



▼ CLIENT PROCESSING FORM ▼

NAME LAST _____ FIRST _____ MI _____

Today's Date _____

Social Security Number _____ - _____ - _____

Date of Birth _____ Other Name/Maiden/Sr, Jr, etc. _____

Driver's License Number _____

Current Address _____ Own Rent (Please check)

City _____ State _____ Zip _____ How many years? _____

Previous Address (if less than 5 years) _____

City _____ State _____ Zip _____

Home Phone # (_____) _____ Home Fax# (_____) _____

Cell Phone # (_____) _____ Other Phone # (_____) _____

E-mail Address _____

Employer _____ Occupation _____ How long? _____

Employer Address _____ City _____ State _____ Zip _____

Work Phone # (_____) _____ Work Fax # (_____) _____

Income _____ Weekly Monthly Other Income _____ Weekly Monthly

Company/Name referred by _____

Please check short or long term goal :

- Refinance
- Purchase a Home
- Purchase a Vehicle
- Business/Personal Loan/Credit
- Increase Scores

Additional Notes/Comments _____

Please complete and mail or fax to:

PRECISE CREDIT CONSULTING, INC.

6955 West North Avenue ▼ Suite 101 ▼ Oak Park, IL 60302

Office 708.524.8055 ▼ Fax 708.524.8110