



**DISCLOSURE TO CONSUMER AND AUTHORIZATION BY CONSUMER  
FOR PROCUREMENT OF INVESTIGATIVE CONSUMER REPORT INFORMATION  
THROUGH A CREDIT REPORTING AGENCY**

1. **CLEAR, ACCURATE AND CONSPICUOUS DISCLOSURE** pursuant to the Federal Credit Reporting Act 15 U.S.C. Section 604 (b)(2)(A)(i):

**TO THE CONSUMER:** I am a consumer and understand that this document represents formal notice to me that **TAK COMMUNICATIONS, INC.** shall obtain investigative consumer reports (background investigation information) for employment purposes through CrimShield, Inc., a credit reporting agency.

2. **AUTHORIZATION** pursuant to the Federal Credit Reporting Act 15 U.S.C. Section 604 (b)(2)(A)(ii):

- A. I authorize CrimShield, Inc., and its agents, to obtain any information they request to complete a background investigation (now and at any time while I am in the employ of **TAK COMMUNICATIONS, INC.**), including, but not limited to, character; general reputation; history of payments; driving record; drug screenings; credit bureau reports from any credit reporting agency; workman comp claims; social security number, addresses and date of birth verifications; judgments; criminal history; public records; social records; private records; evictions and any and all information about me that CrimShield may discover.
- B. I authorize CrimShield Inc. to release the results of my background investigation to **TAK COMMUNICATIONS, INC.** and to any person, company or entity with whom **TAK COMMUNICATIONS, INC.** may contract with, or associate with, to perform demonstrations, sales, marketing, groundwork, installation, service for a customer or for the delivery of any other service or product.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



## ADDITIONAL DISCLOSURES, AUTHORIZATIONS, UNDERSTANDINGS AND AGREEMENTS WITH CONSUMER

I authorize and direct any and all governmental agencies, private entities, companies and/or individuals to release any and all information relating to me to CrimShield, Inc., or its agents.

I understand that CrimShield, Inc. may need a copy of my social security card, driver license or other personal documentation to complete its investigation and I agree to fully cooperate with CrimShield, Inc. to assist CrimShield, Inc. to complete my investigation.

I understand that CrimShield, Inc. may be performing the investigation and issuing a CrimShield Certification based on the criteria of **TAK COMMUNICATIONS, INC.**, or to determine whether I qualify to have access to a customer or job site of a company with whom **TAK COMMUNICATIONS, INC.** contracts with to perform work based on that contracting company's criteria.

I understand and agree that the designation of the CrimShield Crime Free Certification belongs solely to CrimShield Inc. and that CrimShield, Inc. has the absolute right to not issue a CrimShield Certification to me at CrimShield, Inc.'s sole discretion.

I understand and agree that the CrimShield, Inc. Certification and the CrimShield, Inc. identification card incorporate the name of CrimShield, Inc. and are the sole property of CrimShield, Inc. I understand that CrimShield Inc. has the right to protect its good name and reputation, regardless of any other factors. I further understand that CrimShield, Inc. does not discriminate on the basis of race, color, National origin, familial status, military service, religion or creed, sexual orientation, age, gender, or disabilities.

CrimShield Inc. will only reveal as much of my personal information as needed to obtain information requested and authorized for release by me for its investigation, and CrimShield will only reveal such information and the results of my investigation internally, on a "need to know" basis.

Furthermore, I agree that the results of my information and investigation results may be shared with **TAK COMMUNICATIONS, INC.** and with any person, company or entity that **TAK COMMUNICATIONS, INC.** may contract with, or associate with, to perform demonstrations, sales, marketing, groundwork, installation, service to a customer or the delivery of any other service or product. CrimShield, Inc. shall not sell any information about me that it receives. Also, I agree that CrimShield, Inc. may share my information and report with any police agency or court, if so requested by the same.

CrimShield does not maintain an actively updated file on any individual who has had a background investigation performed. Each investigation is conducted at the time it is ordered and only the results of that investigation stored. I understand that I am entitled to a copy of the background investigation report by requesting a copy in writing to: CrimShield, Inc. P.O. Box 5960, Mesa AZ. 85211.

I acknowledge receipt of a written summary of my rights pursuant to the FCRA 15 U.S.C 1681 relating to credit reporting information.

I certify and warrant that all the information contained in this application is true and correct and that my CrimShield Certification may be terminated for any false, misleading, omitted or fraudulent information; or for any reason deemed appropriate by CrimShield, Inc. or **TAK COMMUNICATIONS, INC.**

Drug Screening Policies, when applicable:

I understand that if a drug screen is required for my employer or for me to be on a job site of a client for whom my employer performs work and I fail the drug screen, or have previously failed any drug screen for one year prior to the date of this authorization, I understand that I am prohibited from being on such a job site for one year from the date of any failed drug screen. Furthermore, I understand that I shall not be eligible for a CrimShield certification during that year period. A drug screen failure includes, but is not limited to:

The specimen was positive for prohibited drugs; The specimen provided to the lab is outside of the temperature parameters for the lab; The applicant fails to produce a specimen after signing in at the lab; The applicant signs in, but fails to provide a testable specimen before leaving the lab, or; If there is any indication of tampering or fraud regarding the specimen or the applicant.

