## Applicant Certification and Authorization to Request Credit Information

I/We, the undersigned, hereby authorize the release of any and all credit history and information to SOUTH COUNTY ECONOMIC DEVELOPMENT COUNCIL ("Lender") as required for the purpose of processing and evaluating Applicant's credit transaction.

I/We am/are aware that Lender is relying on the information provided by Applicant, including but not limited to tax statements, financial reports, business records, environmental information, information described in exhibits or attachments to the Application and any other information provided to Lender for the evaluation and processing of Applicant's credit transaction to determine eligibility for this loan. I/We understand that if Applicant or any party to the Application is found to have provided false or misleading information, or failed to provide known information in this transaction, such action may be considered an adverse change to the loan and may result in the cancellation of the loan commitment, as well as any other additional action, where appropriate.

Signature		Date
Print Name/Title		Social Security Number
Home Address	City / State / Zip	
Signature		Date
Print Name/Title		Social Security Number
Home Address	City / State / Zip	