

Thank you for taking the time to complete our online membership application.

Once you have completed the Final Step, we will set up your account ASAP.

Questions or Comments?

949-215-0180

9:00 AM - 5:00 PM PST

Monday - Friday

Final Step

Individual Owner

To complete the application approval process, please FAX the following documents to 949-215-0181 or you may send scanned documents to membership@clearscreening.com.

Management companies and businesses are qualified to use Experian (TRW), TransUnion, and Equifax. Unfortunately, Equifax does not permit home-based businesses or individual owners to use their service.

Once we receive the following items, it may take up to 5 hours to set up your account.

You will be notified by email once your account is set up. Thank you.

1. Please include ALL of the following:

One item from each of the following categories (one item from Category A, one item from Category B, and one item from Category C). All information you provide for Categories B and C should pertain to the rental property:

Category A:

- Driver's License
- State ID card
- Checking account information - voided check or deposit slip

Category B:

- Copy of tax bill
- Escrow statement or closing statement

Category C:

- Copy of a Deed
- Copy of Public Record
- Property Insurance
- Title Insurance

2. If your phone number is unlisted, please include a copy of your most recent phone bill.

3. Please include a completed and signed copy of the attached "LETTER OF INTENT".

4. Please print, complete and sign the following form for Credit Card Billing:

By signing this form, I authorize ClearScreening to charge the specified card for services rendered.

Name: _____

Credit Card #: _____

Credit Card CVV #: _____ (AMEX-4 digit code on front above card #; ALL OTHERS-3 digit code on back after card #)

Credit Card Type: _____

Credit Card Expiration Date: _____

Billing Address (if different than on application):

Credit Card Signature: _____

Date: _____

5. Please print, complete and sign the following form to indicate your agreement to membership terms:

**By signing this form, I agree to the terms and conditions listed in the
ClearScreening.com Membership Agreement.**

Customer Name: _____

Customer Signature: _____

Address: _____

City: _____ **State:** _____

TO BE COMPLETED BY CLEARSCREENING ONLY:

Name: _____

Title: _____

Signature: _____

Date: _____

6. Please fax, email, or mail all above required materials to:

ClearScreening
28 Argonaut, Suite 140
Aliso Viejo, CA 92656
Tel: 949-215-0180
Fax: 949-215-0181
membership@clearscreening.com

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LETTER OF INTENT

Please answer the following questions:

What is the nature of your business?

For what purpose will you use the credit report(s) ordered?

How many credit reports do you anticipate ordering each month? _____

How many credit reports do you anticipate ordering each year? _____

Will your access to the credit reports be for local reports? _____

Will your access to the credit reports be for regional reports? _____

Will your access to the credit reports be for national reports? _____

Subscriber:

Company Name: _____

Officer/Owner/Partner Signature: _____

Authorized Managers Signature: _____

Date: ____/____/____