

Authorization to Obtain Consumer Credit Information

I hereby authorize [Company Name] to obtain my consumer credit report and other related information for the purpose of evaluating my application for credit, employment, or other legitimate business need.

Full Name:

Social Security Number:

Date of Birth:

Current Address:

Signature:

Date:

By signing above, I acknowledge that I have read and understand this Authorization, and I consent to the release of my consumer credit information as described herein.