

# Retail Therapy



**CLOTHING RESALE**

**10782 Grant Rd.**

**Houston, TX 77070**

**281-955-0806**

Consignor's Name \_\_\_\_\_

Consignment No. \_\_\_\_\_

1. **RETAIL THERAPY** assumes no responsibility for the loss, theft, damage, or destruction of any article/ item left on consignment.
2. **RETAIL THERAPY** retains sixty (60) percent of the selling price; the consignor will receive forty (40) percent. The consignor agrees to a minimum sixty (60) day consignment.
3. All consigned items will be subject to any applicable sales.
4. All merchandise not sold within two (2) months from the date of entry and not removed by the owner automatically become the property of **RETAIL THERAPY**.
5. If consignor requests items pulled after 60 days & does not pick up there will be a \$5.00 fee added to acct
6. If consignor choose to break the contract and pick up their items early there is a \$1.00 per item removal fee.
7. All articles will be disposed of if considered unusable or after consignment, if not picked up within 5 days.
8. Records for cash and check disbursement are retained for one (1) year from the date of receipt of merchandise. Once your account becomes inactive an inactivity fee will apply monthly.
9. We will **not** contact you. It is the **consignor's** responsibility to keep up with clothing and monetary expiration dates. \_\_\_\_\_ (initial)

**I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE CONDITIONS.**

\_\_\_\_\_  
**RT REP.**

\_\_\_\_\_  
**EMAIL**

\_\_\_\_\_  
**Phone**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City, State, Zip**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**CONSIGNOR'S SIGNATURE**

\_\_\_\_\_  
**B-Day**

**\*\*\*At the end of your contract do you wish to PICK UP or DONATE your items? (please circle)**

Entered in to: System \_\_\_\_\_, Gmail \_\_\_\_\_, SR \_\_\_\_\_ # of items \_\_\_\_\_ Bags \_\_\_\_\_