criminal statutes, and may result in a fine, imprisonment or both.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed (month/day/year)

**Your Affidavit**

24. If you do not choose to file a report with law enforcement, you may use this form as an Identity Theft Affidavit to prove to each of the companies where the thief misused your information that you are not responsible for the fraud. While many companies accept this affidavit, others require that you submit different forms. Check with each company to see if it accepts this form. You should also check to see if it requires notarization. If so, sign in the presence of a notary. If it does not, please have one witness (non-relative) sign that you completed and signed this Affidavit.

\_\_\_\_\_  
Notary

**Witness:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date (month/day/year)

( ) - \_\_\_\_\_  
Telephone Number