CONTINUED ON PAGE 2- PLEASE PROVIDE INFORMATION



***The Following Information is REQUIRED:***

Name as it appears on Driving License

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Used for identification purpose only) S.S. # \_\_\_\_\_ D.O.B. \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State of issuance: \_\_\_\_\_

Former Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**I authorize CrimShield to investigate my background and attest that the personal information I have provided above is current and accurate. Any falsified information may result in a CrimShield Certification being withheld.**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

For CA, MN, OK Residents Only: Please provide me with a copy of my background report: Yes: ☐ No: ☐  
For CA residents: Under section 1762.22 of the California Civil Code, you may view the report processed by CrimShield, Inc. You may obtain a copy of your report by sending your request in writing to the address above. If you have questions about your report, contact our customer service representatives at 1-888-422-2547.



## Applicants Copy

### NOTICE OF CONSUMER RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

#### A Summary of Your Rights under the Fair Credit Reporting Act

The Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as where you work and live, if you pay your bills on time, and whether you've been sued, arrested, or filed for bankruptcy -- to creditors, employers, and other businesses. The FCRA gives you specific rights in dealing with CRAs, and requires them to provide you with a summary of these rights as listed below. You can find the complete text of the FCRA, 15 U.S.C. 1681 et seq., at the Federal Trade Commission's web site (<http://www.ftc.gov>).

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must give you the name, address, and phone number of the CRA that provided the report.
- **You can find out what is in your file.** A CRA must give you all the information in your file, and a list of everyone who has requested it recently. However, you are not entitled to a "risk score" or a "credit score" that is based on information in your file. There is no charge for the report if your application was denied because of information supplied by the CRA, and if you request the report within 60 days of receiving the denial notice. You are also entitled to one free report a year if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you a fee of up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must reinvestigate the items (usually within 30 days) unless your dispute is frivolous. The CRA must pass along to its source all relevant information you provided. The CRA also must supply you with written results of the investigation and a copy of your report, if it has changed. If an item is altered or deleted because you dispute it, the CRA cannot place it back in your file unless the source of the information verifies its accuracy and completeness, and the CRA provides you a written notice that includes the name, address and phone number of the source.
- **Inaccurate information must be deleted.** A CRA must remove inaccurate information from its files, usually within 30 days after you dispute its accuracy. The largest credit bureaus must notify other national CRAs if items are altered or deleted. **However, the CRA is not required to remove data from your file that is accurate unless it is outdated or cannot be verified.**
- **You can dispute inaccurate items with the source of the information.** If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, they may not continue to report it if it is in fact an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to those who have a need recognized by the FCRA -- usually to consider an application you have submitted to a creditor, insurer, employer, landlord, or other business.



- **Your consent is required for reports that are provided to employers or that contain medical information.** A CRA may not report to your employer, or prospective employer, about you without your written consent. A CRA may not divulge medical information about you without your permission.
- **You can stop a CRA from including you on lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free number for you to call and tell the CRA if you want your name and address excluded from future lists or offers. If you notify the CRA through the toll-free number, it must keep you off the lists for two years. If you request and complete the CRA form provided for this purpose, you can have your name and address removed indefinitely.
- **You may seek damages from violators.** You may sue a CRA or other party in state or federal court for violations of the FCRA. If you win, the defendant may have to pay damages and reimburse you for attorney fees. If you lose and the court specifically finds you sued in bad faith, you or your attorney may have to pay the defendant's fees.

You may have additional rights under state law. You may wish to contact a state or local consumer protection agency or a state attorney general to learn those rights.

If you have questions or believe your file contains errors, call our toll-free number. The FCRA gives several different federal agencies authority to enforce the FCRA:

**FOR QUESTIONS OR CONCERNS REGARDING:**

CRA's, creditors and others not listed below

National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)

Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)

Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appears in federal institution's name)

Federal credit unions (words "Federal Credit Union" appear in institution's name)

Banks that are state-chartered, or are not Federal Reserve System members

Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate

Commerce Commission

Activities subject to the Packers and Stockyards Act, 1921

**PLEASE CONTACT:**

Federal Trade Commission Bureau of Consumer Protection - FCRA Washington, DC 20580 \* 202-326-3761

Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 \* 800-613-6743

Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 \* 202-452-3693

Office of Thrift Supervision Consumer Programs Washington, DC 20552 \* 800-842-6929

National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 \* 703-518-6360

Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 \* 800-934-FDIC

Department of Transportation Office of Financial Management Washington, DC 20590 \* 202-366-1306

Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 \* 202-720-7051

## Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:

☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

☐ Other (see instructions) ▶

☐ Exempt payee

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

List account number(s) here (optional)

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

#### Social security number

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#### Employer identification number

				-								
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### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign  
Here

Signature of  
U.S. person ▶

Date ▶

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.