



REQUEST FOR BANK CREDIT INFORMATION

TO: \_\_\_\_\_ DATE: \_\_\_\_\_

Dear Sir or Madam:

Please accept this letter as written authorization to release all credit and checking information on both my business and personal accounts to:

Power Funding, Ltd.
P.O. Box 5028
Tyler, Texas 75712
O: 903-533-4085 F: 903-593-1363

Thank you for your cooperation and prompt attention in replying to this request for information:

Cordially,

Authorized Client Signature & Title (Must be authorized signature for business and personal accounts) Company Name

TO: BANK CREDIT DEPARTMENT

FROM: POWER FUNDING

RE: \_\_\_\_\_

BUSINESS ACCOUNT # \_\_\_\_\_ PERSONAL ACCOUNT # \_\_\_\_\_

The above account has given the name of your bank as a reference in applying for credit. Thank you for completing the information below and returning the completed form to the above Power Funding location at your earliest convenience.

BUSINESS DEPOSIT ACCOUNT

PERSONAL DEPOSIT ACCOUNT

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

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

Average Balance: \_\_\_\_\_

Average Balance: \_\_\_\_\_

(low, medium, high)

(low, medium, high)

(three, four, five, six figures) \_\_\_\_\_

(three, four, five, six figures) \_\_\_\_\_

Deposit Account Satisfactory? [ ] Yes [ ] No

Deposit Account Satisfactory? [ ] Yes [ ] No

BUSINESS LOAN ACCOUNT

PERSONAL LOAN ACCOUNT

ORIGINAL AMT: \_\_\_\_\_ BALANCE: \_\_\_\_\_

ORIGINAL AMT: \_\_\_\_\_ BALANCE: \_\_\_\_\_

COLLATERAL: \_\_\_\_\_

COLLATERAL: \_\_\_\_\_

PAYMENTS CURRENT [ ] YES [ ] NO RATING \_\_\_\_\_ PAYMENTS CURRENT [ ] YES [ ] NO RATING \_\_\_\_\_

OPENING DATE: \_\_\_\_\_

OPENING DATE: \_\_\_\_\_

SIGNATURE OF BANK REPRESENTATIVE TITLE DATE