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2024 VT FLOOD RELIEF LOAN PROGRAM CREDIT AUTHORIZATION



Business Owner 1

I hereby authorize Northern Community Investment Capital to conduct credit investigations and verifications and to obtain credit bureau reports (including consumer and/or business credit report) on the undersigned and any other entity of which I am a principal. In addition, and notwithstanding anything to the contrary, I also expressly authorize the release of any financial/organizational information or data from third party sources (Banks, Financial Institutions, Insurance Companies, Attorneys, Accountants, Credit Unions, etc.) to Northern Community Investment Corporation upon its written or verbal request.

Please Note: Each p			of the applicant busines		ed to comp	lete and sign	a separate Credit	
Name	710	attionzation c	and i croonal i manolal c	tatoment.				
Social Security Number	Date of Birth Name of Primary Employer					Yrs. Service	Home (own/rent)	
,			, , ,					
Work email			Home email					
vvoik cinali			Tione email					
Physical Home Address		Home M	Home Mailing Address (if different)			State	Zip Code	
			3 ,				1	
		<u> </u>		Yes/No	Please provi	de details, attach	additonal pages as needed	
Have you or any officers of	the company ever been	involved in b	eankruptcy proceedings?	<u> </u>				
Are you or your business involved in any lawsuits, or aware			ny pending lawsuits?					
Are you required to pay child support?								
If yes, are all child support								
		Please list al	I other business entities that yo	u own.				
The following information is r	equested by the Federal G	overnment in	order to monitor the lender	s complian	ce with the I	Equal Credit Op	portunity Act. You are	
not required to furnish the inf on whether you choose to fur								
of visual observation or surna			mismit, under Federal regul	alions me	iender is req	uned to note ra	ice and sex on the basis	
	Female \square		Male □					
	Hispanic or Lati	ino 🗆	Not Hispanic or Latino					
	White □							
Black or African American □								
American Indian or Alaska Native \square								
Asian								
Native Hawaiian or Other Pacific Islander $\ \square$								
Non-Veteran \Box			Veteran □	Service	Service Disabled Veteran \square			
Signature					Date			
1								
Email com	pleted applications to:							

aquimby@communityloanfund.org <u>OR</u> mail to: NCIC, Attn: Lending, 111 Main St, Suite 100, Littleton, NH 03561

Phone: (603) 856-0714 Fax (603) 225-7425

Please be aware that email is not necessarily secure. If your information is sensitive or contains Personally Identifiable Information, such as a social security number, you may want to fax it or send by US Postal Service.