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# Upgrade My Credit

## Client Agreement

901 W. Bardin Rd. Suite 306  
Arlington, Texas 76017  
817-886-0302 off.  
817-887-0816 fax  
www.upgrademycredit.com

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### APPLICANT INFORMATION

Mr. Mrs. Ms. PLEASE PRINT CLEARLY  
Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Apt #: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

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### SALES REP INFORMATION

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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### PAYMENT METHOD

Select One      VISA      MASTERCARD      DISCOVER      CHECK      MONEY ORDER

If paying by credit/debit card please use the attached authorization form.

If paying by personal check, you must include driver's license number below.

State: \_\_\_\_\_ #: \_\_\_\_\_

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I have read and understand the disclosure statement attached, and agree with the terms set forth in said document.

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

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### Office Use Only.....

I hereby agree as a Representative that the client has read the disclosure statement and has given me all necessary documentation for the company to proceed.

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

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### For Rep Use Only

Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Received By: \_\_\_\_\_

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### For Office Use Only

Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Received By: \_\_\_\_\_

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Do not pay cash to your representative. Make checks payable to Upgrade My Credit. A \$25.00 service fee will be added to returned checks.

# **Upgrade My Credit Terms & Conditions**

## **Upgrade My Credit (We) Agrees to the Following:**

- 1) Upgrade My Credit agrees to monitor the Client's Credit Report for a period of 12 months.
- 2) Upgrade My Credit agrees to provide educational materials to the client.
- 3) Upgrade My Credit agrees to evaluate the Client's current credit reports and to identify inaccurate, erroneous, or obsolete information, and to advise the client of the steps needed to dispute the above identified information.
- 4) Upgrade My Credit agrees to prepare all necessary correspondence in order to dispute the inaccurate, erroneous, or obsolete information contained in the client's credit reports.
- 5) If Upgrade My Credit fails to improve client's credit profile within one year, Upgrade My Credit will refund 110% of the client's money minus \$\_\_\_\_\_ paid for credit report and evaluation.

## **The Client Agrees to the Following:**

- 1) To provide Upgrade My Credit with a copy of all correspondence received from the Credit Reporting Agencies in a timely manner.
- 2) To notify Upgrade My Credit of any changes in your personal information not limited to, but to include any changes in phone numbers, address, or name changes in a timely manner, and to supply us with the necessary documentation needed to inform the Credit Bureaus of said changes.
- 3) To notify Upgrade My Credit at any time during the contract period if you fail to receive credit reports from any of the bureaus for a period of more than 45 days.
- 4) To call 1-888-567-8688 within 48 hours of signing this agreement so that the Credit Bureaus can no longer sell your credit information without your permission. Failure to make this call can, and will slow down your credit processing.
- 5) Client understands that the results obtained by Upgrade My Credit on their behalf are dependent on numerous factors not limited to but including the client's timely return of all correspondence, and the credit reporting agencies ability to verify the information in question.
- 6) Failure to follow the above listed conditions will void the client's right to receive a refund of their money as described in paragraph 5 above.

## **Disclosure Statement**

You have the right under the Fair Credit Reporting Act 15 USC Section 1781 ET SEQ., to obtain a copy of your credit file from consumer Credit Reporting Agencies. You have the right to dispute inaccurate, erroneous, or obsolete information that is reported on your credit file. The Credit Reporting Agency must then investigate and modify or remove inaccurate information. The Credit Reporting Agencies may not charge you a fee for this service. Credit Reporting Agencies are required to follow reasonable procedures to ensure that the information they report is accurate, however, mistakes occur. If the reinvestigation does not resolve the dispute to your satisfaction, you may send a brief statement to the Credit Reporting Agency to keep in your file, and to be included in any reports subsequently sent out.



## Consumer Credit File Rights Under State and Federal Law

You have a right to dispute inaccurate information in your credit report by contacting the credit bureau directly. However, neither you nor any "credit repair" company or credit repair organization has the right to have accurate, current, and verifiable information removed from your credit report. The credit bureau must remove accurate, negative information from your report only if it is over 7 years old. Bankruptcy information can be reported for 10 years.

You have a right to obtain a copy of your credit report from a credit bureau. You may be charged a reasonable fee. There is no fee, however, if you have been turned down for credit, employment, insurance, receive a free copy of your credit report if you are unemployed and intend to apply for employment in the next 60 days, if you are a recipient of public welfare assistance, or if you have reason to believe that there is inaccurate information in your credit report due to fraud.

You have a right to sue a credit repair organization that violates the Credit Repair Organization Act. This law prohibits deceptive practices by credit repair organizations.

You have the right to cancel your contract with any credit repair organization for any reason within 3 business days from the date you signed it.

Credit bureaus are required to follow reasonable procedures to ensure that the information they report is accurate. However, mistakes may occur.

You may, on your own, notify a credit bureau in writing that you dispute the accuracy of information in your credit file. The credit bureau must then reinvestigate and modify or remove inaccurate or incomplete information. The credit bureau may not charge any fee for this service. Any pertinent information and copies of all documents you have concerning an error should be given to the credit bureau.

If the credit bureau's reinvestigation does not resolve the dispute to your satisfaction, you may send a brief statement to the credit bureau, to be kept in your file, explaining why you think the record is inaccurate. The credit bureau must include a summary of your statement about disputed information with any report it issues about you.

