

DIRECT DISPUTE INSTRUCTIONS

Upon receipt of this completed packet, Credit Acceptance Corporation will research your claim. Credit Acceptance Corporation will resolve your claim within thirty (30) day of receiving the notice or will contact you directly for additional information. *The thirty (30) day investigation period begins when all information needed to complete the investigation is provided.*

You may directly dispute inaccurate information on a consumer report through Credit Acceptance Corporation for information reported by us. Disputes may be submitted only by mailing your dispute to the following address:

Credit Acceptance Corporation
 Attn: Credit Dispute Processing
 PO Box 5070
 Southfield, MI 48086-5070

PLEASE INDICATE WHICH CREDIT BUREAU THAT IS THE SOURCE OF THE INFORMATION YOU ARE DISPUTING

- Experian Dispute
 Equifax Dispute
 Trans Union Dispute

Please include with your dispute a copy of your credit report that supports your dispute.

Check the Appropriate Box(es) that Describe the Information You Believe to be Incorrect

- | | | |
|---|---|--|
| <input type="checkbox"/> Identity theft | <input type="checkbox"/> High balance | <input type="checkbox"/> Date account was opened |
| <input type="checkbox"/> Fraud has been committed | <input type="checkbox"/> Date payment was made | <input type="checkbox"/> Date account was closed |
| <input type="checkbox"/> Liability for account | <input type="checkbox"/> Amount of a payment made | <input type="checkbox"/> Other (describe below) |
| <input type="checkbox"/> Terms of the account
(balance, payment, credit limit) | <input type="checkbox"/> Payment status | |

***If your dispute is based on possible fraud of identity theft, please provide a copy of your driver's license, social security card & the FTC Affidavit of Fraud

Customer Name			Account Number
Customer Address			Last Four Digits of SSN
City	State	Zip	Email Address
Home Telephone No.			Work/Cell Telephone No.

REASON FOR DISPUTING THE TRANSACTION(S)

CUSTOMER STATEMENT

The statements I have made on this dispute form are true and correct.

Customer's Signature
 Date

ADDITIONAL INFORMATION REGARDING YOUR DISPUTE

Credit Acceptance is not required to investigate disputes or may deem the dispute as irrelevant or frivolous under the following circumstances:

1. Credit Acceptance reasonably previously concluded the claim was frivolous or irrelevant.
2. Credit Acceptance does not have sufficient information to investigate your claim.
3. The disputed information provided is substantially similar as previously provided for other disputes, and Credit Acceptance has already satisfied its obligation to investigate the dispute.

If the dispute is determined to be frivolous or irrelevant, Credit Acceptance will notify you within five (5) business days of making this determination.

TO BE COMPLETED BY THE DEPARTMENT RECEIVING THE DISPUTE

Date Received by Dispute Team:
 Received By:
 Investigated By: