

CREDIT RELEASE AUTHORIZATION

Each undersigned individual, who is either a principle of the credit applicant below or a personal guarantor of its obligations, authorizes release of any credit reference information for the company and individuals listed below including credit bureau reports, loan, lease, checking, saving, and trade accounts to Accord Financial Group and/or its assignees. Such authorization shall extend to obtaining a personal credit profile in considering this application and subsequently for the purposes of update, renewal or extension of credit, and for reviewing or collecting the resulting account. A photocopy or fax of this authorization shall be as valid as the original.

Business name: _____

X Signature: _____ Date: _____

X Signature: _____ Date: _____

Fax 760.652.4832

Please print this form, fill in the blanks and FAX to: ~~937-473-5990~~