LEASING CREDIT APPLICATION JM REAL ESTATE, INC.

I, the undersigned consumer, do hereby authorize <u>JM Real Estate</u>, <u>Inc.</u>, by and through its independent contractor, to procure a consumer report and/or investigative consumer report on me.

These above-mentioned reports may include, but are not limited to, employment and education verifications; personal references; personal interviews; my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former address; criminal and civil history/records; and any other public record; and, any other information bearing on my credit standing, credit capacity, creditworthiness, character, general reputation, personal characteristics, trustworthiness and/or mode of living.

I understand that the investigative consumer report I have authorized above may include information obtained by interviews with my neighbors, friends and/or associates and/or others with whom I am acquainted or who may have knowledge concerning said information. I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report prepared on me upon my written request to the independent contractor performing this search that is made within a reasonable time after the date hereof.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to <u>JM Real Estate</u>, <u>Inc.</u>, by and through said independent contractor, and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, of whatever kind to me, my heirs or others making such claim or demand on my behalf, for procuring, selling, providing, brokering and/or assisting with the compilation or preparation of the consumer report and/or investigative consumer report hereby authorized.

CORPORATION / COMPANY NAME					
BUSINESS ADDRESS _					
	Street Number		Street Name		
City	State	Zip	County		
TAX ID#	TYPE OF BUSIN	IESS (Corporation, Sole l	Proprietor, Partnership)		
PRINTED NAME					
La	ast	First	Middle & Maiden name		
SIGNATURE		DATE_			

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RESIDENCE ADD	RESS				
	Street Number		Street Name		
City	State	Zip	County		
SOCIAL SECURITY NUMBER			D.O.B		
SPOUSE (if applicab	le)				
SPOUSE SOCIAL S	ECURITY NUMBER		D.O.B		
TELEPHONE NUM	MBER				
EMAIL ADDRESS_					
DRIVER'S LICENS	E NUMBER	STATE			
			ORD: PHONE:		
	Street Number		Street Name		
City	State	Zip	County		
BUSINESS OR PER	SONAL BANK				
BANK ACCOUNT	NUMBER				
CREDIT REFEREN	ICES				
NAME:		PHON	_ PHONE:		
NAME:		PHON	_ PHONE:		
NAME:		PHON	PHONE:		