

CREDIT REPORT REQUEST FORM

Date: _____

Requested From: Wisconsin Maritime Center of Excellence, Mary Paitrick

Phone Number: (715) 732-1050

Address: 1320 Main Street, Marinette, WI 54143

I would like to order a credit report on the applicant(s) listed below. The purpose of this request is for:

Space rental

If the purpose is for rental purposes, please list the address of the rental property.

1320 Main Street, Marinette, WI 54143

Please return the report via email to **info@wmcoe.org**.

Individual Report

Joint Report (Husband and Wife)

(Please Print)

Applicant

Last Name: _____ First Name: _____

Middle Name or Initial: _____

Social Security Number: _____ Date of Birth: _____

Spouse's Last Name: _____ Spouse's First Name: _____

Spouse's SSN: _____ Spouse's Date of Birth: _____

Present Address: _____

(Street Address, City, State and Zip Code)

If you have lived at your present address less than two years, please provide your

Previous Address: _____

(Street Address, City, State and Zip Code)

By signing this form, I agree to allow my credit report to be released to the person and/or organization listed above.

Applicant Signature: _____

Co-Applicant Signature: _____