



AUTHORIZATION TO RELEASE BANK CREDIT INFORMATION
(For non-Wells Fargo Accounts *)

Date: _____

Name on Bank Account: _____

Account Holder Address: _____

Bank Account Number: _____

_____ is hereby authorized to release
(name of financial institution)

credit and account information to Ernie's Fueling Network, for the purposes of obtaining
commercial credit.

Authorized Signature: _____ MUST PRINT FIRST
< THEN SIGN BY HAND

Print name: _____

-IMPORTANT NOTE -
NAME MUST BE SIGNED AND PRINTED BY HAND – ELECTRONIC OR
COMPUTER GENERATED “STAMPED” SIGNATURES WILL NOT BE ACCEPTED.
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***Wells Fargo Bank requires a special authorization form which your sales rep can provide.**