Pro Capital Solutions LLC

Credit Report Authorization

Complete and sign this form to authorize a credit report for your loan request. Each applicant or guarantor must complete a separate form.

Applicant Information

Full legal name: _____

Date of birth (MM/DD/YYYY): _____

Social Security number: _____ – _____ – _____

Current address: _____

City: _____ State: _____ ZIP code: _____

Phone number: _____ Email: _____

Property address or loan reference: _____

_____

Authorization

I authorize Pro Capital Solutions LLC and its credit reporting service providers to obtain my consumer credit reports and credit scores from one or more consumer reporting agencies for the purpose of evaluating and processing my loan request, including my qualifications as a borrower or guarantor.

This authorization includes credit verification and updated credit reports reasonably needed to process this loan request through closing or final disposition. I authorize consumer reporting agencies to release this information for that purpose. This authorization applies only to this loan request.

I understand that obtaining my credit report may result in a hard credit inquiry, which may affect my credit score. Signing this form does not guarantee loan approval or commit me to accept a loan.

I certify that the identifying information provided above is accurate. By signing below, I give my written permission for the credit inquiries described in this form.

Applicant Signature

Signature: _____ Date: _____

Printed name: _____

Contains sensitive personal information. Return through a secure upload or in person.