

# BANK REFERENCE FORM

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FINANCIAL INSTITUTION INFORMATION		CLIENT INFORMATION	
BANK NAME		CLIENT NAME	
CONTACT NAME		ACCOUNT NO.	
ADDRESS		ADDRESS	
PHONE		PHONE	
FAX		FAX	
EMAIL		EMAIL	

Please be advised that your financial institution has been named as a credit reference for the aforementioned client's credit application. The client has authorized a review of confidential information. Thank you for your assistance in providing the requested information, below.

REQUESTED INFORMATION			
LENGTH OF TIME CLIENT HAS HELD ACCOUNT		AVERAGE DAILY BALANCE OF ACCOUNT	
DOES THE CLIENT TEND TO HAVE OVERDRAFTS?		HAS THE CLIENT TAKEN OUT ANY LOANS?	

LOAN INFORMATION <small>please complete, if applicable</small>			
BALANCE ON SECURED LOANS		TERMS OF REPAYMENT	
BALANCE ON UNSECURED LOANS		REPAYMENT SATISFACTORY?	
OUTSTANDING BALANCE		IS THE CLIENT SATISFACTORY?	

REQUESTING PARTY INFORMATION			
COMPANY NAME		COMPANY ADDRESS	
CONTACT			
PHONE			
FAX		EMAIL	

## **DISCLAIMER**

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