

CLIENT CREDIT REPORT AUTHORIZATION FORM

I hereby authorize and instruct *First Home Alliance, Inc.* (hereinafter "*First Home Alliance*") to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by *First Home Alliance*. I understand and agree that *First Home Alliance* intends to use the credit report for the purpose to evaluate my financial readiness to purchase a home, refinance an existing loan and/or to engage in pre- & post-purchase counseling activities.

My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to *First Home Alliance* in connection with such evaluation. 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.

In addition, in connection with determi	ining my ability	to obtain a loan, I	
authorize do not authorize			
First Home Alliance to share potential information that I have provided, inclubased upon such information. These let these counseling agencies may contact	ding any comput nders may contac	tations and assessments that have ct me to discuss loans for which	e been produced
I understand that I may revoke my cons	sent to these disc	closures by notifying First Home	Alliance in writing.
Client's Name (Print)		Client's Name (Print)	
Client's Signature Date	35	Client's Signature	Date
Social Security Number		Social Security Number	
Date of Birth		Date of Birth	
Address	City	State	Zip

EIN # 32-0026605 HUD ID #84016 UWNCA #9316 CFC #18370 3138 Golansky Blvd., Suite 202 Woodbridge, Virginia 22192 12320 Parklawn Drive, Suite 200 Rockville, MD 20852 12807 South Halsted Street Chicago, IL 60628

Dated: 06.06.2023