

## **Pinnacle Request for Consideration**

I hereby request consideration as a Pinnacle Repossession Organization agent. The facts set forth in my request for consideration are true and complete. I understand that if I am accepted, any false statement on this application shall be considered sufficient cause for agent termination. If I qualify as an agent additional information may be requested.

## **PLEASE ANSWER ALL QUESTIONS**

Today's Date:					
Primary Territory for which reques					
Would you consider other areas No	o: Yes: If Yes, V	Vhere?:			
First Name:	Last Name:		Middle	:	
Social Security Number:	Date of Birth	າ:	Sex; Male: _	Female: _	
	City:		State:	Zip:	_ How Long?:
(Current Address)					
	City:		State:	Zip:	_ How Long?:
(Previous Address if current address	s is less than 5 years)				
Height: Weight: M	arital Status; Single: N	Married: Wio	dowed:	Divorced:	Partnered:
Are you a Citizen of the U.S.A.? Ap	plicant; Yes: No:	_ Spouse; Yes:	No:	No Spouse	:
Drivers Licenses Number:		State:	Expiration	Date:	
Income: Monthly:	Annually:	Cell Phone / Direct	: Number:		
Have you ever been convicted or P	ead Guilty or Nolo Contend	ere to a crime?· No	v Yes	If Yes D	escrihe
Are you currently subject to any pe	nding litigation or unsatisfie	d civil judgment or	arbitration a		Yes:
				ortnori (	iorni II.Ci
Business Name:					
State of residence of entity:	_ EIN:	_ Business Phone:			
Is the entity owned and operated o	nly by you; Yes:No:	Partnership; Yes: _	No: W	ritten Contract	; Yes: No:
Have you ever been bonded; No: _	Yes: if yes, wha	t job:			
Business Email:		_ Personal Email: _			
You are hereby authorized to make		•			
credit agencies or bureaus of your	= ::				=
consumer report may be made who personal characteristics and mode	•	= -			= :
for consideration as if I was writing		the signature	c. Applicant	JON DOIDW FAIT	o.o.m.g and request
	5 .	_	l D'		
(Signature of Applicant)	Date: _	Pers	sonai Phone: _		