

**Permission given to release information to Cross Insurance**

\_\_\_\_\_  
*Signature*

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

**BANK REFERENCE CHECK**

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

Principal: \_\_\_\_\_

Bank Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Account #: \_\_\_\_\_ Date Opened: \_\_\_\_\_

Average Balance: \$ \_\_\_\_\_

Line of Credit Amount: \$ \_\_\_\_\_ Amount in use: \$ \_\_\_\_\_

How Secured: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

How does the Principal handle his banking matters? Satisfactory \_\_\_\_\_

Unsatisfactory \_\_\_\_\_

\_\_\_\_\_  
*Bank's Official Signature*

\_\_\_\_\_  
*Title*

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

Upon completion, please mail, fax or email this form to:

**Cross Insurance Agency, Bangor  
Attn: Judy Mills  
P.O. Box 1388  
Bangor, ME 04402**

**Phone: (207) 947-7345 Fax: (207)947-7589 Email: judy.mills@crossagency.com**

*Your assistance in this matter is greatly appreciated!*