

CREDIT CHECK AUTHORIZATION FORM

Today's Date:
Address of Premises:
Business Owner's Name:
Phone Number:
Date of Birth:
Social Security Number:
Present Business Address:
Name And Phone Number Of Present Landlord:
Rent / Own Home At (Address):
Have You Ever Filed For Bankruptcy (Yes/No):
Bank:
Branch:
Bank's Phone Number:
Account Number:

The applicant represents that statements made above are true and correct and hereby authorize verification of references, statements, and employment history made herein including but not limited to the obtaining of a credit report and criminal background check and agrees to furnish additional credit references on request. The landlords or property managers stated below are hereby authorized to communicate with the prospective landlord or property manager and National Credit Reporting for the purpose of discussing any and all of the facts and circumstances of the applicant's current or former tenancy. There are no limitations or restrictions regarding what may be discussed or revealed to the prospective landlord or property manager and National Credit Reporting. The applicant hereby holds the above named parties and National Credit Reporting free and harmless of any liability for providing written or verbal information and/or discussing the quality of the applicant's tenancy with the prospective landlord or property manager and National Credit Reporting.

THIS OUTLINE CREATES NO OBLIGATION, IS NOT AN OFFER TO ENTER INTO AN AGREEMENT, OR A RESERVATION OF, OR OPTION FOR, THE SPACE DESCRIBED ABOVE.

Business Owner Signature

Date

Please Return Form To:
Campus Plaza Associates
3801 West Pacific Ave., Suite A
Sacramento, CA 95820
Phone (916) 457-9900 / Fax (916) 457-9917