

PLEASE READ CAREFULLY

CONSUMER CREDIT and BACKGROUND REPORT RELEASE FORM

By my signature below, I authorize **Jonathan Creek** to obtain a Consumer Credit Report and/or a Background Report on me. This authorization is valid for purposes of verifying information given pursuant to employment, leasing, rental, business negotiations or any other lawful purpose covered under the Fair Credit Reporting Act. (FCRA)

The Background Check may contain information available in the Public Domain but may not include interviews with persons other than previous employers or their agents.

By my signature below, I hereby authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts and agencies, military services and persons to release all information they may have about me including criminal and driving history.

This authorization shall be valid in original or copy form.

Applicant/Co applicant's Name: _____

Social Security Number: Applicant/co-applicant: _____

Date of Birth for both: _____ Co-applicant _____

Current Street Address: _____

City, State and Zip Code: _____

Driver's License Number: _____ State: _____

Driver's License Number Co-applicant _____ State: _____

Signature Applicant: _____ Date: _____

Signature Co-Applicant: _____ Date: _____

Contact Phone Number _____ Co-applicant _____

****NOTE: PLEASE INCLUDE A COPY OF A VALID DRIVERS LICENSE****