



3840 'A' Street Southeast, #105-197  
Auburn, WA 98002

## **MEMBERSHIP AGREEMENT**

**Independent, Private Landlords & Homeowners**

**Important: All information must be completed accurately and in its entirety to ensure timely processing.**

This Membership Agreement is between \_\_\_\_\_ "Client" and Call Eleanore Screening Services and will commence upon the date of Client signature below.

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### **1. Services Offered / Requested**

Call Eleanore Screening Services is an agency, which specializes in consumer report and background screening information. Client agrees that information requested and obtained from Call Eleanore Screening Services shall be used for the purpose of procuring a tenant screening Report and for no other purpose. Client understands that compliance with the National Credit Bureau's consumer information protection requirements restricts the ability for Call Eleanore Screening Services to provide a detailed credit report to the Client and instead the Credit Report Decision Model Result system will evaluate the report through a standard set of parameters and return a credit result in its place. One of three possible credit standing results will return - (Positive, Mid-Range and Negative). Client confirms they understand that a full Consumer Credit Report from the national bureau will not be included and are satisfied with the Credit Report Decision Model result in its place.

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### **2. Compliance**

The federal Fair Credit Reporting Act and other applicable state laws restrict the purposes under which any person may obtain credit report or other consumer information from a credit reporting agency. As defined in Section 619 of the Fair Credit reporting act. "any person who knowingly and willfully obtains information on a consumer from a consumer reporting agency under false pretenses shall be fined under title 18 United States Code, imprisoned for not more that two years, or both. Member/Subscriber agrees to abide by all State and Federal guidelines with regard to obtaining a consumer report.

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### **3. Release of Information**

Prior to requesting credit information from Call Eleanore Screening Services, Client will obtain a dated, signature release from the consumer acknowledging and authorizing the procurement of a Consumer Report. If Client submits a verbal application to Call Eleanore Screening Services, Client agrees to retain consumer documents for a period of 5 years, or provide the consumer documents to Call Eleanore Screening Services for storage. Client agrees to comply with any periodic audits which may be initiated by Call Eleanore Screening Services to ensure compliance to this process.

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### **4. Disclosure/Storage of Report Data**

Client agrees the screening report obtained from Call Eleanore Screening Services will not be duplicated and/or disclosed to the prospective applicant. No report information will be disclosed to any third party unless affiliated with Client in its official duties. Client agrees to keep report information confidential and under secure storage. Should a rental application be denied in whole or in part on the basis of credit information, the member agrees to furnish the

applicant with the phone number of the credit bureau, whereby the applicant can request a copy of their credit report for free within 60 days of denial.

Experian Consumer Assistance 1-888-397-3742  
Call Eleanore Screening Services 1-800-945-4168

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### 5. Information Accuracy

Call Eleanore Screening Services makes every effort possible to make use of all available sources, including but not limited to national credit bureaus, government agencies, selected public records and such other sources that are deemed reliable. However Call Eleanore Screening Services can not and will not guarantee the correctness or the completeness of such information obtained from third party sources.

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### 6. Indemnification

Client agrees to indemnify Call Eleanore Screening Services for any liability or expense regarding information gathered or the omission of information from third party sources. Client also agrees to indemnify and hold Call Eleanore Screening Services harmless for failure to obtain written authorization before initiating a credit investigation and to further indemnify and hold Call Eleanore Screening Services harmless of any and all claims arising out of the improper use, disclosure or storage of information obtained by and from Call Eleanore Screening Services resulting from breach by the Client. In any event, Call Eleanore Screening Services, its officers, employees, and agents and/or suppliers shall not be held liable to Client, any prospective applicant or any third person for any consequential damages, no matter however arising.

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### 7. Billing and Payment

Client agrees to pay Call Eleanore Screening Services within 30 days of billing. A service charge of 1.5% per month will apply on invoices over 30 days past due. Accounts 60 days past due are subject to credit hold and/or collection action. Conditions and pricing contained in the Call Eleanore Price List are subject to change upon written notice from Call Eleanore Screening Services.

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### 8. Recommendation/Decisions

Call Eleanore Screening Services does not recommend or make any rental, employment, or character decisions. Final decision is left to Client.

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### 9. Termination / Suspension of Services

Call Eleanore Screening Services reserves the right to suspend its performance, in whole or in part, under this Agreement if in good faith Call Eleanore Screening Services determines that the Client has not met the requirements of law or regulation regarding the procurement of Consumer Reports or has not in good faith complied with security access requirements.

Landlord Name (Print) : \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_ (Mont) \_\_\_\_\_ (Day), \_\_\_\_\_ (Year)

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**Contact Information**

Landlord /  
Homeowner Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

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**Billing Information:**

Billing Contact Name: \_\_\_\_\_

(Billing Address -- if different than above):

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_

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**Authorized Users**

Name \_\_\_\_\_

Email Address: \_\_\_\_\_

Name \_\_\_\_\_

Email Address: \_\_\_\_\_

Name \_\_\_\_\_

Email Address: \_\_\_\_\_

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Please fax or email to:

Call Eleanore Screening Services  
Fax: 800.945.4178 or 253-288-0871  
Email: [screeningsupport@calleleanore.com](mailto:screeningsupport@calleleanore.com)

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