

Lindsey & Associates

Private Investigations

California License # PI22356

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AUTHORIZATION/RELEASE FOR CREDIT REPORT

CASE # _____ - _____

I _____ with Social Security Number
of: _____ / _____ / _____ Drivers License/ID # of _____ issued in the
State of _____ with a residence/business address of _____
City of _____ State of _____ Zip Code of _____.

Authorize Lindsey & Associates Private Investigations, their Employees, Agents, Representatives and/or Vendors to Conduct a single or multi bureau Credit History Report Under my Name and/or Social Security Number. This authorization shall remain in effect for thirty days from the date of authorization agreement.

By: _____ Date: _____
(Print Name)

Signature: _____

NOTE: Fax or E-mail this document to Lindsey & Associates once it has been executed and Notarized by a Licensed Notary with seal and certification of Notary attached.