

## SAMPLE ADVERSE ACTION LETTER

Date

Name  
Address

Dear,

Your recent application for employment with \_\_\_\_\_ has been denied, based in whole or in part on information contained in a consumer report.

The consumer reporting agency that provided this report was:

MAF Background Screening  
134 South Tampa Street  
Tampa, Florida 33602  
800-226-7757

Please understand that while MAF Background Screening provided this report, they did not make the decision to take the adverse employment action and they are unable to provide you the specific reason why this action was taken.

You have the right, pursuant to federal law to obtain an additional free copy of your consumer report from MAF Background Screening. **You have sixty (60) days from the date you receive this notice to request this free copy of your consumer report.**

You also have the right, pursuant to federal law to dispute with MAF Background Screening the accuracy or completeness of any information contained in your consumer report.

Sincerely,

MAF Background Screening