



8546 W Homosassa Trl Ste 4, Homosassa, FL 34448
Phone 352-628-2580 • 888-474-2270 • Fax 866-588-3604

CONTRACTOR'S LICENSE CREDIT REPORT

Complete all pages and return by one of the following methods.

SCAN & EMAIL (The Fastest)

Scan & Email the completed form and a copy of your check for payment to: contractor@usacreditbureau.com. We will create an ACH transfer from the information on the check. Please note: You must fill out the check. Do not mail the check afterwards.

BY FAX

Fax the completed form and a copy of your check for payment to 866-588-3604. We will create an ACH transfer from the information on the check. Please note: You must fill out the check. Do not mail the check afterwards.

BY MAIL

USA Credit Bureau, 8546 W Homosassa Trl Ste 4, Homosassa FL 34448

OUR SERVICES OFFERED

- Business Report \$50.00 If sending direct to State/City/County
Personal Report \$40.00 Overnight Shipping \$25.00
Rush Service \$15.00 File Copy \$5.00

Where have you applied for your license? (Check One)

- State of Florida County of:
Construction Electrical
City of: Other:

I prefer the report(s) be sent directly to:

- Applicant State of Florida County or City Agency
(Application # Required:)

Important Information:

Your final report will be delivered by email unless other arrangements have been made. Feel free to make as many copies as you need for the various licenses you may be applying for.

If you have applied to a State, County or City agency and been rejected because of your credit report, please include a copy of the rejection letter for reference.

Most of our orders are complete the same day that we receive them or at least within 24 hours. If we run into problem with references you will be notified. Please put a Rush order in for the fastest completion.

Contractor License Credit Report

Type of Business: Corporation Sole Proprietorship Partnership
 Is your business under or over one year old? Under Over

Business Information

Name:			
D/B/A if Applicable			
Address:			
City, State, ZIP			
FEIN#:		Telephone#:	

Personal Information

Applicant Name:			
Address:			
City, State, ZIP			
Email Address:			
Social Security#:		Telephone#:	

Corporate Officers

Name	Office	Social Security #

**Official Use
Only**

04012010WE

Material Suppliers - At Least 3 (Not needed if your business is under a year old)

Name	Account#	Phone#	Address

I hereby grant my permission for the USA Credit Bureau to access my credit file and do a background survey in line with this business transaction. I agree to hold the USA Credit Bureau harmless for anything which may appear on this report.

Signature _____ Date _____