

# Credit Check, Inc.

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## BUSINESS CREDIT REPORT

\_\_\_\_ SEND REPORT TO \_\_\_\_\_ COUNTY/CITY LICENSING BOARD  
\_\_\_\_ EMAIL REPORT TO ME AT: \_\_\_\_\_ OR  
\_\_\_\_ MAIL REPORT TO ME AT: \_\_\_\_\_

*Please print neatly – thank you!*

NAME OF BUSINESS...: \_\_\_\_\_ ( ) CORPORATION/LLC  
ADDRESS.....: \_\_\_\_\_ ( ) PROPRIETORSHIP  
PHONE.....: \_\_\_\_\_ ( ) PARTNERSHIP

FEI # \_\_\_\_\_

PRINCIPALS:  
NAME:.....: \_\_\_\_\_ TITLE: \_\_\_\_\_

STOCK OWNERSHIP %...: \_\_\_\_\_ S.S.#...: \_\_\_\_\_

PRINCIPALS:  
NAME:.....: \_\_\_\_\_ TITLE: \_\_\_\_\_

STOCK OWNERSHIP %...: \_\_\_\_\_ S.S.#...: \_\_\_\_\_

PRINCIPALS:  
NAME:.....: \_\_\_\_\_ TITLE: \_\_\_\_\_

STOCK OWNERSHIP %...: \_\_\_\_\_ S.S.#...: \_\_\_\_\_

IN WHAT COUNTY WAS YOUR BUSINESS OPENED OR INCORPORATED? \_\_\_\_\_

NAME OF BANK: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

**DOES THIS COMPANY DO BUSINESS IN 5 OR MORE STATES? IF YES, A \$120.00 SURCHARGE WILL APPLY.**

**METHOD OF PAYMENT:**

VISA or  MASTERCARD

**PRICE: \$ 80.00**

\_\_\_\_\_  
Card #

\_\_\_\_\_  
Three digit Security Code on back of card:

\_\_\_\_\_  
Expiration: \_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Printed Name as it appears on credit card

\_\_\_\_\_  
Signature of Cardholder

\_\_\_\_\_  
Billing Address as it appears on credit card statement

\_\_\_\_\_  
**Customer Copy: \$ 10.00**

\_\_\_\_\_  
**Experian Risk Score: \$ 15.00**

\_\_\_\_\_  
**Overnight Rush Service: \$ 35.00**

\_\_\_\_\_  
**Big Business Surcharge: \$120.00**

**TOTAL** \_\_\_\_\_

**FAX THIS COMPLETED APPLICATION TO: (561) 616-5553 OR EMAIL TO: [rs1@creditcheckinc.com](mailto:rs1@creditcheckinc.com)**