



Credit Report Authorization Form

Name

Account Number (if applicable)

Address

Social Security Number

City, State, Zip

Date of Birth

****Valid driver's license must accompany this form.**

"I authorize FORUM Credit Union to obtain my credit report and review my credit history. I understand by pulling my credit an *additional inquiry* will show up on my credit report and that this additional inquiry could affect my credit score."

By signing below, I am stating that I am fully aware and understand the disclosure stated above.

Signature

Phone Number

Date

Please fax to: _____

Employee Use Only:

Branch location _____

Teller _____ Date _____