

**CREDIT REPORT AUTHORIZATION
AND PRIVACY DISCLOSURE FORM**

Agency: _____
Address: _____
Surety 1: _____
Surety 2: _____
Surety 3: _____

I hereby authorize the above listed Agency and/or each listed Surety to;

- Obtain my personal credit report from a credit reporting agency of their respective choice, and
- To review my personal credit report.

I understand and agree that the above listed parties intend to use the credit report(s) for the purpose of evaluating my financial situation as part of the overall surety underwriting process.

My signature below also authorizes the above listed parties to exchange with each other the complete content of my personal information and credit report. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

I understand that I may revoke my consent to these disclosures by notifying the Agency in writing.

Applicant 1:

Applicant 2:

Full Legal Name	Full Legal Name
Social Security Number	Social Security Number
Date of Birth	Date of Birth
Address	Address
City	City
State	State
Zip	Zip
Signature	Signature
Date	Date

Make copies as necessary for all applicants. Completed forms may be either:

Scanned & E-Mailed to: _____
or, Faxed to: _____