



Company Information and References

FEDERAL ID TAX: 31-1696715

Date of Application: _____ KOST® USA Sales Representative:

COMPANY INFORMATION

Company Name								
Address				City			State	Zip
Phone	Fax			Website			Federal ID #	
Sales Tax Status	Taxable <input type="checkbox"/>		Exempt <input type="checkbox"/> (Sales Tax Exemption Certificate Required)					
Bill to Address				City			State	Zip
Ship to Address				City			State	Zip
Special Delivery Instructions								
Purchasing Contact				Phone			Fax	Email
Accounts Payable Contact				Phone			Fax	Email

CREDIT INFORMATION

Credit Limit Desired				Anticipated Purchases (per month)			DUNS #	
Principal Bank				Account #				
Address				City			State	Zip
Bank Representative				Phone			Fax	Email

TRADE REFERENCES (MINIMUM OF THREE)

I am submitting my own references and do not need to fill out the TRADE REFERENCES section.

Company Name								
Address				City			State	Zip
Account Established				High Credit Extended				
Contact Person				Phone			Fax	Email
Terms								

Company Name								
Address				City			State	Zip
Account Established				High Credit Extended				
Contact Person				Phone			Fax	Email
Terms								

Company Name								
Address				City			State	Zip
Account Established				High Credit Extended				
Contact Person				Phone			Fax	Email
Terms								

Signature (please print out and sign) _____

Print Name _____

Date _____

**Please return completed form to Accounts Receivable:
f: (513) 492-5555 or e: accountsreceivable@kostusa.com**

This page must be signed to start the review process.



1000 Tennessee Ave. Cincinnati, OH 45229
(800) 661-9391 | kostusa.com



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Liquid Assets™**

Page 1 of 1