STATE OF CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION

License Services Division 450 Columbus Blvd, Ste 801 Hartford, CT 06103

 $Email: \underline{dcp.occupationalprofessional@ct.gov}\\$



Major Contractor Registration - Financial Institution Credit Reference

Instructions

Per the Regulations of Connecticut State Agencies § 20-341gg-3 (1), an applicant for a Major Contractor Registration is required to supply a credit reference from a financial institution. Completion of this form may be used in lieu of a traditional credit reference letter.

The applicant shall complete Section I and then provide this form to their financial institution to complete Sections II through IV. Once completed, the applicant shall attach the form to the application for registration.

| Section I: Applicant Information | | | | | | |
|---|---------------------------------------|----------|----------------------------|--|-----------------|--------------------------|
| Name of Applicant (use Corporation, LLC | | Partner | ship name if filing | as such) | | |
| Trade (DBA) Name if Applicable | | | | Name of Owner (if different from applicant) | | |
| Trade (DDA) Name ii Applicable | | | | Name of Owner (if different front applicant) | | |
| Street Address | | City | | | State | Zip Code |
| Telephone Number (with area code) | | <u> </u> | Email Address | | | |
| Section II: Financial Instituti | on Information | | | | | |
| Name of Financial Institution | | | | | | |
| Name of Representative of Financial Institution | | | | Title of Representative | | |
| Street Address | | City | | | State | Zip Code |
| Telephone Number (with area code) | | <u> </u> | Email Address | | | |
| Section III: Credit History | | | 1 | | | |
| Age of Account/Business Relationship | The applicant has been a institution. | | vorthy and reliable Yes | customer in relation to the | eir financial r | responsibilities to this |
| Comments: | | | Tes | 110 | | |
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| Section IV: Attestation As a representative of the financi | | | | | ant, I conf | irm that the |
| | | | auto fistou fien | | Date | |
| Signature of Financial Institution Represe | ntative identified Above | | | | Date | |