



**WE HELP COMMUNITY DEVELOPMENT CORPORATION**

**349 se 3<sup>RD</sup> Street  
Belle Glade, FL 33430  
Business: (561) 993-0085  
Fax: (561) 993-2214**

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**CREDIT AUTHORIZATION**

**PLEASE PRINT INFORMATION AND FAX TO WE HELP COMMUNITY DEVELOPMENT CORPORATION AT THE NUMBER LISTED ABOVE.**

I/WE AUTHORIZE WE HELP COMMUNITY DEVELOPMENT CORPORATION TO OBTAIN CREDIT INFORMATION.

Borrower: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Previous Address \_\_\_\_\_  
(If less than 2 years)

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Household Size: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - - \_\_\_\_\_ DOB: \_\_\_\_\_ - - \_\_\_\_\_

Employer: \_\_\_\_\_

Yearly Income: \_\_\_\_\_

Home Phone: ( ) - \_\_\_\_\_ Business Phone: ( ) - \_\_\_\_\_

Co-Borrower: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Previous Address \_\_\_\_\_  
(If less than 2 years)

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - - \_\_\_\_\_ DOB: \_\_\_\_\_ - - \_\_\_\_\_

Employer: \_\_\_\_\_

Yearly Income: \_\_\_\_\_

Home Phone: ( ) - \_\_\_\_\_ Business Phone: ( ) - \_\_\_\_\_

Borrower's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Co-Borrower's Signature \_\_\_\_\_ Date: \_\_\_\_\_