

CREDIT CHECK AUTHORIZATION FORM

BUYER LEGAL NAME ("BUYER")	
SOCIAL SECURITY NUMBER	
CURRENT ADDRESS	
DATE OF BIRTH	

Borrower allows TriCity Real Estate Brokers, Inc., "Broker" a licensed California Corporation to obtain the necessary information from me to conduct a tri merge credit report, otherwise known as a credit check. Such authorization will allow the Broker to conduct an initial credit check and periodic updates, if applicable. The credit check is to support the Broker's ability to provide a mortgage towards a purchase of real property. All information gathered that has been provided must remain strictly confidential to Broker and its lender. By signing this authorization, I am giving authorization to to the Broker to pull my complete credit file.

Buyer Signature

Date

Please fax to TRICITY REAL ESTATE BROKERS, INC. at (510) 742-9299

No cover sheet necessary or document scan to realtor@tricityhome.com