Credit Check Authorization

1. To all consumer-reporting agencies and to all creditors and depositories of the undersigned:

Please be advised that the undersigned, and each of them, has made application to:

requesting a current Credit Check for the undersigned. Therefore, the undersigned, and each of them, hereby authorizes you to provide credit report and/or a disclosure to Lender or any agent or balance. The undersigned also authorizes you to disclose your deposit or credit experiences with the undersigned to Lender or to third parties. Please print the property address on the line below:

- 2. In addition, the undersigned, and each of them, hereby authorizes agent to disclose to any third party, or any agent or employee thereof, information regarding the deposit or credit experience with any of the undersigned.
- A photographic or carbon copy of this authorization bearing a photographic or carbon copy of the signature(s) of the undersigned may be deemed to be equivalent to the original hereof and may be used as a duplicate original.

Sign:		Sign:	
Applicant	Date	Co-Applicant	Date
Please provide the following	information:		
1- Your full name(s), as ap	pears on your S	S.S. card(s):	
2- Your Social Security Nu	mber:		
3- Your Driver License info	ormation:		
No.:			
State:			
Validation date(s): Please send in a copy of driv			
4- Your current address(s)			