



AmerUSA Corporation  
 3665 East Bay Drive #204-183  
 Largo, Florida 33771  
 Ph 727.467.0908 Fx 727.467.0918

**Update**

## Landlord or Employer Account Update Form

Please print and FAX this completed form to 727-467-0918.

**Important:** It may take up to 24 hours for your information to be updated without an order attached.

**Need to Place an Order?** Include your applicant information for normal processing.

### Client Information

Employer or Landlord Name: \_\_\_\_\_ USER ID: \_\_\_\_\_

### New Contact Information

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

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

An important note about email: AmerUSA is not responsible for those ISPs which may block attachments or emails from our servers. If you do not receive your results within our published turnaround times, you are responsible for contacting AmerUSA so an alternate method can be used. AmerUSA will not know whether or not your report has been received.

Preferred Delivery Method (✓check only one):  FAX  Email

### New Credit Card Billing Information (Visa or MasterCard ONLY) We **DO NOT** accept American Express or Discover

Account Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_ (mm/yy)

Individual's Name on Account: \_\_\_\_\_

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

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

### Update Agreement

I hereby grant AmerUSA the right to charge the above referenced credit card (or any other credit card I may provide in writing or by telephone) for each applicant inquiry I (or my authorized persons) submit. I also understand there are no refunds granted once an order has been placed and that I am responsible for checking the current pricing, policy and forms for all products and services located at <http://www.AmerUSA.net> before placing any order. I or AmerUSA may revoke this agreement at anytime for any reason.

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

Print Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ (if different from client)

