



Form 2

• Los Angeles, CA • Fremont, CA • Norcross, GA • Wakefield, MA

BANK REFERENCE INQUIRY

(Credit Release Authorization)

Company Name: _____ Date: _____

I _____, of _____ do hereby authorize the credit information on my account(s) to be released to Max Group Corporation for the purpose of establishing a line of credit.

Signature: _____ Date _____

Title: _____

Bank Name: _____ Account # _____

Dear Sir or Madam: _____ Bank Fax # _____

The firm mentioned above had made an application to Max Group Corporation for extension of credit and provided your company as a reference. Please share this firm's credit experience with us. The information provided is for internal use and will remain strictly confidential.

FILL BY BANK ONLY

Please fax your respond back to us at (626-854-1549)

Date Account Opened _____

Type _____

Account Average _____

Current Balance _____

Returned Checks in Last 12 months _____

Line of credit _____

General Rating (Satisfactory/Unsatisfactory) _____

Signature of Processor: _____

Position: _____ Date _____

Request Submit by: _____ Date: _____