



















## SDS SKATEBOARDS | 9135 SANTA ANITA AVE. RANCHO CUCAMONGA, CA 91730 | (US) 909.980.2919 | SDSSKATEBOARDS.COM

Company Name:		Phone:	Fax:
Billing Address:		City: S	tate: Zip:
Shipping Address:	(	City: S	tate: Zip:
Type of Business: :Corporation	:Partnership	:Sole Proprietors	ship Year Started:
Company Website:		Instagram / Social Media:	
Owners, Partners, or Corporate Principals:	1:	2:	
1. Driver's Licence No.:	State:	Social Security:	
2. Driver's Licence No.:	State:	Social Security:	
Years in Business:	# of Employees:	# of Locations (if	more than one):
Years at this location:	Own:	_ Rent: Loca	tions Square Footage:
Contact Info			
Buyer:	Tel (# and ext):	E-ma	il :
*** Would you like to be no	otified of our monthly specials?	(please check all that apply)	
Accounting / Admin:	Tel (# and ext):	E-mai	l:
Initial Terms			
Wire Transfer	Money Order	Credit Card (CC)	
*** International customers must pay all invoic For all wire tranfers, please contact your sales			nt forwarder.
If CC (COD / Co.Check opt): CC Number	r:	Expiration Date:	CV code:
CC Billing Address:		City:	State: Zip:
Terms: Only after a new customer has established a serious business Application process may take up to 2 weeks and time allotted for terms Returns: SDS SKATEBOARDS will accept returns for defective merch refused and sent back to the shipper. Defective items must be reported eBay Policy: There are certain SDS products not permitted for sale on Freight: All orders will be shipped FOB Pomona, California. Unless ot Should you have damaged goods they must be reported to the carrier a Shortages: Any shortage claims must be filed within 5 days of receipt.	will vary based on applicant's credit history and a nandise only. All returns require a return authorizat within 60 days of receipt of goods to be conside eBay. We have the right to refuse the sale of said herwise arranged and approved by SDS SKATE!	customer be considered for terms. Customer must fill ou pplicant's history with SDS SKATEBOARDS. ation number provided by your sales rep. All items returned for return. It items if such items are found listed. Please check with BOARDS.	t and sign the credit application and must include 2 references.  ned without a return authorization number clearly written on the box will be
I (We) have read and agree to the terms and	I information By:		Date:
contained in this contract. Any changes made	de to this	Customers Signature	Date:
agreement must put in writing.		Drink Names	
SDS SKATEBOARDS Accounting Only		Print Name:	
SDS REP:		Rep ID:	Date:
Opening Invoice#:	Amount:	Admin:	Date: