

**PAUL'S GARAGE, INC.  
d/b/a WOLF'S FUEL OIL & GASOLINE  
P.O. BOX 190  
YORK SPRINGS, PA 17372**

**Signed Release Authorization Form**

**Request for Credit Information:**

**RUSH PLEASE, NEED ASAP**

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

**Fax No.:** 717-528-4100

**Email:** Joanna@eandbtransportation.com

To: Customer Services

**\*Bank/Branch and Phone No. :** \_\_\_\_\_

Comments: Credit Inquiry

Your bank has been given to us as a credit reference by the below mentioned. We would appreciate any information that you can provide. **Please be assured that all information supplied will be kept confidential.** Thank you for your time.

If needed, this form can be faxed to the above number, attn.: Joanna; or emailed to **Joanna@eandbtransportation.com.**

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**\*Customer Name (please print):** \_\_\_\_\_

**\*Signature for Release of Bank Info.:** \_\_\_\_\_

**\*Checking Acct. No.:** \_\_\_\_\_

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**THE FOLLOWING IS TO BE FILLED OUT BY THE BANK:**

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

Comments (**Date Opened; Account in Good Standing?; any NSF's**): **Please be specific, not just N/A (thank you!)**

\_\_\_\_\_

Name of Person Completing Form: \_\_\_\_\_

Thank you!