

CREDIT REPORT AUTHORIZATION AND RELEASE

I/We hereby authorize _____ or their assigns to obtain credit reports and credit information as necessary to promptly and fairly evaluate my/our request for credit.

My signature below authorizes the release to the credit reporting agency a copy of my credit application, and authorizes the credit reporting agency to obtain information regarding my employment, savings accounts, and outstanding credit accounts (mortgages, auto loans, personal loans, charge cards, credit unions, etc). Authorization is further granted to the reporting agency to use a photostatic reproduction of this authorization if necessary to obtain any information regarding the above mentioned information.

Applicants hereby request a copy of the credit report obtained with any possible derogatory information be sent to the address of present residence, and holds Essecnap Funding LLC. and any credit reporting organization harmless in so mailing the copy requested.

Any reproduction of this credit report authorization and release made by reliable means (for example, photocopy or facsimile) is considered an original.

Subject property location:

Borrower's Signature _____
Date

Print Name

Home Address

Date of Birth _____
Social Security #

Credit Card Authorization		
CARD HOLDER INFORMATION		
Name on Card: _____		
Card Holder Billing Address _____		
City: _____	State: _____	Zip: _____
Telephone: _____	Email: _____	
PAYMENT AUTHORIZATION		
Card Type:		
Card Number: _____		Exp Date: _____
Card Identification Number: _____		

I wish to authorize the purchase of a property appraisal for: _____ harmless against any liability pursuant to this authorization. I understand that my signature on this form will serve as authorized signature on the credit card charge slip. This authorization is valid for a period of one (1) year.

This information is confidential and only shared with the lender involved in this transaction.

Print Name _____
Signature _____
Date