



## AUTHORIZATION TO OBTAIN CREDIT INFORMATION

EACH INDIVIDUAL SIGNING BELOW AUTHORIZE ANY LENDERS OR FUNDING SOURCE WHICH MAY BE UTILIZED (INCLUDING DJ JORDAN CREDIT SOLUTIONS) TO OBTAIN COMMERCIAL AND/OR CONSUMER CREDIT HISTORIES THAT WILL BE ONGOING AND RELATE NOT ONLY TO THE EVALUATION OF THE BUSINESS CREDIT REQUESTED, BUT ALSO FOR PURPOSES OF REVIEWING THE ACCOUNT.

A facsimile, electronic or other copy of this signed authorization shall be as valid as the original.

\_\_\_\_\_  
Applicant Signature                      Applicant's Printed Name                      Date

\_\_\_\_\_  
Social Security #                      Address

\_\_\_\_\_  
Date of Birth                      City, State, Zip

\_\_\_\_\_  
Applicant Signature                      Applicant's Printed Name                      Date

\_\_\_\_\_  
Social Security #                      Address

\_\_\_\_\_  
Date of Birth                      City, State, Zip