



**Department of Justice  
Officer of Consumer Protection**

P.O. Box 200151  
Helena, MT 59620-0151  
(406) 444-4500 or (800) 481-6896

**Identity Theft Passport Application**

**Personal Information**

Name \_\_\_\_\_  
Last First Middle

Prior Names or Aliases \_\_\_\_\_  
Last First Middle

Mailing Address \_\_\_\_\_  
Street or PO Box City State Zip

Previous Address \_\_\_\_\_  
Street or PO Box City State Zip

Home Phone ( ) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_ Place of Birth \_\_\_\_\_

U.S. Citizen (please circle) Yes No Gender (please circle) Male Female

Social Security# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License \_\_\_\_\_  
State Number

\*Disclosure is voluntary & for identification purposes only

\*\*Copy of Driver's License must be included

**Crime Information**

Date you discovered the theft \_\_\_\_\_

County & State where theft occurred \_\_\_\_\_

Law enforcement agency crime reported to \_\_\_\_\_

Case # \_\_\_\_\_

Has the person who stole your information been identified? (please circle) Yes No

If yes, please provide name of suspect \_\_\_\_\_  
Suspect's name

Has the suspect been arrested? (please circle) Yes No Unknown

Type of Theft (credit card, checks/ATM,SSN, etc...)	Account Numbers	Approximate Amount
		\$
		\$
		\$

Use additional paper if necessary  
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# Please provide a brief description of Identity Theft Incident

Use additional paper if necessary

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## Applicant Certification

I understand that if I knowingly provide false information, I may be subject to false swearing charges under Montana law (45-7-202, MCA).

By signing this application, I attest that:

- The information provided on this form is true and accurate, and
- I have filed a true and accurate police report of this incident

Applicant Signature

Date

## Law Enforcement Certification

Law Enforcement Officer (Print Name)

Law Enforcement Officer (Signature)

Law Enforcement Agency and Phone

**Please send or fax this form to:**

Department of Justice – ID Theft Passport  
P.O. Box 200151  
Helena, Mt 59620-0151

Fax (406): 442-2174

Phone: 444-4500