

Contract Package Completion Instructions

Documents

This contract package includes the following documents:

- i) TransUnion Statement of Intent
- ii) TransUnion Membership Application
- iii) TransUnion Agreement
- iv) Pricing Agreement

You should read each document carefully and make the necessary entries to complete the document. The TransUnion documents must be completed if you wish to have access to TransUnion credit reports and FICO scores.

Signatures

Enter your name and e-mail address in the signature box at the bottom of the contract package and click the Begin Signing button to compete the electronic signing process.

If you have questions or concerns at any time, please call Customer Care toll free at 866-955-7430.



TransUnion Bon-Binding Statement of Intent

To complete the TransUnion Non-Binding Statement of Intent:

	is a	company
	CransUnion information is to assist us in credit reports.	
Our access will primarily Local	be:	
Regional		
National		
Signature		



TransUnion Membership Application

To complete the TransUnion Membership Application:

Read the entire statement and make any necessa Enter your name and title at the bottom of the ap Call Customer Care at 1-866-955-7430 if you ha	opplication. (See page 17).
Company Name:	Doing Business As:
Contact Name:	Title:
Main Telephone:	Answering Service: OYes ONo
Physical Address: Street, City, State, County and Z	ZIP Code
Nature of Business:	Date Established:
Is the applicant engaged in the underwrite	iting of insurance? • Yes • No
Is the company licensed or providing se	ervice as an attorney or detective/investigative agency? OYes No
Does the company intend to resell or release infe	formation from the consumer credit report to a third party? Yes No
Will the company or does the company provide	credit repair or credit counseling services for a fee? Yes No
Complete for Sole Proprietor, Partnership or LL	<u>.C</u>
Sole Proprietor Partnership	LLC
Owner Name:	Social Security Number:
Resident Address: Street, City, State, County and Z	ZIP Code
Owner Name:	Social Security Number:
Resident Address: Street, City, State, County and Z	ZIP Code
Complete for Corporation	
Officer Name:	Title:
Officer Name:	Title:

Officer Name	Title:							
Federal Tax ID:								
Business References (Provide Three)								
Business Name:	_ Telephone:							
Contact Name:	_							
Business Name:	Telephone:							
Contact Name:	-							
Business Name:	Telephone:							
Contact Name:	_							
I certify that the information provided on this application is true.								
Signature								
Name								
Title								
Date								



TransUnion Exhibit A Agreement

To complete the TransUnion Exhibit A Agreement:

Read the entire statement and make any necessary entries. Enter your name and title at the bottom of the application. (see page 19). Call Customer Care at 1-866-955-7430 if you have questions.					
1.	Reseller, Captira Analytical, has access to consumer reports from one or more consumer credit reporting agencies.				
2.	Subscriber,, is a				
	and has a permissible purpose for obtaining consumer reports, as defined by Section 604 of the Federal Fair Credit Reporting Act (15 USC 1681b) as amended by the Consumer Credit Reporting Reform Act of 1996, hereinafter called "FCRA." The subscriber certifies their permissible purpose as:				
	In connection with the underwriting of insurance involving the consumer or review of existing policy holders for insurance underwriting purposes, or in connection with an insurance claim where written permission of the consumer has been obtained; or				
	For a legitimate business need in connection with a business transaction that is initiated by the consumer; or In accordance with the written instructions of the consumer; or				
	In connection with a credit transaction involving the consumer on whom the information is to be furnished and involving the extension of credit to, or review or collection of an account of the consumer; or				
	In connection with a tenant screen application involving the consumer; or As a potential investor, servicer or current insurer in connection with a valuation of, or assessment of, the credit or prepayment risks.				

- 3. Subscriber certifies that it will request consumer reports pursuant to procedures prescribed by Reseller from time to time only for the permissible purpose certified above, and will use the reports obtained for no other purpose.
- 4. Subscriber will maintain copies of all written authorizations for a minimum of Five (5) years from the date of inquiry.
- 5. THE FCRA PROVIDES THAT ANY PERSON WHO KNOWINGLY AND WILLFULLY OBTAINS INFORMATION ON A CONSUMER FROM A CONSUMER REPORTING AGENCY UNDER FALSE PRETENSES SHALL BE FINED UNDER TITLE 18,OR IMPRISONED NOT MORE THAN TWO YEARS, OR BOTH.
- 6. Subscriber shall use each consumer report only for a one-time use and shall hold the report in strict confidence, and not to disclose it to any third parties; provided, however, that Subscriber may, but is not required to, disclose the report to the subject of the report only in connection with an adverse action based on the report. Moreover, unless explicitly authorized in this Agreement or in a separate agreement, between Reseller and Subscriber, for scores obtained from Trans Union LLC, or as explicitly otherwise authorized in advance and in writing by Trans Union LLC through Reseller, Subscriber shall not disclose to consumers or any third party, any nor all such scores provided under this Agreement, unless clearly required by law.

7.	With just cause, such as delinquency or violation of the terms of this contract or a legal requirement, or a material change in existing legal requirement, which adversely affects this Agreement, Reseller may, upon its election, discontinue serving the Subscriber and cancel this Agreement immediately.				
	Company (Subscriber)	Captira (Reseller)			
	Signature	Signature -			
	Name	Name	Kevin Grant Potter		
	Title	Title	President		
	Date				

7.



Pricing Agreement

To complete the Pricing Agreement: Read the entire statement and make any necessary entries. Enter your name and title at the bottom of the application. Call Customer Care at 1-866-955-7430 if you have questions. Captira Analytical will charge usage fees as indicted and are subject to change for the following services: Company Name Credit Reports: \$8.50 and/or per future applicable price schedule. **AUTHORIZATION AND ACCEPTANCE OF TERMS** I HEREBY CERTIFY that I am authorized to execute this Agreement on behalf of the company listed above. Company (Subscriber) Captira (Reseller) Signature _____ Signature ____ Kevin Grant Potter Name Name Title Title President

Date