

Pinwheel Consumer identification and Certification Form

Pinwheel takes the privacy and security of consumer personal information seriously. We will provide a copy of your consumer report upon proper identification as required by the Fair Credit Reporting Act (FCRA). Please complete all applicable information, sign, and submit this form with a copy of your ID.

Last Name		First Name	Middle Name		
Current Street Address			City	State	Zip Code
Mailing Address (if different)			City	State	Zip Code
Email Phone Number		Phone Number	Secondary Phone Number		
-		Do	of Direct (BARA/DD (MANA)	00	
Social Se	ecurity Number	Da	ate of Birth (MM/DD/YYY	Υ)	
ID Type:	☐ Driver's License	License Number		Issuing State	
.,,,,,,,	☐ ID Card	ID Number		Issuing State	
	Passport	Passport Number		Issuing Country	
	Other (please explain	٦)			
Please	ial Institution Inform provide the informed through.	rmation nation for the lender, bo	ank, or other inst	itution that you co	onnected to
Financia	I Institution Name				



Consumer Report Request

Pursuant to the Fair Credit Reporting Act, I request that Pinwheel provide me of a copy of the information they shared with the financial institution listed above. By submitting this request, I certify that I am the consumer identified in this form and the information I have provided is accurate.

Please send me my consumer report by:	U.S. Mail	☐ Mail
•	report. Pinwheel do	el will only be used to verify and respond to your request es not provide this information to unauthorized parties or
Name:		_
Signature:		_
Date:		

Please upload this form and a copy of your ID to Pinwheel's encrypted Transfer Portal at https://pinwheelapi.com/consumer-report-request-form, or send them by mail to Pinwheel, Suite 1101, 20 W 22nd Street New York, NY 10010. You may contact us at fcra@getpinwheel.com with any questions.