

# NOTICE TO CONSUMER

(PLEASE COMPLETE THOROUGHLY AND LEGIBLY)

Thank you for seeking a rental or leasing relationship with our company: \_\_\_\_\_.

In compliance with State and Federal laws, we are hereby notifying you that a CONSUMER REPORT, and/or INVESTIGATIVE CONSUMER REPORT may be obtained for use in evaluating our decision to accept your personal guarantee for the rental or lease of our property.

Inquiries may be made in considering your application, and the ensuing report may contain public/semi-public or private information, identification information, credit information, or other information, which could adversely affect your potential for an association with us. The report will only be obtained, according to your written instruction(s), below.

You have the right to make a direct written request to obtain copies of any reports, which may have been provided by one, or more of the following Consumer Reporting Agencies, which may have contributed to the compilation of the Consumer Report, and/or Investigative Consumer Report:

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| 1. EXPERIAN (Formerly TRW – www.experian.com)<br>701 Experian Pkwy<br>Dallas, TX 75013; or call:<br>1-888-397-3742 | 3. EQUIFAX (www.equifax.com)<br>P.O. Box 740241<br>Atlanta, GA 30374-0241; or call<br>1-800-685-1111  |
| 2. TRANSUNION (www.transunion.com)<br>2 Baldwin Place<br>Chester, PA 19022; or call:<br>1-800-916-8800             | 4. APSCREEN Consumer Relations<br>P.O. Box 1355<br>Newport Beach, CA 92663; or call<br>1-800-637-0223 |

## AGREEMENT AND CONSENT

***I have read this form completely, and I authorize you to obtain*** a Consumer Report, or Investigative Consumer Report, per the outline of available information above. **I also (by photocopy of this form) authorize Consumer Reporting Agencies**, related or unrelated firms and/or persons to release information in response to these inquiries, and release same from any and all liability in responding to such inquiries. I understand that I am authorizing this request in accordance with my rights under the Fair Credit Reporting Act, the Fair and Accurate Credit Transactions Act, and the Gramm-Leach-Bliley Act.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Full Name (Printed): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth (mm/dd/yy): \_\_\_\_\_

Current Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_