

TENANT CREDIT AUTHORIZATION RELEASE

In connection with my application for tenancy, I hereby authorize Vetted Services, Inc. to furnish a consumer credit report and a criminal background investigation regarding me. The information from the credit report will not be used in violation of any Federal or State Equal Employment Opportunity Law or Regulation.

I (the applicant) have the right to obtain a copy of the report and the right to dispute any information. I may contact Vetted Services, Inc. directly at (850)-215-1891. A consumer report may be obtained at any time during the application process with the below named company.

I HEREBY AUTHORIZE, WITHOUT RESERVATION, ANY INFORMATION SERVICE BUREAU CONTACTED BY VETTED SERVICES, INC. TO FURNISH THE ABOVE-MENTIONED CREDIT INFORMATION.

Re: Residents of Oklahoma, California & Minnesota (ONLY) have specific disclosure requirements and we are required to give residents of these states an option to receive a copy of their consumer report. Check off to indicate if you wish to receive a copy: YES () NO ()

I understand that if any adverse action is taken, based in whole or in part on the information contained in the consumer report, I will be provided a copy of the report, the name, address and telephone number of the reporting agency, a summary of my rights under the Fair Credit Reporting Act, as well as additional information on my rights under the law.

I acknowledge that a telephonic facsimile or copy of this release shall be as valid as the original. This release is valid for all federal, state, county and local agencies and authorities.

Print Name: (last, first, middle)

Previous Name(s): (with dates of name changes)

_____ **SSN:** _____ **Birth Date:** _____

Driver's License #: _____ **State of Driver's License:** _____

IF "YEARS/MONTHS" FOR CURRENT OR PREVIOUS ADDRESS ARE LESS THAN 5 YEARS, PROVIDE ADDITIONAL PREVIOUS ADDRESSES ON THE BACK OF THIS FORM.

Current Address: _____

City: _____ **State:** _____ **ZipCode:** _____ **Years/Months There:** _____

Previous Address: _____

City: _____ **State:** _____ **ZipCode:** _____ **Years/Months There:** _____

Applicant Signature: _____ **Date Signed:** _____

*****FOR OFFICIAL USE ONLY*****

Company Performing Check: _____ **Initials:** _____

Full Address of Property: _____ **Owner's Name:** _____