



CREDIT RELEASE FORM

I, _____ hereby authorize TRANSCREDIT to report my credit profile to Partridge Realty.

Full Name _____

Address _____ Zip _____

Social Security # _____ Date of Birth ____ / ____ / ____

Driver's License # _____ State _____

Previous Address (if less than 3 years) _____

I understand and agree to pay a non-refundable fee of \$30.00

Client Signature

Date

Please mail completed form along with \$30.00 money order payable to:
Partridge Realty 23-05 Astoria Blvd Astoria, N.Y. 11102