



# CREDIT TECHNOLOGIES, INC.®

## Credit Report Request

Client ID#: \_\_\_\_\_ Company Name: \_\_\_\_\_

\*Please circle report type needed

**Merged Infile \*\*RMCR**

Requested By : \_\_\_\_\_

\*Please Circle Bureaus Required

**Experian Trans Union Equifax**

Return FAX: (\_\_\_\_\_) \_\_\_\_\_

\*Risk Scores Required?

Return Phone:(\_\_\_\_\_) \_\_\_\_\_

(In case of transmission difficulties)

**YES / NO**

Applicant Name \_\_\_\_\_ / \_\_\_\_\_  
First M Initial Last {Sr, Jr, III} {Prior}

Social Security # \_\_\_\_\_ DOB \_\_\_\_\_  
mm/dd/yy

Spouse Name \_\_\_\_\_ / \_\_\_\_\_  
First M Initial Last {Sr., Jr, III} or {Prior}

Social Security # \_\_\_\_\_ DOB \_\_\_\_\_  
mm/dd/yy

Current Address \_\_\_\_\_  
House# Street Apt# City State Zip

Prior Address \_\_\_\_\_  
(At least 2 years residence must be provided)

**\*Failure to provide complete/ legible information will cause a delay in the processing of this request. If bureaus or risk scores are not specified, Experian and Trans Union with scores will automatically be provided. Additional costs due to incorrect or mis-spelled information may be incurred for their correction. I certify this request is being made in association with an application for credit. \*\*Completed Mortgage application (form 1003) required for completion of RMCR**

Comments / Special Requests: \_\_\_\_\_

\_\_\_\_\_  
**Signature of individual requesting credit report**

**Please FAX completed form to 248.473.7405**

Tomorrow's Solutions . . . **Today**  
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