

[NAME OF COMPANY]

**Identity Theft Prevention Program**

**Customer Identification Checklist**

**1. Is this customer an individual or a business?**

Individual  Business

**2. Customer Contact Information**

Customer Name: \_\_\_\_\_

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SSN/TIN: \_\_\_\_\_

DOB (Individual Customer Only) \_\_\_\_\_

For Business Customer Only:

Corporation  Partnership  Trust  Sole Proprietorship  Other

**3. Customer Identification Documents**

**Individual**

- U.S. Passport  
Date of Issue: \_\_\_\_\_  
Expiration: \_\_\_\_\_  
Number: \_\_\_\_\_
- U.S. Driver's License  
State of Issue: \_\_\_\_\_  
Expiration: \_\_\_\_\_  
Number: \_\_\_\_\_
- U.S. Department of Defense ID  
Date of Issue: \_\_\_\_\_  
Expiration: \_\_\_\_\_  
Number: \_\_\_\_\_
- Other  
Describe: \_\_\_\_\_

**Business**

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