



# KANZA COOPERATIVE ASSOCIATION

Accounts Receivable  
PO Box 18  
Andale, KS 67001

PH.(316)444-2141 FAX (316) 444-2112

ANDALE-ANTRIM-BYERS-COATS-COLWICH-DILLWYN-FURLEY-IUKA-PRATT-RANDLE-SEDGWICK-STAFFORD-ST.JOHN-VALLEY CENTER-ZENITH

[WWW.KANZACOOP.COM](http://WWW.KANZACOOP.COM)

(Please Print)

DATE \_\_\_\_\_

1 LEGAL NAME: \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

(FOR COMMERCIAL ACCOUNTS SKIP 1, 6 & 7)

OR

2 LEGAL BUSINESS NAME: \_\_\_\_\_

FED ID # \_\_\_\_\_

3 MAILING ADDRESS: \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

4 CITY: \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ - \_\_\_\_\_

5 TELEPHONE: ( ) \_\_\_\_\_ FAX# \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

6	Number of years farming _____	Are you a Common Stockholder of Kanza Co-op?	Y	N
	Livestock Numbers: Dairy _____	Beef Cows _____		
	Hogs _____	Feeder Cattle _____		
	Current: Irrigated Acres _____	Dryland Acres _____	Acres Owned _____	
	Rented from Others _____	Rented to Others _____	Your Share of Crops _____	
	Your Share of Fertilizer _____	Other Farming Interests: _____		

7 NAME OF BUSINESS OR EMPLOYER (if other than farming) \_\_\_\_\_

BUSINESS OR EMPLOYER ADDRESS \_\_\_\_\_

EMPLOYER PHONE ( ) \_\_\_\_\_

Are you the owner? \_\_\_\_\_ OR Employee \_\_\_\_\_ How Long? \_\_\_\_\_

JOB TITLE \_\_\_\_\_

8 BANK NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

BANK CONTACT \_\_\_\_\_ BANK PHONE # \_\_\_\_\_

9 TRADE REFERENCES: (Places of business where you have an account. Complete name, address and phone number.)

\*1. \_\_\_\_\_

\*2. \_\_\_\_\_

\*3. \_\_\_\_\_

10 Additional information \_\_\_\_\_

11 \*Items you wish to purchase \_\_\_\_\_

\*Amount of credit desired \_\_\_\_\_

\* If fuel cards are needed, how many? \_\_\_\_\_ List Authorized users: \_\_\_\_\_

**Credit Applications must be filled out in their entirety and signed or they will not be processed.**