

Credit Freeze Request

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

Equifax
P.O. Box 105788
Atlanta, GA 30348

Experian
P.O. Box 9554
Allen, TX 75013

TransUnion
P.O. Box 2000
Chester, PA 19016

Dear [Credit Bureau Name],

I am writing to request that a freeze be placed on my credit report to safeguard my personal information due to concerns regarding potential identity theft.

Below are my details for your records:

- **Full Name:** [Your Full Name]
- **Social Security Number:** [Your SSN]
- **Date of Birth:** [Your Date of Birth]
- **Current Address:** [Your Current Address]
- **Previous Address (if applicable):** [Your Previous Address]

Please confirm the placing of the freeze and provide me with the confirmation details at your earliest convenience. Thank you for your attention to this matter.

Sincerely,

[Your Name]