Request for Tradeline Research



Data Furnisher Contact Information	
Date Requested:	
Company Name *	
Experian Subscriber Code (Subcode) *	
Experian Company ID (COID)	
Vendor ID (DXXXX)	
Consumer Information *	
Full Name (First, Middle, Last)	
Date Of Birth (mm/dd/yyyy)	
Full Social Security Number (xxx-xx-xxxx)	
Full Address (street number, city, state, zip)	
Co-Borrower/Authorized User Information	
Full Name (First, Middle, Last)	
Date Of Birth (mm/dd/yyyy)	
Full Social Security Number (xxx-xx-xxxx)	
Full Address (street number, city, state, zip)	
Account Information *	
Account Number	
Account - Date Open	
Account - Date Last Reported	
Please provide a specific explanation of the issue and the type of research requested	
(Data Management Use Only)	
Analyst Comments/Findings	

^{*} Required Fields. Please email completed form to DataReporting@experian.com. Remember to always follow an encryption procedure when submitting sensitive information.