

**APPLICATION FOR OPEN ACCOUNT CREDIT TO**

**N. KOHL GROCER COMPANY**

(d/b/a) KOHL WHOLESALÉ ("Kohl")  
130 Jersey Street  
P O Box 729  
Quincy, IL 62306-0729 217-222-5000  
Toll Free: MO/IA 800-245-5645 IL 800-222-5645  
Accounting Fax: 217-222-5035  
Website: [www.kohlwholesale.com](http://www.kohlwholesale.com)  
Email: [credit@kohlwholesale.com](mailto:credit@kohlwholesale.com)



**Incomplete and illegible applications will not be processed.**

Sales Rep #: \_\_\_\_\_

Date: \_\_\_\_\_

Account #: \_\_\_\_\_

**APPLICANT/CUSTOMER INFORMATION**

Name: \_\_\_\_\_

Trade Name (if Different): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

County: \_\_\_\_\_

Phone Number: (     )     \_\_\_\_\_

Fax Number: (     )     \_\_\_\_\_

Email Address: \_\_\_\_\_

Federal Tax I.D. Number/Social Security Number: \_\_\_\_\_

**ORGANIZATIONAL STATUS** (check one)

Corporation     Limited Liability Company     Partnership     Sole Proprietorship     Other \_\_\_\_\_

If Corporation or LLC, State of Organization: \_\_\_\_\_

Year: \_\_\_\_\_

President or Manager: \_\_\_\_\_

Type Of Business: (Restaurant, School, Nursing Home, Tavern, Catering, etc.) \_\_\_\_\_

Length of time in business: \_\_\_\_\_

Hours of Operation: Open \_\_\_\_\_

Close \_\_\_\_\_

**BILLING INFORMATION** (if different from above)

Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: (     )     \_\_\_\_\_

Fax Number: (     )     \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_



## CUSTOMER BANK REFERENCES

Name of Bank: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name of Bank: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_

## BUSINESS CREDIT REPORT AUTHORIZATION

Customer and Guarantor(s) authorize Kohl to obtain a business credit report for each of them. Customer and Guarantor(s) understand that Kohl intends to use the credit report to confirm business addresses, verify banking and other credit information, and evaluate whether sufficient income is available to support Customer's Application for Open Account Credit. Any business credit reports will only be used by Kohl in processing the Application and all credit reports will be retained on file by Kohl along with all other Application documents. This Authorization will remain in full force and effect if Kohl approves this Application and sells product to Customer on an open credit account until sixty (60) days after such Customer's balance is paid in full or Customer's last purchase from Kohl, whichever is later. Otherwise, this Authorization shall expire one hundred twenty (120) days from the date this Application is signed.

## CUSTOMER TRADE REFERENCES (companies with whom customer has established credit)

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_

## TERMS AND CONDITIONS

By signing and submitting this application, Customer agrees to the following terms and conditions. Kohl is authorized to contact any and all of the owners, principals and references listed above regarding Customer's credit standing. If the application for open account credit is approved, Customer agrees to pay its account in full within the time and according to the terms specified in each invoice issued to Customer. If this account is not paid as specified: (a) interest at the rate of one and three quarter percent (1.75%) per month shall accrue on the unpaid balance; (b) Kohl reserves the right to withhold any shipments or further credit, or impose additional terms as a condition of any further credit; (c) Kohl may pursue all available legal remedies against Customer and any Guarantor; and (d) Customer and Guarantor(s) consent to personal jurisdiction in any state or federal court having venue in Adams County, IL; and (e) all costs and expenses incurred by Kohl in collecting any amounts due, including reasonable attorney's fees, will be included in the amount due from and paid by Customer and Guarantor(s). Customer agrees to waive all claims against Kohl, and hold harmless and defend Kohl from any injuries or damages resulting from or related to any failure of customer's premises, including all electrical, communications, fiber optics, data processing, telephone and other utility lines connected to customer's premises, to comply with applicable building and safety code requirements.

In the event of any changes in ownership or legal structure of the applicant, I/We agree to notify Kohl Wholesale in writing of the changes by certified mail, mail return receipt requested. Kohl Wholesale shall not be affected by such changes until receipt of this written notification of these changes from the applicant.

 X

Signature

Title

Date



**KOHL WHOLESALE PRIVACY PROTECTION POLICY**

We at Kohl Wholesale value your patronage and want to maintain your confidence in our business relationship. With this in mind, we have formulated the following principles and guidelines regarding the collection, use and security of personal information you provide to us. **INFORMATION COLLECTION** During our relationship, we may collect and use nonpublic personal information about you from public records, market research, consumer reporting agencies, medical service providers, transactions with us, our affiliates or others; information provided from you on applications, claim forms or other forms; and information obtained from our agents. We strive to keep this information accurate and up-to-date. If you discover this information is incomplete, inaccurate or not current, please notify us immediately at the address or telephone number listed on this application. Our employees' limited access to customer information is based on job function. We educate our employees so they understand the importance of customer confidentiality and privacy. Employees who disregard their privacy responsibilities are subject to discipline. To better service your needs, your nonpublic personal information may be shared. All of our companies work together to provide the services you may want. By sharing information about your accounts and relationships among companies, we can serve you more efficiently and make it easier for you to do business. We do not disclose any nonpublic personal or business information about our customers or former customer to anyone, except as permitted by law. We may disclose information to third parties when we believe it is necessary to conduct our business or where disclosure is permitted by law. Information may be disclosed to others who assist us in providing business services and or assisting us in processing transactions which you have requested or initiated. Information may also be disclosed for audit purposes to help us prevent fraud to law enforcement and regulatory agencies, to consumer reporting agencies or as otherwise permitted by law.

<b>FOR OFFICE USE ONLY</b>				Account #:
Pricing				
Meat	Produce	Level	Allowances	
Do you want any special sheets?				
How do you want the special sheets? (Check one) <input type="checkbox"/> Mail <input type="checkbox"/> Faxed <input type="checkbox"/> Email				
Statement Print Day: <input type="checkbox"/> Monday <input type="checkbox"/> Thursday				
Preferred Delivery Time (4 hour window required): 1 <sup>st</sup> Preference			2 <sup>nd</sup> Preference	
Preferred Delivery Day(s) (circle):    M   T   W   TH   F				
Estimated Weekly Purchases: \$		Estimated \$ per drop: \$		
SPECIAL INSTRUCTIONS:				

<b>ACCOUNTING USE ONLY</b>		
Terms:	Approved By:	Date:
_____	_____	_____
Revised Terms:	Approved By:	Date:
_____	_____	_____