

BRADY SULLIVAN PROPERTIES
670 N. Commercial Street
Manchester, NH 03101
Phone (603) 622-6223 Fax (603) 622-7342

CREDIT & REFERENCE REPORT AUTHORIZATION

Applicant's Full Name: _____

Social Security #: _____ **Date of Birth:** _____

Business Name: _____

Your Title: _____ **Federal ID #:** _____

Present Address: _____
(Street) (City) (State) (Zip)

Present Landlord: _____ **Phone:** _____

Amount of Rent: _____ **Number of Years:** _____

Number of Years Business Has Operated: _____ **# of Employees:** _____

Type of Business: _____

Circle One: Corporation LLC Sole Proprietorship D&B #: _____

Telephone: Day: _____ **Evening:** _____

The undersigned authorizes Brady Sullivan Properties to obtain credit reports from the appropriate consumer credit reporting agency for both business and personal credit reports and to check references.

A \$50.00 application fee must be paid at the time of application. Please make checks payable to BSPM.

Company Officer's Signature: _____ **Date:** _____

Primary Applicant: _____ **Date:** _____