Credit Bureau Services, Inc. PROVIDING CREDIT REPORTS FOR CONTRACTOR LICENSING 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 I	Licensing Board
Application Number (i	f known):
Name of Company to p	
Name of Company to p	
If your company opera	ntes 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 Co	ontractor on Business Application
Telephone:	Cell:
Email:	
Names of President or	Owner name:
Check one:Co	rporation;LLC;Sole ProprietorshipPartnership
Federal Tax ID #:	
Report Charge:	
\$60.00 in Florida	
\$70.00 Out of State	
Fax Number:	
Credit Card Number	Expiration Date:
Three digit security # (m back of 4 digit number on front for AMEA
Billing Name of Credit	Card:
Billing Address of Cree	dit Card:
	Street address, City, State and zip
Signature:	