



# Asociación de Arrendadores de Bienes Inmuebles de PR, Inc. (A.A.B.I.)

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## AUTHORIZATION FOR CREDIT REPORT

I (we) hereby authorize (s) the “Asociación de Arrendadores de Puerto Rico” through its member \_\_\_\_\_ member number \_\_\_\_\_, to request my (our) credit information through the Credit Bureau Reports. I (we) acknowledge that the information will be used by the member to evaluate my (our) payment history and responsibilities. The decision of granting a contract will be depending on gathered information.

I (we) authorize the member to report any non-compliances of the contract to the Credit Bureau Reports through the “Asociación de Arrendadores”.

Credit report will be made by \_\_\_\_\_ agency (ies) bureau (s).

- Trans Union
- Equifax
- Experian

Tenant name: \_\_\_\_\_ S. S.: \_\_\_\_\_

Actual Address: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Tenant signature \_\_\_\_\_ Date: \_\_\_\_\_

Tenant name: \_\_\_\_\_ S. S.: \_\_\_\_\_

Actual Address: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Tenant signature \_\_\_\_\_ Date: \_\_\_\_\_

Co-signer name: \_\_\_\_\_ S. S.: \_\_\_\_\_

Actual Address: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Co-signer signature \_\_\_\_\_ Date: \_\_\_\_\_

Co-signer name: \_\_\_\_\_ S. S.: \_\_\_\_\_

Actual Address: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Co-signer signature \_\_\_\_\_ Date: \_\_\_\_\_

### Member’s information

Please send credit report to my  fax number: \_\_\_\_\_

E-mail: \_\_\_\_\_

I can be contacted at: \_\_\_\_\_ or \_\_\_\_\_

### FOR OFICIAL USE ONLY

Credit card  ATM  Visa  MC # \_\_\_\_\_ Exp.: \_\_\_\_\_

Cash;  Check # \_\_\_\_\_;  Pre-paid check # \_\_\_\_\_; for the amount of: \$ \_\_\_\_\_.

Processed by: \_\_\_\_\_

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