



Please fax back to (417) 866-6142

Credit Pre - Approval Form

Company Name: _____

Company Federal ID Number: _____ - _____

Company Address: _____

City: _____ State: _____ Zip Code: _____

Principle (Owner's) Name: _____

Address (if different): _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ - _____ - _____ Date of Birth: ____ / ____ / ____

The undersigned authorizes Imperial (and its assigns), any investigative agency to investigate any information on this form. The undersigned further authorizes all parties contracted to release credit and financial information requested as part of any said investigation. The Federal Credit Equal Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract) because of all or part of the applicant's income derives from any public assistance program or because the applicant has in good faith exercised any right under the Consumer Protection Act.

Signature: _____ Date: ____ / ____ / ____

Phone Number: (____) _____ - _____

Please print and fill out one form for each principle (owner) associated with this business.

1903 N. Barnes Ave., Springfield, MO. 65803 (417) 866-6565

