



**Utility Account
Credit Check Information**

- **THE CHARGE FOR THE CREDIT REPORT IS \$10.00 which is non-refundable**

CUSTOMER INFORMATION

Last Name:			First Name:			Middle: [Initial]		
Social Security Number:					Date of Birth: (MM/DD/YYYY)			
Previous Address: <i>(Not the address just purchased)</i>								
City:			State:			Zip:		

(Office Keeps & Attaches to New Service Application)

Date: _____
Print Name: _____
Service Address: _____

- According to the Fair Credit Reporting Act, if a credit report is requested, I am entitled to know if a deposit is required, because of information obtained, if so, I will be so advised and be given the name of the agency or source of information, if I so request, I hereby certify that I understand that a consumer report may be obtained from a consumer reporting agency. I understand that the report may contain information bearing on my credit worthiness, credit standing, and credit capacity.
- I authorize the City of Portola to obtain a credit report to determine if a deposit is required.

Signature: _____