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Tel: 800-710-2484
fax: 949-748-5208

Request for BUSINESS CREDIT REPORT

Please complete this form and fax to 949-748-5208 or email to membership@citicredit.net

Your Information

Company Name: _____

Contact Person: _____

Telephone #:(_____) _____ - _____ Fax# (_____) _____ - _____

E-Mail: _____

How do you want to receive your report? [] Fax or [] E-Mail

Your Billing Information: [] Visa [] Mastercard [] American Express

Name on Card: _____

Billing Address: _____

City: _____ State: _____ ZipCode: _____

Credit Card #: _____ - _____ - _____

Expiration Date (MM/YYYY) _____ / _____ CVV Code: _____



Service Agreement: I agree to abide by all applicable local, state and federal laws with regard to the report(s) I am ordering today and will not share this information with any third parties or display it publicly. Under penalty of perjury, I swear that I am the authorized cardholder of the credit card indicated above and grant permission to have it charged for the total amount of \$59.95 per business report. **Once the request is received, your card will be billed instantly by Citi Credit Bureau. If you dispute a valid charge from Citi Credit Bureau, you will be liable for original amount plus an additional collection/charge back fee of \$25.00** PLEASE VERIFY ALL OF THE INFORMATION PROVIDED. ALL ORDERS ARE DISPATCHED IMMEDIATELY. NO CANCELLATIONS OR CHANGES CAN BE MADE AFTER YOU FAX YOUR ORDER. If you provide with incorrect information, you will still be liable for the charge.

Print Name: _____ Date _____

Signature: _____

Company to be Profiled

Business Name: _____

Current Address: _____

City,State,Zip: _____

TaxID (if available) _____

Please be advised that any information provide that is incomplete, incorrect, or not legible can result in delays with processing or the application could be processed incorrectly