The Federal Trade Commission regulates credit bureaus and credit repair organizations. For more information contact:

The Public Reference Branch  
Federal Trade Commission  
Washington, D.C. 20580

### I HAVE READ AND UNDERSTAND MY RIGHTS CONTAINED HEREIN

Date \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

# Limited Power of Attorney

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Be it known that I, the undersigned, am the individual listed below and as such, do hereby grant a Limited Power of Attorney to Upgrade My Credit. Upgrade My Credit, and any and all persons in their employ, shall have the necessary power and authority to undertake and perform the following on my behalf.

I hereby give permission to Upgrade My Credit to sign my name on all documents written on my behalf for the sole purpose of challenging and verifying account information as instructed by myself to all consumer credit reporting bureaus.

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Client Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Client has signed in the presence of this witness whose signature appears below:

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Upgrade My Credit  
901 W. Bardin Rd, Suite 306  
Arlington, Texas 76017  
817-886-0302  
[www.upgrademycredit.com](http://www.upgrademycredit.com)



**AUTHORIZATION FOR RECURRING PAYMENT (Debit or Credit)**

This form when signed will authorize Upgrade My Credit to charge your credit or debit card for services rendered by:

**WMH Consulting Group  
dba Upgrade My Credit  
901 W.Bardin Rd.  
Arlington, Texas 76017  
(817) 468-8090**

**CARD HOLDER INFORMATION:**

\_\_\_\_\_   
Cardholder's Name (as it appears on card)

\_\_\_\_\_   
Billing Address, City, State, Zip

\_\_\_\_\_   
Phone Number

\_\_\_\_\_ / \_\_\_\_\_ \_\_\_\_\_   
Card Number    Expiration Date                          Security Code (on back)

As the authorized cardholder and signer, I acknowledge and agree to the above terms and conditions.

\_\_\_\_\_ \_\_\_\_\_   
Card Holders Signature    Date

Name		Initials	
Name		Initials	

Notice of right to cancel: You may cancel this contract, without penalty or obligation, within Three (3) days after the date you signed this agreement.

# Credit Report Request Form

Experian  Equifax  Trans Union

## Client's Information

Name: First \_\_\_\_\_ Mi \_\_\_\_\_ Last \_\_\_\_\_

Marital Status: Married Single Divorced

Social Security: \_\_\_\_\_ DOB: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_

## Spouse Information (If Applicable)

Name: First \_\_\_\_\_ Mi \_\_\_\_\_ Last \_\_\_\_\_

Marital Status: Married Single Divorced

Social Security: \_\_\_\_\_ DOB: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Hm \_\_\_\_\_ Wk: \_\_\_\_\_

## Reason For Preliminary Evaluation

Apply for home loan    Apply for Auto loan    Apply for Credit Card    Other

I, \_\_\_\_\_, hereby authorize this request and understand that it will result in an inquiry on my credit report.

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

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

REP: \_\_\_\_\_

# PLEASE READ THIS NOW!

Dear New Client:

Upgrade My Credit would like to welcome you as a client and let you know that we appreciate your business. Please save this letter as it contains information that will be helpful to you as you go through the credit repair process.

Occasionally, you may receive letters from credit reporting agencies stating that credit repair is illegal or unethical. Let us assure you that we follow all Fair Credit Reporting Act (FCRA) and Credit Repair Organizations Act (CROA) laws, as well as Federal Trade Commission (FTC) guidelines, and are without a single consumer complaint.

Below is a list of items necessary to process your file. If any of these items have not been sent to the Corporate Office, please contact your Sales Representative.

## **Photocopies of the following:**

- **Social Security Card or a document with your social security number**
- **Drivers License or State I.D. with current address**
- **A bill showing current address**
- **Credit Reports, or the Credit Report Request form so that we can get them.**

## **ADDITIONAL INSTRUCTIONS**

1. Please read the information on the back of your client agreement carefully.
2. Upgrade My Credit is an Independent Agent working on your behalf. Please make all checks payable to Upgrade My Credit.
2. FAX or Mail all correspondence you receive from the three credit reporting agencies within 4 days to:  
FAX: 817-887-0816  
Upgrade My Credit  
901 W. Bardin Rd., Suite 306  
Arlington Texas 76017
3. Do not apply for credit while you are in the Credit Repair Program unless absolutely necessary.
4. Notify us if you do not receive updated credit reports within 45 days after your initial processing, or within any 60 day period. 817-886-0302
5. Notify us with any name or address changes, and provide a copy of new identification.
6. Call 1-888-567-8688 to “opt-out” within the next 24 hours. Failure to do so could result in a slow down of your processing.



TO: **Upgrade My Credit**  
901 W. Bardin Rd. #306  
Arlington, TX 76017

FAX: 817-887-0816

## **NOTICE OF RIGHT TO CANCEL**

You may cancel this contract, without penalty or obligation, within THREE (3) days after the date you signed this contract.

If you cancel, any payment made by you under the contract will be returned within TEN (10) business days after the date of receipt by the seller of your cancellation notice.

To cancel this contract, mail, fax, or deliver a signed dated copy of this cancellation notice or other written notice, to **Upgrade My Credit** at above address or FAX number, not later than midnight of the 3<sup>rd</sup> day after your enrollment payment is received.

I hereby cancel this transaction:

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

By: \_\_\_\_\_  
Client Client

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

**\*ONLY SIGN AND RETURN IF YOU INTEND ON CANCELLING SERVICE\***





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I hereby cancel this transaction:

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

By: \_\_\_\_\_  
Client Client

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

**\*ONLY SIGN AND RETURN IF YOU INTEND ON CANCELLING SERVICE\***