



Application for Personal Credit Report

New Zealand

Your personal credit report will be mailed to you within 10 working days of having received your request.

Fields marked with an asterisk (*) must be filled in.

First Name*					Salutation*	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms			
Middle Name					DOB*	DD / MM / YY			
Surname*					Gender*	<input type="checkbox"/> Male <input type="checkbox"/> Female			
Any other First Names you have used					Driver Licence No	-----			
Any other Surnames you have used									
Current Employer Name									
Contact Information* (At least one number is required to assist us with processing your request)	Work			Home			Mobile		
	Email								
Current Residential Address	Unit No.		Street No.*		Street Name*				
	Suburb*					P/code		At this address since	MM / YY
1st Previous Residential Address	Unit No.		Street No.		Street Name				
	Suburb					P/code		At this address since	MM / YY
2nd Previous Residential Address	Unit No.		Street No.		Street Name				
	Suburb					P/code		At this address since	MM / YY

Your Consumer Credit File will be delivered to the address supplied above or please supply an alternative delivery address below.

Alternative Delivery Address	Unit No.		Street No.		Street Name			
	Suburb					P/code		

In addition to completing this form, you will need to provide the following documents to verify your identity:

- 1.) A copy of your Driver's Licence or Passport or Birth Certificate or Proof of Age card AND
- 2.) A copy of a document issued by an official body (such as a utility bill or bank statement) which includes your name and address

Please confirm the following:

<input type="checkbox"/>	I confirm that I am requesting a copy of my own personal credit report and the details supplied to identify me are true and correct
<input type="checkbox"/>	I have completed all mandatory fields
<input type="checkbox"/>	I have attached my identification documentation
<input type="checkbox"/>	I have signed the application form

Signature			Date	DD / MM / YY
Office use only	Consumer Reference No	-----		

PRIVACY STATEMENT

Illion's consumer credit reporting services are provided by Illion New Zealand Ltd Company No. 361 901 (Illion). Illion collects your personal information for the purpose of carrying out its credit reporting activities. For further details about how Illion collects, holds, uses and discloses personal information (including our access, correction and complaint handling procedures), please see our:

- Privacy Policy located at illion.co.nz/privacy-policy-risk-marketing-solutions; and
- Summary of Rights at illion.co.nz/summary-of-rights-2020

Illion Public Access Centre - PO Box 9589 Newmarket, Auckland 1031
Tel 0800 362 222 - Email pacnz@illion.co.nz Web address www.creditcheck.illion.co.nz

Illion New Zealand Ltd - Company No. 361 901 | DUNS 59 033 3696

To access your credit report from the other two Credit Reporting Bodies in New Zealand please refer to www.equifax.co.nz and www.centrix.co.nz