

# On-Site.com Consumer Dispute



 We're here to help. Call **877 222 0384** to reach our Consumer Department.

Fax this form, along with proof of your claim, to:  
**888 774 0144**

You may also mail to:  
**On-Site Disputes  
P.O. Box 1514  
Los Altos, CA 94023-1514**

On-Site.com strives to maintain accurate records. If you believe that data reported by us is inaccurate, you may use this form – **along with accompanying proof of your claim** – to dispute the record. Each person must complete a separate form and include all information requested below.

We will investigate your claim and inform you of the results. By law, we have 30 business days from the date we receive your request in writing to inform you of the results of our investigation. Please note that the credit bureaus maintain independent databases and you may need to contact each bureau to review and correct the information; visit [www.annualcreditreport.com](http://www.annualcreditreport.com) for more information on obtaining your file from each bureau.

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## Personal information (include a copy of your photo ID)

Full name \_\_\_\_\_ Social Security Number or Tax ID \_\_\_\_\_ Date of Birth \_\_\_\_\_

Alias(es) / Other names \_\_\_\_\_ Email address \_\_\_\_\_

Current address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Mobile phone \_\_\_\_\_

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## Dispute details (include supporting documentation such as canceled checks, court documentation or correspondence)

Which type of information do you dispute? Describe the item(s) you are disputing; attach additional pages if necessary.

- Applicant information
- Credit payment information
- Court records on file

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## Signature

I declare, under penalty of law, that to the best of my knowledge, the information supplied above, and all accompanying information is true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Printed Name \_\_\_\_\_