



Customer Application Form

Cash on Delivery (COD) Account

To establish a Cash on Delivery (COD) account with us, kindly fill out the form on the second page and send it via email to **KSICustomerApplications@ksiautoparts.com**.

Upon receipt, one of our dedicated Customer Service Representative will promptly process your request and notify you once your account has been successfully created.

Please note that incomplete forms may result in delays as a Customer Service Representative will need to reach out to you to gather the missing information before proceeding with the account creation process.

Should you have any questions or concerns regarding the form or the account setup process, please do not hesitate to reach out to us at **800.KSI.PART** (574.7278). We are here to assist you.

Thank you for choosing KSI, and we look forward to serving you.



100 Wade Avenue
South Plainfield NJ 07080
908.754.7154
www.ksiautoparts.com

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General Information

Business Type ☐ Individual / Sole Proprietor ☐ C Corp ☐ S Corp ☐ Partnership ☐ LLC / LLP

Legal Business Name _____ Federal Tax ID No. _____

Business Address _____ Hours of Operation _____

Business Phone _____ Mobile No. _____ Fax No. _____

Owner Name _____ Year(s) in Business _____

AP Contact _____ Phone No. _____ Email _____

Sales Tax Exempt ☐ Yes ☐ No Tax Exempt No. _____

Personal Guarantee

I do hereby certify that the information provided herein is true and accurate. It is agreed that in the event that this or any account of the applicant is not paid according to its terms, the applicant will be additionally liable for all collection agency fees and all costs incurred but not limited to, attorney fees, interest of the highest amount permitted by law and costs and disbursements if collection procedures are required.

Signature _____ Title _____ Date _____

Customer ID _____
For official use only