

NEW ACCOUNT INFORMATION / CREDIT APPLICATION

	PAGE 1 OF 2		KSS Sales Representative #	
COMPANY NAME		DBA NAME		
(As it appears on your tax returns)				
Billing Information				
BILLING CONTACT: Email Order Confi	rmation? YES NO)		
NAME	EMAIL			
PHONE	FAX			
BILL TO ADDRESS				
CITY	STATE	ZIP		
Shipping Information (For multiple ship	pping addresses please at	ttach on a separate	sheet)	
OFFICE CONTACT: Email Order Confi	rmation? YESN	o		
NAME	EMAIL			
PHONE	FAX			
SHIP TO ADDRESS				
CITY	STATE	ZIP		
PURCHASING CONTACT: Email Order	r Confirmation? YES	NO		
NAME	EMAIL	·		
PHONE	FAX			
TYPE OF BUSINESS	YEAF	RS IN BUSINESS _		
ARE YOU TAX EXEMPT? NO YES		a Certificate of Exemp d to all orders pending		
PRESIDENT	VICE PRESIDEN	IT		
OWNER	MANAGER			
BANK NAME	CONTACT			
BANK ADDRESS	ACCO	UNT #		
BANK PHONE	FAX			
CREDIT REFERENCES: 1. NAME		DHONE		
1. NAMEADDRESS				
2. NAME				
ADDRESS				
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CONTACT NAME:	EN	1AIL:		
his is the name of the person who will be doing	the online ordering			
CONTACT'S DEFAULT SHIPPING ADDRES				
ddress the contact person orders for most frequency	uently if there are multiple "ship-	-to" addresses or	the account.	
WHAT TYPE OF USER: Standard	Approver	Multi-user		
F USER IS STANDARD, DO THEY REQUIR	E APPROVAL? Yes	No		
CATALOG OPTIONS:				
1) Show entire catalog?		Yes	No	
2) If yes, show pricing in catalog?			No	
3) If yes to question one, allow orde	ring from general catalog?		No	
I/WE REQUEST OUR INVOICES TO BE	SENT TO US VIA (Choose or	ne)		
EMAIL	FAX			
KSS Enterprises accepts the following page	yment forms; cash, check, or A convenience fee will be adde		se to pay by credit	t card, a 3%
KSS	ENTERPRISES TERMS AND COND	DITIONS		
 For your convenience, orders may be placed by ORDER DEADLINE: A 12:00 p.m. cut off time for order placement is MINIMUM ORDER: All orders less than \$250.00 will be assessed at Orders picked up by customers are excluded. RETURN POLICY: A Return Goods Authorization (RGA) number in package before KSS Enterprises will credit a rephone number of the location nearest you. No credit will be extended for any quantity great We are pleased to order any product for you the non-returnable and non-refundable. No returns will be accepted after 60 days from a delivery. All returns are subject to review before credit is TERMS: Terms are Net 30 Days – Late Fee 1-1/2% per There will be a \$25.00 service charge for all ret Applicant agrees to pay the total amount due of otherwise agreed in writing. If not paid when due highest rate allowed by law. Applicant agrees in life appropriate state district, state circuit, or fee exclusive venue(s) to resolve such disputes. SALES TAX: Until we receive a certificate of exemption form I / We understand the above Terms and Conditing payment is due. I / We also understand and a account becomes delinquent. 	a \$10.00 handling charge. In the obtained prior to the return of eturn. Please obtain an RGA by calling the return than the amount purchased. The provided at we do not stock, however, full case invoice date. Claims for damaged provided at the control of the return of eturn. Please obtain an RGA by calling the return of the provided at the provided at the return of the return o	any product. This is a gyour Account Cook equantities must be report of the product must be report of the product must be report of 18% per action, whether or not lings, or otherwise. Dut of their business mazoo, Michigan and able.	number must be visible ordinator, Sales Considered, and all Spectated to KSS within 48 learnum (1 1/2% per more than said venue (s) slearnum (s) sle	e on the ultant or the cial Orders are hours after ereon, unless on the reasonable resolved by hall be
Print Name	Date			-
Signature	Title _			

Return to: KSS Enterprises / Accounting Department Attn: Brandi Miller via fax 269-349-6699 or email to bmiller@kssenterprises.com



CUSTOMER DELIVERY CONTACT INFORMATION FORM

Please provide the following information requested for delivery purposes and return this form with the New Account Form / Credit Application.

COMPANY NAME
RECEIVING CONTACT: On occasion we may need to reach you for delivery verification
#1: Name
#1: Phone
#2: Name
#2: Phone
Receiving Hours:
Signature required upon delivery? YES NO
CONTACT FOR DELIVERY CONFIRMATION: Who should receive the delivery email confirmation
#1: Name
#1: Email
#2: Name
#2: Email
May we leave product if nobody is there? If so, where to place product
Receiving Special Instructions
Do you close due to bad weather?
If yes, can we still deliver?
Who do we contact if closed: NAME
PHONE

Return to: KSS Enterprises / Accounting Department

Attn: Brandi Miller via fax 269.349.6699 or email to bmiller@kssenterprises.com