eurocredit

APPLICATION FORM FOR THE ACCESS OF LEGAL PERSONS

TO THE

CREDIT INFORMATION SYSTEM (CREDIT REPORTS DATABASE)

(Art. 7 L. D. 196/2003)

To be sent by registered letter

Eurocredit SpA
Viale Ascione 12
80055 Portici (NA)
Attn. Of "Access Services for Consumer Protection" dept.

Object: access request to data present in your Credit Information System (credit reports database)

The udersigned, _____ born in _____

_____il ___ / ___ / _____, and resident in_____

_____, tel. _____,

as Legal Representative of _____,

with seat in_____,

fiscal code _____, VAT Number _____,

asks for

the access to the private data probably present in your Credit Information System with regards to the represented juridical subject.

To the purpose, following copies are attached:

- IDENTITY CARD
- UP-TO-DATE CHAMBER OF COMMERCE CERTIFICATE.

Please send the result by:

❑ fax no. _____;

❑ mail at the a.m. address.

Date_____

Kind Regards

SIGNATURE _____