

SSA Form 89 Verification Report

SAMPLE

Reference # 12345678
Process Date 2010-01-28

Input Data

First Name Melvin
Middle Name
Last Name Frost
Suffix
SSN 111-11-1111
Date of Birth 1976-12-12
Gender Male

Results

MATCH

The SSN & Name submitted for verification matches Social Security Administration's records. The information does not match the SSA Death Master File.

The authorized Agent for the SSA 89 submission: Martin Information & Investigations LLC dba USinfosearch.com;
5330 East Main Street, Suite 101B, Columbus, OH 43213

-END OF REPORT-

NOTE: The input information was submitted to the SSA under the Consent Based SSN Verification service. The results are those provided by the SSA. SSA's verification of an SSN does not provide proof or confirmation of identity.

NOTE: The information in this report is provided to supplement the authorized recipients other processes to identify potential misrepresentations. The data is gathered from multiple third-party sources and is based on the input data. The accuracy of the information cannot be guaranteed. Additionally, this information may not be used for any purpose governed by the Federal Fair Credit Reporting Act (15 U.S.C. 1681, et seq.). This report or data may not be resold.

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Input Data

First Name Melvin
Middle Name
Last Name Frost
Suffix
SSN 111-11-1111
Date of Birth 1976-12-12
Gender Male

Results

NO MATCH

The information submitted for verification does not match Social Security Administration's records.

The authorized Agent for the SSA 89 submission: Martin Information & Investigations LLC dba USinfosearch.com;
5330 East Main Street, Suite 101B, Columbus, OH 43213

SSA recommends you take the following actions:

1. Review the data submitted to SSA against the data contained in your records. If it does not match, resubmit the corrected data to SSA for verification. The cost for the resubmission will be borne by you, the Requesting Party.
2. If the data in your records matches the data submitted to SSA, then re-contact the SSN holder and ask to see his/her Social Security Card and/or verify the information provided to you to assure that the SSN and name were correctly shown on your request. If the number holder corrects the original data, then you should submit the corrected data to SSA for verification. The cost for resubmission will be borne by you, the Requesting Party.
3. If you cannot resolve the —no match|| data discrepancy, then you will refer the SSN holder to the Social Security Field Office that services where he/she resides to determine the nature of the problem. The servicing SSA Field Office can be located by visiting www.socialsecurity.gov. Select the —Find a Social Security Office|| link and follow the instructions.

-END OF REPORT-

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ERROR The SSA Form 89 submitted is missing a borrower signature. The SSN verification was not performed.

The SSA order was rejected due to an issue with the information on the SSA89 form. The error message above will help you identify the issue with the field content. Please use the following instructions when completing the SSA Form 89.

All eight fields on the SSA89 form must be completed, legible with no strike-outs or the order will be rejected. The following is a list of the fields which must be completed:

- 1) Name of SSN card holder
- 2) Date of birth
- 3) SSN
- 4) Purpose
- 5) Lender name
- 6) Agent name -Please ensure agent name is:
Martin Information & Investigations LLC dba USinfosearch.com
5330 East Main Street Ste 101b Columbus, Ohio 43213
- 7) SSN card holder's signature, date signed
- 8) SSN card holders address and phone number

No strikeouts are permitted. If you make a mistake, start again with a clean form.

The SSN Number Holder, or legal guardian must sign and date the Form SSA-89 and include their contact information.

-END OF REPORT-

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