

Questions? 1-800-352-9676

Mail to: Plaintiff Support, 6400 Main Street, Suite 120, Williamsville, NY 14221 **or Fax to:** (716) 639-8382

ATTORNEY / LAW FIRM INFORMATION

Attorney name		Law firm name	
_____		_____	
Address (no., street, city or town, state, and ZIP code)			Ste. no.
_____			_____
Phone (main)	Phone (secondary)	Fax	E-mail
_____	_____	_____	_____

FUNDING INFORMATION

Post-settlement funding
Amount requested

Required documents and information:

- retainer agreement
- credit authorization
- breakdown of settlement proceeds
- fully executed general release and/or court-approved settlement documents setting forth settlement amount and parties' acceptance of said amount
- name of insurance company issuing settlement proceeds

Provide a copy of any pleading, or complete Title of Action below

Title of Action

Are there any outstanding judgments or IRS tax liens against the applicant? (if yes, describe below)

NO YES

Has the applicant been or is the applicant currently involved in a bankruptcy or insolvency proceeding? (if yes, provide discharge date below)

NO YES

Has the applicant sought or received funds from any other funding company? (if yes, provide company name and amount funded below)

NO YES

Sign Here ▶

Signature of application preparer	Date
_____	_____

Name of application preparer (please print)

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Name of Law Firm _____ Telephone _____
Street Address _____ Fax _____
Suite _____ Email _____
City, State Zip _____

Name of Applicant _____ Soc. Sec. No. _____
Home Address _____ Date of Birth _____
City, State Zip _____

This form authorizes the procurement of a consumer report (credit report) by Blue Ocean Partners LLC, d/b/a Plaintiff Support Services.

In connection with this request, I authorize all credit agencies to release information they may have about the individual listed above, to the person or company with which this statement has been filed, or their agents, Fidelfacts Metropolitan New York, Inc. & Kroll Factual Data.

This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested.

I understand that I have the right to request additional disclosure as to the nature and scope of the credit review, upon written request, within a reasonable period of time.

Plaintiff Support Services, Inc. may rely upon the information contained in this application the attachments in all respects.

Signature _____

Date _____

Name (please print) _____