BANK / CREDIT REFERENCE FORM

nasbp.org/toolkit



Signature

NIELSON, HOOVER & COMPANY

Main Office 15050 NW 79th Court, Suite 200

Phone: (305) 722-2663- Fax: (305) 558-9650 Web: http://www.nielsonbonds.com

By signing the line below, I hereby authorize the information requested and to discus		to release to ss same with them, said
to remain in effect until rescinded.		·····, ·····
Signature	Name	Date
The section be	elow is to be completed by	your bank.
	ACCOUNT INFORMATION	
Account Name:		
Address:		
Financial Institution:		
Customer Since:	Information is curr	ent as of:
	Checking	Savings
Current Balance:	\$	\$
Average Balance: (last 12 months)	\$	\$
LIN	IES OF CREDIT INFORMATION	
Line of Credit	Working Capital	Equipment
Total Approved Credit:	\$	\$
Amount Currently Borrowed:	\$	\$
Maximum Borrowed: (last 12 months)	\$	\$
Minimum Borrowed: (last 12 months)	\$	\$
Expiration Date:		
In compliance with all covenants?	☐ Yes ☐ No	☐ Yes ☐ No
	GENERAL INFORMATION	
Comments:		
	COMPLETED BY	
Name:	Title:	
Branch:	Phone:	
E-mail:	FIIOHE.	

Date

Name