



CREDIT REPORT AND BACKGROUND CHECK AUTHORIZATION FORM

By my signature below I, _____, authorize the City of Center Point Alabama to obtain a Background Check and / or Consumer Credit Report on me and my business.

This authorization is valid for purposes of verifying information given pursuant to business negotiations and qualifications for incentive/grant programs, or any other lawful purpose covered under the Fair Credit Reporting Act (FCRA).

The Background Check may contain information available in the Public Domain but may not include interviews with persons other than former employers, current vendors, current landlords, previous vendors and/or previous landlords or their agents and/or assigns.

By my signature below, I hereby authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts and agencies, military services and persons to release all information they may have about me including criminal and driving history. This authorization shall be valid in original or copy form.

Applicant's Full Name: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Business Legal Name: _____

EIN Tax Id Number: _____ Date of Creation: _____

State of Creation: _____

Provide Personal Addresses for the Last 7 Years

Current Street Address: _____ City: _____

State: _____ Start Date: _____

Prior Street Address: _____ City: _____

State: _____ Start Date: _____ End Date: _____

Prior Street Address: _____ City: _____

State: _____ Start Date: _____ End Date: _____

Provide Business Addresses for the Last 7 Years

Current Street Address: _____ City: _____

State: _____ Start Date: _____

Prior Street Address: _____ City: _____

State: _____ Start Date: _____ End Date: _____

Prior Street Address: _____ City: _____

State: _____ Start Date: _____ End Date: _____

Driver's License #: _____ State: _____

I swear and affirm that I am an Authorized Signatory of the Company, have the Authority to Act on behalf of the Company, and have the Authority to Legally Bind the Company.

Signature: _____ Date: _____

****NOTE: PLEASE INCLUDE A COPY OF A VALID DRIVERS LICENSE****