



**SUNWEST EMPLOYER SERVICES INC
REQUEST FOR COMPANY CREDIT CHECK**

Company Legal Name: _____

Street Address: _____

City _____ **State** _____ **Zip Code** _____

Previous Address (if less than 3 years at current address)

Street Address: _____

City _____ **State** _____ **Zip Code** _____

Full Name of Owner/Officer: _____

Sales Person Requesting Report: _____ **Date:** _____

Person Printing Report: _____ **Date:** _____

Management Approval _____ **Date** _____

Remarks – Comments – Requests

Note: If a "Disclosure of Intention to Obtain a Consumer Report for Extension of Credit" is attached, a credit check will be processed for the Owner(s)/Officer(s). A credit check **will not** be processed on any Owner/Officer who has not signed the authorization form.