



661 N. 50th St.  
Omaha, NE 68132  
one 402-884-6716  
Fax 402-933-0939

**FOR INTERNAL OFFICE USE**  
Sales Rep : \_\_\_\_\_  
Phone # : \_\_\_\_\_

**CREDIT APPLICATION**

Date : \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_  
(If over \$5,000, financial statements are required)

Company Name \_\_\_\_\_

Street \_\_\_\_\_ Box \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Auth A/P Person \_\_\_\_\_

Authorized Purchase Agent \_\_\_\_\_

**LIST FOUR TRADE REFERENCES BELOW:**

Name : \_\_\_\_\_ Phone : \_\_\_\_\_ Fax : \_\_\_\_\_  
Address : \_\_\_\_\_ Contact / Officer : \_\_\_\_\_  
City : \_\_\_\_\_ State, Zip : \_\_\_\_\_

Name : \_\_\_\_\_ Phone : \_\_\_\_\_ Fax : \_\_\_\_\_  
Address : \_\_\_\_\_ Contact / Officer : \_\_\_\_\_  
City : \_\_\_\_\_ State, Zip : \_\_\_\_\_

Name : \_\_\_\_\_ Phone : \_\_\_\_\_ Fax : \_\_\_\_\_  
Address : \_\_\_\_\_ Contact / Officer : \_\_\_\_\_  
City : \_\_\_\_\_ State, Zip : \_\_\_\_\_

Name : \_\_\_\_\_ Phone : \_\_\_\_\_ Fax : \_\_\_\_\_  
Address : \_\_\_\_\_ Contact / Officer : \_\_\_\_\_  
City : \_\_\_\_\_ State, Zip : \_\_\_\_\_

Federal ID # \_\_\_\_\_ In Business Since \_\_\_\_\_

Nature of Business \_\_\_\_\_

Name of Your Bank \_\_\_\_\_ Acct # \_\_\_\_\_

Bank Phone # \_\_\_\_\_ Bank Officer \_\_\_\_\_

Bank Fax # \_\_\_\_\_

Ownership: Corporation\* \_\_\_\_\_ Partnership \_\_\_\_\_ Proprietorship \_\_\_\_\_ Franchise \_\_\_\_\_  
*\* If Corporation, please list officers on separate page with state*

I hereby authorize those listed above to disclose information on open accounts, lines of credit, and other pertinent information relevant to establishing an account with J. Edwin Brown LLC

\_\_\_\_\_  
Signed Title Date