



## GENERAL AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize KIMCO REALTY CORPORATION and any of its affiliates to obtain and/or release any and all information that it may deem appropriate pertaining to my credit worthiness. I agree that this information may be obtained from and/or released to any source including, but not limited to, any consumer-reporting agency. I also agree that this authorization shall be valid for twelve (12) months, and that a photocopy of this Authorization shall be a valid original.

**TENANT D/B/A:** \_\_\_\_\_  
**KIMCO SITE #:** \_\_\_\_\_  
**SHOPPING CENTER NAME:** \_\_\_\_\_  
**CITY, STATE:** \_\_\_\_\_

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Name:	_____	Name:	_____
Social Security Number:	_____	Social Security Number:	_____
Date of Birth:	_____	Date of Birth:	_____
Driver License #:	_____ State: _____	Driver License #:	_____ State: _____
Home Address:	_____ _____	Home Address:	_____ _____
Previous Address:	_____ _____	Previous Address:	_____ _____
Home Telephone Number:	_____	Home Telephone Number:	_____
Work Telephone Number:	_____	Work Telephone Number:	_____
Fax Number:	_____	Fax Number:	_____
E-Mail:	_____	E-Mail:	_____
Signature:	_____	Signature:	_____
Date:	_____	Date:	_____

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