

Credit Check, Inc.

rsi@creditcheckinc.com

Tel. (561) 616-5556

Fax (561) 616-5553

BUSINESS CREDIT REPORT

____ SEND REPORT TO _____

NAME OF BUSINESS...: _____ [] CORPORATION/LLC
DBA (if applicable).....: _____ [] PROPRIETORSHIP
ADDRESS.....: _____ [] PARTNERSHIP

PHONE.....: _____
FEI # _____

PRINCIPALS:
NAME:.....: _____ TITLE: _____
RESIDENCE ADDRESS.: _____
STOCK OWNERSHIP %..: _____ S.S.#..: _____

PRINCIPALS:
NAME:.....: _____ TITLE: _____
RESIDENCE ADDRESS.: _____
STOCK OWNERSHIP %..: _____ S.S.#..: _____

PRINCIPALS:
NAME:.....: _____ TITLE: _____
RESIDENCE ADDRESS.: _____
STOCK OWNERSHIP %..: _____ S.S.#..: _____

IN WHAT COUNTY WAS YOUR BUSINESS OPENED OR INCORPORATED? _____

NAME OF BANK: _____

BANK LOCATION: _____

ANY OUTSTANDING JUDGMENTS, BANKRUPTCY OR LIENS? [] YES [] NO

I hereby authorize CREDIT CHECK, INC. to develop and furnish a credit report for a Construction Industry license to be forwarded to the licensing board / address noted above:

Signature Title Date

METHOD OF PAYMENT:
[] VISA or [] MASTERCARD

Card #

Three digit Security Code on back of card: _____

PRICE: \$ 80.00

Expiration: _____

Printed Name as it appears on credit card

____ Additional Copy For Review: \$10.00

____ Risk Score \$15.00

Signature of Cardholder

____ Overnight Rush Service: \$35.00

Total: _____

Billing Address as it appears on credit card statement