

**Credit Bureau Services, Inc.**  
**3503 N. Dixie Hwy**  
**Oakland Park, FL 33334**  
**954-561-1400**  
**FAX: 954-567-1441 or email to: info@credit1400.com**  
**www.credit1400.com**

**APPLICATION FOR BUSINESS CREDIT REPORT FOR LICENSE**

---

**Name and address of Licensing Board**

**Application Number (if known):** \_\_\_\_\_

---

**Name of Company to prepare report on**

---

**If your company operates as a D/B/A, please state the name of the D/B/A here**

---

**Address: Please enter full address. We MUST have a zip code.**

---

**Name of Qualifying Contractor on Business Application**

**Telephone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Names of President or Owner name:** \_\_\_\_\_

**Check one:** \_\_\_\_\_ **Corporation;** \_\_\_\_\_ **LLC;** \_\_\_\_\_ **Sole Proprietorship** \_\_\_\_\_ **Partnership**

**Federal Tax ID #:** \_\_\_\_\_

**Report Charge:**

**\$48 in Florida + \$2.40 credit card transaction charge or**  
**\$58 out of Florida +\$2.90 credit card transaction fee.**

**Fax Number:** \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_  
**Three digit security # on back or 4 digit number on front for AMEX** \_\_\_\_\_

**Billing Name of Credit Card:** \_\_\_\_\_

**Billing Address of Credit Card:** \_\_\_\_\_  
**Street address, City, State and zip**

**Signature:** \_\_\_\_\_