

# C. H. Brown Co., LLC



● P.O. Box 789 ● 20 West Frontage Road ● Wheatland, WY 82201  
 ● Phone: 307-322-2545 ● Fax: 307-322-9192 ● email: [chbco@chbrownco.com](mailto:chbco@chbrownco.com)

## Credit Application

Completed forms may be mailed, faxed or emailed

### APPLICANT INFORMATION

<b>Borrower is (Check One):</b>	Individual	DBA	S-Corp	Partnership	<b>CDL Start:</b>	<b>Owner/Operator Since:</b> /
	Corporation	Proprietorship				

<b>Are you (Check One):</b>	Married	Unmarried (includes Single, Divorced or Widowed)	<b>U.S. Citizen:</b>	Yes	No
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<b>Company Name or DBA:</b>			<b>Year Incorporated:</b>	<b>Business Address:</b>	
<b>Last name:</b>	<b>First:</b>	<b>Middle Initial:</b>	<b>Date of Birth:</b> / /	<b>Social Security Number:</b>	<b>Federal Tax ID:</b>
<b>Address:</b>			<b>Phone Number:</b>	<b>Commercial Driver's License Number / State:</b> /	
<b>City/State/Zip Code:</b>			<b>Work Phone Number:</b>		

<b>Co-Applicant or Co-Owner (if applicable):</b>	<b>City/State:</b>	<b>Phone Number:</b>	<b>Social Security Number:</b>
<b>Date of Birth:</b> / /	<b>U.S. Citizen:</b> Yes No		

<b>Applicant to Operate Vehicle</b> Yes No	<b>New Equipment Purpose?</b> Replacement Expansion	<b>Current Fleet:</b> #of Trucks: #of Trailers:
<b>Materials to be hauled:</b>		

### CREDIT REFERENCES

<b>Bank Name:</b>	<b>City:</b>	<b>Acct Number:</b>	<b>Contact:</b>	<b>Phone Number:</b>
<b>Vehicle Finance Reference:</b>	<b>City:</b>	<b>Acct Number:</b>	<b>Contact:</b>	<b>Phone Number:</b>
<b>Vehicle Finance Reference:</b>	<b>City:</b>	<b>Acct Number:</b>	<b>Contact:</b>	<b>Phone Number:</b>

**NOTICE JOINT INTENT**

**Check One:** We intend to apply for joint credit (Signature required below).  
I am applying for credit in my own name only, and am relying only on my income/assets in my name only for repayment of this loan.

Applicant Name:

Signature

Date: / /

Co- Applicant Name:

Signature

Co- Applicant Name:

**BALANCE SHEET**

<b>Assets</b>	<b>Value</b>	<b>Liabilities (What You Owe)</b>	<b>Monthly Payment</b>	<b>Balance Due</b>
Cash On Hand And In Bank		monthly bills - include credit cards		
<b>Vehicles (Current Value)</b> Make                      Model                      Year		vehicles (amounts owed)		
<b>Mobile Equipment (Current Value)</b>		<b>Mobile equipment (list amounts owing)</b>		
<b>Real Estate (Home, Trailer Home, Land, Etc.)</b> Address                                      City/State		<b>Mortgages On Real Estate (State "No Lien" If No Lien)</b> company                      city/state                      acct.#		
<b>Other Assets (Stocks, Retirement Funds, Etc.)</b>		<b>Other liabilities</b>		
<b>Total Assets</b>		<b>Total liabilities</b>		

**NET WORTH**

**TOTAL ASSETS MINUS  
TOTAL LIABILITIES**

The undersigned acknowledge(s) that this signed application, submitted for the purpose of obtaining credit from CH Brown Co., is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/We will give prompt written notice of any subsequent substantial change in such financial condition occurring before discharge of this obligation to you. I/We understand that you will retain this application whether or not you approve the credit in connection with which is submitted. You are authorized to check any credit or employment history or any other information herein.  
Any willful misrepresentation on this statement could result in a fine and/or imprisonment under provisions of the U.S. criminal code.

**Applicant:**  
\_\_\_\_\_  
DATE: / /

**Joint Applicant:**  
\_\_\_\_\_  
DATE: / /

**THE USA PATRIOT ACT REQUIRES THAT WE OBTAIN IDENTITY VERIFICATION FROM YOU  
BEFORE ESTABLISHING YOUR ACCOUNT.**

MINIMUM INFORMATION REQUIRED:

NAME;

DATE OF BIRTH (FOR INDIVIDUALS);

ADDRESS

FOR INDIVIDUALS

RESIDENCE AND, IF DIFFERENT, MAILING ADDRESS;

FOR PERSONS OTHER THAN INDIVIDUALS (SUCH AS CORPORATIONS,  
PARTNERSHIPS AND TRUSTS)

PRINCIPAL PLACE OF BUSINESS AND, IF DIFFERENT, MAILING ADDRESS;

IDENTIFICATION NUMBER

U.S. PERSON

TAXPAYER IDENTIFICATION NUMBER (e.g. SOCIAL SECURITY NUMBER,  
INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER OR EMPLOYER  
IDENTIFICATION NUMBER);

NON- U.S. PERSON

ONE OR MORE OF THE FOLLOWING: A U.S. TAXPAYER IDENTIFICATION  
NUMBER, PASSPORT NUMBER AND COUNTRY OF ISSUANCE; ALIEN  
IDENTIFICATION CARD NUMBER; OR NUMBER AND COUNTRY OF  
ISSUANCE OF ANY OTHER GOVERNMENT ISSUED DOCUMENT EVIDENCING  
NATIONALITY OR RESIDENCE AND BEARING A PHOTOGRAPH OR SIMILAR  
SAFEGUARD.

ADDITIONAL INFORMATION

IDENTIFICATION SUCH AS AN UNEXPIRED DRIVER'S LICENSE WITH A PHOTOGRAPH, EXCEPT THAT IF YOU ARE DISABLED, ELDERLY, OR A YOUTH WITHOUT A PHOTO IDENTIFICATION CARD, IDENTITY MAY BE VERIFIED BY A SOCIAL SECURITY, MEDICARE, MEDICAID OR OTHER INSURANCE CARD ALONG WITH A SEPARATE DOCUMENT THAT SHOWS YOUR NAME AND ADDRESS. (EACH JOINT SIGNER ON AN ACCOUNT WILL BE REQUIRED TO PROVIDE THIS INFORMATION WITHIN 30 DAYS. FAILURE TO PROVIDE INFORMATION WITHIN THIS TIME FRAME WILL RESULT IN SIGNATORY REVOCATION ON THE ACCOUNT.)

ENTITIES OTHER THAN INDIVIDUALS WILL BE REQUIRED TO PROVIDE DOCUMENTS SHOWING THE EXISTENCE OF THE ENTITY SUCH AS FINANCIAL STATEMENTS, REGISTERED ARTICLES OF INCORPORATION, PARTNERSHIP AGREEMENTS OR TRUST INSTRUMENTS. (ADDITIONAL "MINIMUM" INFORMATION MAY BE REQUESTED FROM INDIVIDUALS WITH AUTHORITY OR CONTROL OVER SUCH ACCOUNTS AS THE BANK DEEMS NECESSARY.)