

# Everett Consignment Contract

3210 Hewitt Ave Everett, WA 98201

425-259-9998

[everettconsignment@hotmail.com](mailto:everettconsignment@hotmail.com)

[www.everettconsignment.com](http://www.everettconsignment.com)

**Consignment Policy:** The consignment period is unlimited. You may be asked to pick up items at our discretion. Items not picked up within one week of notice **may be sold, donated or disposed of without notice or benefit to you.** It is your responsibility to locate and bring your property to the sales counter if you wish it to be returned to you.

Everett Consignment determines the selling price and may give additional discounts at its discretion. **Initial Here** \_\_\_\_\_

Everett Consignment will receive **45%** of the **final sales price.** **Initial Here** \_\_\_\_\_

**Reimbursement:** Checks will be available the **5th** of every month. We will mail your check **only if** you leave a business-size self-addressed stamped envelope. [Name on account must be on the envelopes.] If you need a check re-issued for any reason there will be a \$20 re-issuance fee. \$35 re-issuance fee applies to lost checks. It is your obligation to update your address if it changes.

**Initial Here** \_\_\_\_\_

**We do not place a call to you once an item has been sold or a check has been printed. If you have an inquiry about a particular item or check please call us.**

**Initial Here** \_\_\_\_\_

**Expiration:** Any checks not claimed by you within 6 months of the date initially issued will be forfeited by you and shall become the property of Everett Consignment.

**Initial Here** \_\_\_\_\_

**Waiver:** Everett Consignment is not responsible for loss (including theft), or damage to consignments and encourages each consignor to carry appropriate insurance.

**Please print and complete in entirety:**

Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

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

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

Please check to be added to our mailing list.

Signing this document means that you will adhere to and understand its terms fully.

(Store use only below this line. Employees initial if relevant)

**DROP OFF** \_\_\_\_\_ **PRICE CONFIRMED** \_\_\_\_\_

**INVENTORY SHEET**

Consigner: \_\_\_\_\_ Percentage: \_\_\_\_\_

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

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

Received by: \_\_\_\_\_

DROP OFF \_\_\_\_\_

PRICE CONFIRMED \_\_\_\_\_