



**NEW ACCOUNT INFORMATION / CREDIT APPLICATION**

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KSS Sales Representative # \_\_\_\_\_

**COMPANY NAME** \_\_\_\_\_ **DBA NAME** \_\_\_\_\_  
 (As it appears on your tax returns)

**Billing Information**

**BILLING CONTACT: Email Order Confirmation?** YES \_\_\_\_\_ NO \_\_\_\_\_

**NAME** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**BILL TO ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Shipping Information** (For multiple shipping addresses please attach on a separate sheet)

**OFFICE CONTACT: Email Order Confirmation?** YES \_\_\_\_\_ NO \_\_\_\_\_

**NAME** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**SHIP TO ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PURCHASING CONTACT: Email Order Confirmation?** YES \_\_\_\_\_ NO \_\_\_\_\_

**NAME** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**TYPE OF BUSINESS** \_\_\_\_\_ **YEARS IN BUSINESS** \_\_\_\_\_

**ARE YOU TAX EXEMPT?** NO \_\_\_\_\_ YES \_\_\_\_\_ If Yes, please attach a Certificate of Exemption Form.  
 Taxes will be applied to all orders pending receipt of this form.

**PRESIDENT** \_\_\_\_\_ **VICE PRESIDENT** \_\_\_\_\_

**OWNER** \_\_\_\_\_ **MANAGER** \_\_\_\_\_

**BANK NAME** \_\_\_\_\_ **CONTACT** \_\_\_\_\_

**BANK ADDRESS** \_\_\_\_\_ **ACCOUNT #** \_\_\_\_\_

**BANK PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**CREDIT REFERENCES:**

1. **NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **FAX** \_\_\_\_\_

2. **NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **FAX** \_\_\_\_\_

Corporate	Grand Rapids	Jackson	Petoskey	Plymouth	South Bend
5053 Sports Dr Kalamazoo, MI 49009 269.349.6637 Fax 269.349.6699	410 44th St SW, Suite A Grand Rapids, MI 49548 616.455.5090 Fax 616.455.5330	132 W Pearl St Jackson, MI 49201 517.784.7891 Fax 517.784.7895	2861 US 31 North Alanson, MI 49706 231.347.6865 Fax 231.347.2058	46001 5 Mile Rd Plymouth, MI 48170 734.453.1111 Fax 734.453.1114	208 E Sample St South Bend, IN 46601 574.233.7535 Fax 574.233.7645

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**I/WE REQUEST OUR INVOICES TO BE SENT TO US VIA** (Choose one)

**EMAIL** Please provide Email Address if different than front \_\_\_\_\_

**FAX** Please provide Fax # if different than front of form \_\_\_\_\_

**WOULD YOU LIKE TO BE SET-UP FOR ONLINE ORDERING?** YES \_\_\_\_\_ NO \_\_\_\_\_

(If yes, we will contact you for additional information)

**KSS ENTERPRISES TERMS AND CONDITIONS**

**PLACING ORDERS:**

- For your convenience, orders may be placed by phone, fax, and email or through our Customer Service Remote (On-Line Order Entry.)

**ORDER DEADLINE:**

- A 12:00 p.m. cut off time for order placement is applicable on orders scheduled for next day delivery.

**MINIMUM ORDER:**

- All orders less than \$125.00 will be assessed a \$10.00 handling charge.
- Orders picked up by customers are excluded.

**RETURN POLICY:**

- A Return Goods Authorization (RGA) number must be obtained prior to the return of any product. This number must be visible on the package before KSS Enterprises will credit a return. Please obtain an RGA by calling your Account Coordinator, Sales Consultant or the phone number of the location nearest you.
- No credit will be extended for any quantity greater than the amount purchased.
- We are pleased to order any product for you that we do not stock, however, full case quantities must be ordered, and all Special Orders are non-returnable and non-refundable.
- No returns will be accepted after 60 days from invoice date. Claims for damaged product must be reported to KSS within 48 hours after delivery.
- All returns are subject to review before credit is issued. A re-stock fee, including freight, may apply.

**TERMS:**

- Terms are Net 30 Days – Late Fee 1-1/2% per month.
- There will be a \$25.00 service charge for all returned checks.
- Applicant agrees to pay the total amount due on each invoice from KSS Enterprises in accordance with the payment terms thereon, unless otherwise agreed in writing. If not paid when due, Applicant agrees to pay a service charge of 18% per annum (1 ½% per month) or the highest rate allowed by law. Applicant agrees to pay all costs and expenses of collection, whether or not suit is filed, including reasonable attorney fees, incurred by KSS Enterprises in litigation, appeals, bankruptcy proceedings, or otherwise.
- Applicant and KSS Enterprises agree that any disputes between the parties arising out of their business relationship shall be resolved by the appropriate state district, state circuit, or federal court located in the city of Kalamazoo, Michigan and that said venue(s) shall be exclusive venue(s) to resolve such disputes.

**SALES TAX:**

- Until we receive a certificate of exemption form, all customers will be considered taxable.

I / We understand the above Terms and Conditions, and that invoices and monthly statements will be the only notice that payment is due. I / We also understand and agree to pay the standard legal collection fees required to obtain payment if account becomes delinquent.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

**Return to:** KSS Enterprises / Accounting Department

Attn: Bob Schoolmaster via fax 269-349-6699 or email to [bschoolmaster@kssenterprises.com](mailto:bschoolmaster@kssenterprises.com)