

CREDIT DISCRIMINATION QUESTIONNAIRE

7. INFORMATION ABOUT THE CREDIT / FINANCIAL INSTITUTION INVOLVED IN YOUR COMPLAINT

Name of company or organization _____ Phone number (____) _____

Street address _____ City _____ State _____ Zip _____

Address of headquarters _____ Phone number (____) _____

Name and title of chief executive officer _____

Do you have an attorney? Yes No If yes, name of attorney _____

Attorney's address _____ Phone number (____) _____

2a. YOUR HISTORY WITH THE CREDIT / FINANCIAL INSTITUTION INVOLVED IN YOUR COMPLAINT

What did you apply for?

Credit

Credit card

Loan: Amount of loan _____ Type of loan _____

Other _____

Date applied ____/____/____

Date denied ____/____/____

Reason given for denial _____

If you applied for a loan, have you received one from this institution previously? Yes No

If yes, please provide dates, amounts, and outcomes of your application.

