

Credit Check Consent Form Fax Cover Sheet

Please complete this cover sheet and fax it to me with your completed Credit Check Consent Form. Upon receiving your signed completed Credit Check Consent Form, I will contact you to set up a meeting at your convenience.

TO:

Name: _____

Fax Number: _____

Phone Number: _____

FROM:

Name: _____

Phone Number: _____

Best Time to Call: _____

E-mail: _____

Fax Number: _____

Number of Pages (including this fax coversheet): _____

Message:

CREDIT CHECK CONSENT

I, the undersigned consumer, direct _____
to obtain a copy of my credit report. This consent shall automatically expire thirty (30) days from
the date of my signature below.

Printed name

Social Security Number

Signature/Date

Printed name

Social Security Number

Signature/Date

*The second signature line is only to be used when ordering a joint credit report for a married couple. If more than one individual credit report is being ordered, use a separate Credit Check Consent form for each customer.