AVALON FINANCE, INC.

Financing Solutions for Business Owners & Developers of Commercial Projects

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CREDIT AUTHORIZATION

I/We hereby authorize the release of any and all information to AVALON FINANCE, INC. and/or its assigns (the "Lender") for the purpose of underwriting our credit transaction with the Lender. I/We authorize the Lender to release any such information to any entity deemed necessary for any purpose related to our credit transaction and we understand that the Lender will not release our information to any vendor or interest that is unrelated to this transaction.

Name: _____
First MI Last

Signature:_____ Date:_____

Social Security Number: _____

Current Residence:

_____
Street

_____
City, State, Zip Code