

SCOTT'S CREDIT REPAIR

7407 FAIRWAY DRIVE
MONTGOMERY, ALABAMA 36116
1-866-278-2113

APPLICATION INFORMATION

Please Print Clearly or Type

LAST NAME	Circle One (Mr. Mrs. Ms.) FIRST NAME	MI	SOCIAL SECURITY NO.
BIRTHDATE			
Mailing Address and E-Mail Address (MUST have mailing address to process application)			
City	State	Zip	Home Phone
E-MAIL ADDRESS			

CREDIT REPORTS MUST BE OBTAINED FROM THE CREDIT REPORTING AGENCIES

SALES INFORMATION

REPRESENTATIVE'S LAST NAME	FIRST NAME	MIDDLE INITIAL	Home Phone
e-mail Address		REP ID#	

PAYMENT METHOD

DO NOT PAY CASH TO YOUR SALES REPRESENTATIVE.

[REPRESENTATIVES ARE NOT ALLOWED TO ACCEPT CASH (FOR THEIR SAFETY AND YOURS)]

IF PAYING BY PERSONAL CHECK, YOU **MUST** INCLUDE DRIVER'S LICENSE NUMBER

STATE NUMBER

FOR REP USE ONLY –COST TO CLIENT \$ _____

FOR OFFICE USE ONLY – AMOUNT PAID \$ _____ CHECK # _____ RECEIVED _____

You may cancel this contract without penalty or obligation at any time before midnight of the 3rd business day after the date on which you signed the contract. See the attached "Notice of Cancellation" form for an explanation of this right.

I hereby state that all information on this form about me is accurate and true. I also agree to the "Customer Terms and Conditions."

I have reviewed the application with the client

Client's Signature

Date

Representative's Signature

Date