

CCPA Collection Form

CM-0107, version 1.3

Date

Please complete all sections below and submit to Ascribe, a division of Trident Services, LLC via email to Compliance@ascribeval.com or send it through the U.S. Postal Service to:

Ascribe, a division of Trident Services, LLC Attention: Compliance 400 North Tustin Ave., Suite 410 Santa Ana, CA 92705

You may also contact us by calling (800) 520-5737.

Consumer Information		Services Information	
First Name		o Amusical	
Last Name:		O Appraisal Type of products or Evaluation	
		services obtained	
Consumer Address:		through LRES: O REO	
Phone Number:		Service or Property	
Email:		Address:	
Additional Details:		Lender Name:	
Consumer Type:	C. Sarvice Registert	Loan/Order Number:	
	Service RecipientJob Applicant		
	Employee	Request Type	
	Marketing Recipient / Site Visitor	Request to Know Info Request to Delete Info	
	O Other:	Request to Vilow into Request to Delete into Request to Update Info Opt-Out of Email Marketing	
		O Request to opuate into O Opt-Out of Email Marketing	
Certification: By checking this box, I certify that all information provided herein is true and correct. I am authorized to make this request as the consumer, or as the consumer's lawful delegate. If further information is needed by LRES to validate my identity and fulfill			
this request, I understand and agree that all subsequent information provided will be subject to this same certification.			
O I am the consumer listed above			
I am an authorized agent for the consumer listed above			
Phone Requests (Internal Use Only)			
		Associate Name:	
		Manager Name:	