

# FAX

TO: Equifax - Security Freeze

FROM:

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FAX: (678) 795-7954

EMAIL:

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PHONE: (866) 478-0027

PHONE:

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SUBJECT: Protected Minor Security Freeze

DATE:

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COMMENTS: Dear Equifax:

I would like to place a Protected Minor Security Freeze on my child's credit file.

My child's (PROTECTED MINOR) full name is:

Last 4 of SS#

Birth Date:

My (PARENT OR GAURDIAN) full name is:

Last 4 of SS#

Birth Date:

Our current home address is:

Attached:

PG 2 Cover Letter & Payment

PG 3 Other Proof of ID

Copy Child's Social Security Card

Copy Parent's Social Security Card or Birth Certificate

Copy Parent Driver's License or Government Issued ID

PG 4 Evidence of Home Address: Copy of Credit Card Statement / Utility Bill

PG 5 Protected Minor's Birth Certificate

**Security Freeze:** Child Name:

Child Address:

DATE:

Equifax  
Security Freeze  
P.O. Box 105788  
Atlanta, GA 30348

FAX (678) 795-7954  
PHONE (866) 478-0027

Dear Equifax,

I would like to place a Protected Minor Security Freeze on my child's credit file.

My child's full name is:  
My child's Social Security number is:  
My child's date of birth is:  
My child's current home address is:  
My child's phone number is:

My full name is:  
My Social Security number is:  
My date of birth is:  
My current home address is:  
My phone number is:

As proof of my residence, I am enclosing a copy of my driver's license and a \_\_\_\_\_ utility or credit card bill.

**Payment Requirement:**

NOTE: Equifax does not require a fee to place a security freeze on a protected minor's file.  
No Fee is included.

Sincerely,

**Proof of ID:** *(Child's/Parent's Social Security Card, Parent's Government Issued ID)*

**Evidence of Home Address** (*Utility or Bank Statement*):

**Protected Minor's Birth Certificate:**