



NOTICE TO CONSUMER

(PLEASE COMPLETE THOROUGHLY, COMPLETELY, AND LEGIBLY AND SIGN BELOW)

Thank you for seeking a rental or leasing relationship with our company: _____.

In compliance with State and Federal laws, we are hereby notifying you that a CONSUMER REPORT, and/or INVESTIGATIVE CONSUMER REPORT may be obtained for use in evaluating our decision to accept your personal guarantee for the rental or lease of our property, the extension of credit in the form of providing tenant improvements, pro-rated and 'financed' through the lease terms, guaranty of the lease or rental agreement, retention and/or for collection purposes, in the event of a default of any of the above.

Inquiries may be made in considering your application, and the ensuing report may contain public/semi-public or private information, identification information, credit information, DMV records or other information, which could adversely affect your potential for an association with us. The report will only be obtained, according to your written instruction(s), below.

You have the right to make a direct written request to obtain copies of any reports, which may have been provided by one, or more of the following Consumer Reporting Agencies, which may have contributed to the compilation of the Consumer Report, and/or Investigative Consumer Report (copies of Privacy Policies are available on each website)

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| <p>1. EXPERIAN (www.experian.com)
 701 Experian Pkwy
 Dallas, TX 75013; or call:
 1-888-397-3742</p> | <p>3. EQUIFAX (www.equifax.com)
 P.O. Box 740241
 Atlanta, GA 30374-0241; or call
 1-800-685-1111</p> |
| <p>2. TRANSUNION (www.transunion.com)
 2 Baldwin Place
 Chester, PA 19022; or call:
 1-800-916-8800</p> | <p>4. APSCREEN (www.apscreen.com)
 P.O. Box 80639
 Rancho Santa Margarita, CA 92688; or call
 1-800-637-0223</p> |

AGREEMENT AND CONSENT

I have read this form completely, and I authorize you to obtain a Consumer Report, or Investigative Consumer Report, per the outline of available information, above. **I also (by photocopy of this form) authorize Consumer Reporting Agencies**, related or unrelated firms, public, private, government, law enforcement and/or other agencies and/or persons to release information in response to these inquiries, and release same from any and all liability in responding to such inquiries. I also fully indemnify any and all of those associated with this consent against any and all direct, indirect, and/or consequential, or other damages which might arise in the course and process of the use of this consent. I understand that I am authorizing this request in accordance with my rights under the Fair Credit Reporting Act, the Fair and Accurate Credit Transactions Act, the Gramm-Leach-Bliley Act and The California Investigative Consumer Reporting Agencies Act.

Signed: _____ Date: _____

Full Name (Printed): _____

Social Security Number: _____ Date of Birth (mm/dd/yy): _____

Current Address: _____

City/State/Zip: _____

Telephone Number: _____