



2605 7TH STREET
TUSCALOOSA AL 35401
205-344-5100

I authorize Tuscaloosa County Credit Union to obtain credit reports in connection with any loan application, insurance, credit, and any update, renewal or extension of credit received, collection purposes, responding to a court order, written instructions, or employment purposes.

As required the Credit Union will:

1. Notify me when an adverse action is taken on the basis of the credit information.
2. Identify the source of the information and disclosures about my rights.
3. Take action to ensure my information is accurate and current.
4. Report my payment to a consumer reporting agency in compliance with the requirements set forth by FCRA.

I understand that the credit union will rely on the information obtained to make a decision.

TUSCALOOSA COUNTY CREDIT UNION OBTAINS INFORMATION FROM:

Equifax Information Services
P O Box 105873
Atlanta, Georgia 30348
Phone 1-800-685-1111

**AND ANY OTHER PUBLIC AND/OR PRIVATE REPORTING RESOURCES AFFILIATED WITH
TUSCALOOSA COUNTY CREDIT UNION**

I understand that the use of my consumer credit report or the disclosure of my financial information by an officer or employee of the credit union outside the scope of this policy may be grounds for disciplinary action, including dismissal.

The Fee per application, I submit to the Credit Union is \$15.00.

Your rights under the Equal Credit Opportunity Act:

1. You cannot be denied credit based on your race, sex, marital status, religion, age, national origin, or receipt of public assistance.
2. You have the right to have reliable public assistance considered in the same manner as other income.
3. If you are denied credit, you have a legal right to know why.

Signature of Member _____

Signature of Member _____

Date _____

Date _____