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CONSUMER CREDIT REPORT AUTHORIZATION

As an applicant for employment with Rowan County Government, I hereby authorize Rowan County Government to obtain my consumer credit report for use in making an employment decision. Should, as a result of the consumer credit report obtained, an adverse employment action occur, you will be notified in writing of this action, your rights under the Fair Credit Reporting Act (FCRA), and provided a copy of the report obtained.

_____ Date
Applicant Signature

Identifying Information: Full Name _____
Date of Birth _____
Social Security No. _____

ROWAN COUNTY
NORTH CAROLINA

I, _____, A Notary Public for said County and State, do hereby certify that _____, personally appeared before me this _____ day of _____, _____ and signed the foregoing instrument.

_____ Date
Notary Seal

My commission expires: _____