



## CREDIT AUTHORIZATION

I hereby authorize all banks, lending institutions, consumer reporting agencies, credit associations, or other persons to release to Lester Buildings, LLC any and all information which they may have pertaining to my credit, financial transactions, or any other similar information.

This information will be held in strictest confidence, and will aid Lester Buildings, LLC in determining whether or not you will be hired as one of our sub-contractors.

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

Owner's Name (Printed): \_\_\_\_\_

Owner's Name (Signature): \_\_\_\_\_

Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Please return to:  
Lester Buildings LLC  
Attn: Cathy Telecky  
1111 2<sup>nd</sup> Ave. S.  
Lester Prairie, MN 55354