



# Credit Report Request Form

1818 South 72<sup>nd</sup> Street  
Omaha, NE 68124  
1-800-942-9027

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

SS#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

SS#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Number of Dependence: \_\_\_\_\_

Current Housing: Home Owner: \_\_\_\_\_ Renter: \_\_\_\_\_ Other: \_\_\_\_\_  
Yrs in Residence: \_\_\_\_\_

I hereby authorize and instruct Credit Advisors Foundation to obtain and review my credit report. My Credit report will be obtained from a credit reporting agency chosen by Credit Advisors Foundation. I understand and agree that Credit Advisors Foundation intends to use the credit report for the purpose of evaluating my financial situation. Please note: Credit Advisors Foundation is required by the Department of Housing and Urban Development (HUD) to report housing counseling information for each group session. Your information will be kept confidential according to HUD's privacy policy and Credit Advisors Foundation's confidential nature of work policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Optional:

### *Race*

American Indian/Alaskan Native \_\_\_\_\_

Asian \_\_\_\_\_

Black or African American \_\_\_\_\_

Native Hawaiian or Other Pacific Islander \_\_\_\_\_

White \_\_\_\_\_

### *Ethnicity*

Hispanic \_\_\_\_\_ Not Hispanic \_\_\_\_\_

Approximate annual household income \_\_\_\_\_