



### CREDIT RELEASE AUTHORIZATION

By signing below, each undersigned individual(s) who is either a principal of the credit applicant listed below or a guarantor or its obligations, provides written instruction to Lessor or its designee (and any nominee or potential assignee thereof) authorizing review of his / her personal credit profile from a national credit bureau. Such authorization shall extend to obtaining a credit profile in considering the application of the credit application and subsequently for the purposes of update, renewal or the extension of such credit and for reviewing and collecting the resulting account, now and from time to time, as may be needed in the credit evaluation and review process and waives any right or claim they would otherwise have under the Fair Credit Reporting Act in the absence of this continuing consent.

A photocopy or facsimile of this authorization shall be valid as the original.

In addition to authorizing review of my / our credit profile from any national credit bureau, the undersigned also authorizes my / our financial institutions and creditors to release credit information required by Lessor or its designee (and any assignee or potential assignee thereof). By signing below, I / we affirm our identity as the respective individuals identified in the related application. The undersigned states that all of the statements and information in the application provided are true & complete.

CREDIT APPLICANT (LESSEE): \_\_\_\_\_

Name (Please Print): \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Title: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Ownership %: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Title: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Ownership %: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Title: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Ownership %: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_ Date: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Title: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Ownership %: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Signature: \_\_\_\_\_