

# C.L.U.E Report Property Owner(s) Authorization

**Important Notice and Disclaimer:** Pursuant to the Fair Credit Reporting Act (FCRA), 15 U.S.C. § 1681 et seq. a consumer may, upon providing proper identification, request a free copy of a report and may dispute with the consumer reporting agency the accuracy or completeness of any information in a report. To obtain a free CLUE report, homeowner will need to contact <https://personalreports.lexisnexis.com>

I, the Property Owner(s), authorize Property I.D. to order and deliver the C.L.U.E. Personal Property Risk Only Report on my behalf.

Property Owner(s) Name: \_\_\_\_\_

Property Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Agent Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

You are authorized to e-mail copy of the C.L.U.E Risk Only Report to: \_\_\_\_\_

## PAYMENT OPTIONS (PLEASE CHECK ONE)

CREDIT CARD

Name As It Appears On Card: \_\_\_\_\_ Signature: \_\_\_\_\_

VISA  MC  AMEX  DISCOVER

Card Number: _____	Exp Date (MM/YY): _____	Amount: <b>\$19.50</b>	Billing Zip Code: _____
--------------------	-------------------------	------------------------	-------------------------

CHECK Make check payable to Property I.D. and mail to 1001 Wilshire Boulevard, Los Angeles, CA 90017.

ESCROW

Escrow Company: \_\_\_\_\_ Escrow Officer: \_\_\_\_\_

Office Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Escrow Number: \_\_\_\_\_ Est. Closing Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_

Property I.D. will order for property owner(s) a C.L.U.E Risk Only Report for the above-reference property and defer payment through escrow. However, in the event that the property is sold under subsequent escrow, the seller(s) is/are responsible for payment of Property I.D. fees.

Property Owner Signature: _____	Date: ____/____/____
---------------------------------	----------------------

I understand and acknowledge the above conditions

**MUST BE SIGNED TO BE PROCESSED**