



**Freedom Hill Cooperative, Inc**

11 Redwood Rd, Loudon NH 03307

(603) 545-1239 www.FHCoop.org askfhc@fhcoop.org

**AUTHORIZATION TO OBTAIN CREDIT REPORT**

Please complete a separate form for each applicant

Applicant's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

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

Social Security Number: \_\_\_\_\_  
(Required to perform credit check)

I authorize Freedom Hill Cooperative, Inc to use my name and social security number to pull a credit report from the Credit Bureau of NH. This will be used for the sole purpose of considering my application for membership in the Cooperative.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Mail to: Freedom Hill Cooperative Inc, 11 Redwood Rd Loudon NH 03307 along with your application

**Fair Credit Reporting Act:** The Cooperative agrees that reports are furnished in compliance with with the provisions of Public Law 91-508 aka Fair Credit Reporting Act.

Information is requested for the sole purpose of evaluating credit risk for a new membership application to the Freedom Hill Cooperative, and for no other reason. Information is for the exclusive use of the Cooperative and is to be held in strict confidence. The Cooperative agrees to dispose of the credit report in an appropriate manner (ie: shredding) after a minimum of one full year.

\_\_\_\_\_  
Representative of  
Freedom Hill Cooperative, Inc

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name and Title