



CREDIT REPORT REQUEST FORM
FAX: (800) 486-1760

For questions regarding the status of this request call (800) 394-7672

From: _____ Account #: _____

Date : _____ Direct Phone: _____

Individual () Joint ()

Bureau Selection:
() TransUnion () Experian () Equifax

Borrower Information

Last Name: _____

First Name: _____

SSN: _____

Street Address: _____

City: _____ **State:** ____ **ZIP:** _____ **Age:** _____

Co-Borrower Information

Last Name: _____

First Name: _____

SSN: _____

Street Address: _____

City: _____ **State:** ____ **ZIP:** _____ **Age:** _____

Notes: _____

