

CONFIDENTIAL INFORMATION FORM

Name of Firm: _____ DBA: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Telephone #: (____) _____ Fax #: (____) _____ Month & Year Business was started: _____

Federal ID #: _____ State Sales Tax #: _____

Proprietorship
If proprietorship show name and residence address of owner below

Partnership
If partnership show name and residence address of each partner below.

Corporation
If corporation show name, residence address and title of each officer below.

Associate # 1 Name: _____ Title: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Social Security #: _____ Telephone #: (____) _____

If business is less than 3 years old, number of years with similar experience: _____

Associate # 2 Name: _____ Title: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Social Security #: _____ Telephone #: (____) _____

If business is less than 3 years old, number of years with similar experience: _____

Name and address of current bank account:

Bank Name: _____ Account #: _____

Address: _____ Telephone #: (____) _____ Fax #: (____) _____
City State Zip

Name, address, fax and phone numbers of active trade suppliers.

Supplier Name: _____ Account #: _____

Address: _____ Telephone #: (____) _____ Fax #: (____) _____
City State Zip

Supplier Name: _____ Account #: _____

Address: _____ Telephone #: (____) _____ Fax #: (____) _____
City State Zip

Supplier Name: _____ Account #: _____

Address: _____ Telephone #: (____) _____ Fax #: (____) _____
City State Zip

Supplier Name: _____ Account #: _____

Address: _____ Telephone #: (____) _____ Fax #: (____) _____
City State Zip

CREDIT RELEASE AUTHORIZATION

Please consider this my authorization to release any and all information concerning my credit history with your organization to Eads Brothers Furniture, Co., 4414 Wheeler Avenue, Fort Smith, AR 72901, Phone 479-646-6617 Fax 479-646-6815.

SIGNED: _____ Title: _____ Date: _____

All information must be provided in order to process application