Credit Inquiry Request

For faster processing, please complete the form Online before printing.

WELLS FARGO

This form is for use by creditors requesting account information (includes deposit accounts, loans, and lines) on Wells Fargo Bank, N.A. customers. Please complete the form, obtain the customer authorization signature and fax request to 1.844.879.0544.
Our response letter will be returned to the fax number or email address provided on this form.

TYPE or complete in BLACK INK. Use only CAPITAL LETTERS

Fax Request To Balance Confirmation Services.....1-844-879-0544
Online Instructions.....www.wellsfargo.com/vod

SECTION 1: CREDITOR / VENDOR INFORMATION

Company Name

Attention

Email Address

Street Address

City

State

Zip

Requester Phone Number

Return Fax Number

SECTION 2: WELLS FARGO CUSTOMER INFORMATION

Wells Fargo Business Account Name

Wells Fargo Consumer Account Name

ACCOUNT NUMBER IS REQUIRED FOR PROCESSING*

Please list the specific deposit account, loan or business line number for each account you would like processed.

*** If a ZBA (zero balance account) is provided, please also include the parent account number and name.**

SECTION 3: CUSTOMER AUTHORIZATION

I authorize and direct Wells Fargo, N.A to release any of the following information to the above named requester on the above listed deposit accounts, loans, lines and/or cards: Account Number, Account Type, Account Open Date or Customer since Date, Account Holders, Average or current Balance in general figure range, amount of credit extended, current amount outstanding in general figure range, account status of Open or Closed, Closed Date and Current Interest Rate, In addition CDs and IRAs may include Term, Maturity Date, Interest Payment, Interest Method and Penalty. For Commercial Accounts: I understand that a fee may be charged for this service as stated in the Wells Fargo Bank, N.A. schedule of fees or Treasury Management Pricing Disclosures applicable to the accounts above. By signing below, I attest that I am authorized to sign this request on behalf of the customer listed above.

Printed Name of Person Signing for Customer | **Signature of Person Signing for Customer** | **Date**