



DATE \_\_\_\_\_

## CLIENT'S INFORMATION

FULL NAME \_\_\_\_\_  
FIRST MIDDLE LAST

CURRENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

SOCIAL SECURITY NUMBER (MM/DD/YYYY) \_\_\_\_\_ DRIVER LICENSE NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

CELL PHONE NUMBER \_\_\_\_\_ HOME PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ WORK PHONE NUMBER \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_ JOB DESCRIPTION \_\_\_\_\_ SINCE (MM/YYYY) \_\_\_\_\_

## CREDIT REPAIR INFORMATION

CREDIT MONITORING COMPANY \_\_\_\_\_

USERNAME: \_\_\_\_\_ PASSWORD: \_\_\_\_\_

SECURITY QUESTIONS ANSWER: \_\_\_\_\_ FOUR-DIGIT PIN: \_\_\_\_\_

## CREDIT KARMA LOGIN INFORMATION

USERNAME: \_\_\_\_\_ PASSWORD: \_\_\_\_\_

## SERVICE QUESTIONS

**PLEASE ANSWER THE FOLLOWING QUESTIONS BELOW, FOR US TO BETTER ASSIST YOU IN OUR SERVICES:**

Why are you repairing your credit? Refinance/Home: Sale or Purchase• Refinance/Auto or Purchase• Improve Credit Score• Establish Your Business Credit (*please circle*)

Do you have a loan officer? Yes \_\_\_\_\_ No \_\_\_\_\_

How did you hear about DLJMM Financial Services? Yellow book• Website• Newspaper• Referral (*please circle*)

If your answer was referral, who referred to you? \_\_\_\_\_

Do you currently have a fraudulent alert on your file? If so, provide the filing date. \_\_\_\_\_

Have you ever hired a credit repair? \_\_\_\_\_

If so, do you have a police report? \_\_\_\_\_

DLJMM Financial Services  
5151 Meadow Parkway Suit 601  
Richmond, Texas 77441  
Office Number: (203) 309-0457 ext.200  
Mobile Number (832) 444-9609



**Signature**

**Date**

**Credit Agent**

**Date**

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