



**AUTHORIZATION TO RELEASE CREDIT**

The undersigned applicant hereby authorizes Diamond Financial Services, or any of its affiliates or lenders, to make all inquiries it deems necessary to verify the accuracy of the information provided herein, and to determine my/our credit worthiness. The applicant hereby also certifies that all information regarding credit worthiness is valid, accurate, and complete.

Additionally, the undersigned agree that Diamond Financial Services, any of its subsidiaries or lenders, at any time and in its sole discretion, may disclose the status of the purposed transaction and credit data and other information concerning or relating to the undersigned or the purposed transaction to the SBA, referral sources, franchisers, vendors, loan participants, and agents of both the undersigned and Diamond Financial Services.

Verifications will be processed and sent to Diamond Financial Services of Raleigh, Inc.

Signature:		Date:	
Print Name:	Social Security #:	Date of Birth:	
Signature:		Date:	
Print Name:	Social Security #:	Date of Birth:	
Current Address (at least 2 years):			
Previous Address (if above is less than 2 years):			