



FAX SERVICE REQUEST FORM

1. Account Information

This form must be complete for processing. Please print legibly in blue or black ink.

Account Number: _____ Building Code: _____

Account Name: _____

Requestor's Name: First: _____ Last: _____

Phone Number: (_____) _____ Fax Number: (_____) _____
(Area Code) (Number) (Area Code) (Number)

Permissible Purpose: Resident Screening Employment Screening Other (Please specify) _____

2. Select Reports (Check all reports you wish to run for the applicant)

Applicant Screening Services

- RegistryINSIGHTSM
- National RegistryCHECKSM
- RegistrySCOREXSM
- TeleCheck
Future Rent: _____
- AutoSelect

Credit Report - Bureau

- (Choose one.)
- Experian
 - TransUnion
 - Equifax
 - Social Search
 - Experian
 - TransUnion
 - Equifax

Criminal Search Services

- County Criminal Search
- Search Area:
 - Current Address
 - Previous Address
 - Additional Addresses
- If additional, specify county: _____
- Statewide Criminal Search
- Specify state: _____
- Multi-State Criminal Search
- Additional Addresses
- Criminal Decision Service
 - CrimSAFESM

3. Applicant Information

Applicant's Name: First: _____ Middle Initial: _____ Last: _____

(Indicate the appropriate name suffix, if applicable.)

Jr. Sr. Other name suffix (Specify): _____ Date of Birth: _____
(DOB required for criminal searches) (mm/dd/yyyy)

Social Security Number (SSN) or Individual Tax Identification (ITIN) #: _____

Driver's License Number (Required to run TeleCheck): _____ State Issued: _____

Current Address: _____ Apt.#: _____
City: _____ State: _____ Zip: _____

Previous Address: _____ Apt.#: _____
City: _____ State: _____ Zip: _____

4. RegistrySCOREX and/or AutoSelect: (to run these products, the information below must be completed)

Monthly Employment Income: _____ Other Income (i.e. child support, Social Security): _____

Total Monthly Income: _____ Current Rent/Mortgage: _____ Property Rent _____
(rent applied for)

Non Resident Co-Signer: No Yes Joint Application: No Yes

If Joint App., list roommate name(s): _____ Being processed together: No Yes

Fax completed Form to: 1-800-866-7344 For questions, please call: 1-800-999-4010