



**R & R INSURANCE SERVICES, INC.**  
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**CREDIT REPORT AUTHORIZATION  
 AND PRIVACY DISCLOSURE FORM**  
 nasbp.org/toolkit

Agency: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Surety 1: \_\_\_\_\_  
 Surety 2: \_\_\_\_\_  
 Surety 3: \_\_\_\_\_

I hereby authorize the above listed Agency and/or each listed Surety to;

- Obtain my personal credit report from a credit reporting agency of their respective choice, and
- To review my personal credit report.

I understand and agree that the above listed parties intend to use the credit report(s) for the purpose of evaluating my financial situation as part of the overall surety underwriting process.

My signature below also authorizes the above listed parties to exchange with each other the complete content of my personal information and credit report. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

I understand that I may revoke my consent to these disclosures by notifying the Agency in writing.

**Applicant 1:**

**Applicant 2:**

_____			_____		
Full Legal Name			Full Legal Name		
_____			_____		
Social Security Number			Social Security Number		
_____			_____		
Date of Birth			Date of Birth		
_____			_____		
Address			Address		
_____			_____		
_____	_____	_____	_____	_____	_____
City	State	Zip	City	State	Zip
_____			_____		
Signature			Signature		
_____			_____		
Date			Date		

**Make copies as necessary for all applicants. Completed forms may be either:**

**Scanned & E-Mailed to:** \_\_\_\_\_  
**or, Faxed to:** \_\_\_\_\_

