

Service Agreement

Part B – FCRA Compliance Checklist

FCRA Requirement – Establishment of Permissible Purpose

What is the nature of your business (Rental Management, Mobile Home Park Management, Real Estate Sales, etc.)?

I/We will be using Consumer Reports for the purpose of:
For what purpose will you be using the reports?

- Tenant Screening – qualifying an applicant for a rental; and

- Legitimate business need in connection with a business transaction that is initiated by the consumer

Pursuant To The Fair Credit Reporting Act:

- Yes No I have read and understand my responsibilities under the Fair Credit Reporting Act (Appendix A & B of Service Agreement)

- Yes No I understand employees may not request reports on themselves

- Yes No I agree that before sending applications to Orca Information, Inc. for processing, all consumers/applicants will read and sign the rental applications.

- Yes No I understand and agree that all confidential information/screening reports will be received in a secured area only (away from other employees, and people) and handled only by those designated to receive and review confidential information on consumer/applicants).

- Yes No I understand that applicants/consumers will not be given the report received from Orca Information, Inc., or any part of the report. Instead they will be given a copy of their Consumer Rights enabling them to go through the proper channels to procure copies of their confidential information.

- Yes No I understand that if “adverse action” is taken against applicant due to any derogatory information or lack of information on the consumer report (all or part of the information reported to you by Orca Information, Inc.) or caused you, the End User and Landlord to increase their deposit or require a co-signer or require any additional compensation of any kind for the rental, it is my obligation to give applicant a copy of the Consumer Right’s letter.

- Yes No I understand that the consumers/applicants confidential information will not be discussed in front of any other person(s) regardless of their relationship unless permission is given to do so by the applicant / consumer in writing. Signature and date will be on the written permission document.

- Yes No I agree to keep such written permission with the applicants/consumers file in a secured area for up to five (5) years, and at the appropriate time will shred the information in a shredder **before** disposing (sometimes files are kept in a computer).

- Yes No I agree to keep all confidential information on a consumer/applicant in a LOCKED FILE CABINET (and/or in a room with a locked door).

- Yes No When storing applicant/consumer reports or other confidential information in a computer(s), I agree to keep passwords and access codes to consumer reports in a secure place.

- Yes No I agree that only those employees authorized to review the confidential information on a computer will have access to those codes.
- Yes No I agree that computer passwords and codes for accessing applicants/consumer confidential information will be changed every ninety (90) days.
- Yes No I agree that any computer passwords given to employees who leave the company and had access to consumer reports will be deactivated immediately.
- Yes No I agree to train employees who have access to the consumer reports and who interact with applicants and tenants, on the Fair Credit Reporting Act (FCRA).
- Yes No I understand that the credit reports and/or any part of the report on the applicant/consumer may not be re-sold.
- Yes No Are you associated or affiliated with any of the following?: Adult entertainment, bail bondsman, check cashing, credit counseling, credit repair, dating service, financial counseling, genealogical research, massage service, company that locates missing children, pawn shop, private detective, individual seeking information for private use, spiritual counseling, subscriptions (magazines, book clubs), tattoo service, insurance company, law enforcement (unless for employment screening purposes), legal services.

If you are associated with any of the above, contact Orca's Compliance Department for additional information.

I have read and understand my responsibilities under the FCRA.

User Authorized Signature	Print Name	Title	Date
Orca Authorized Signature	Print Name	Title	Date