



**CONSOLIDATED SKATEBOARDS**  
131 CENTER ST #4 SANTA CRUZ, CA. 95061  
PHONE: (831) 457-8206 FAX: (831) 457-8219

## CONFIDENTIAL CREDIT APPLICATION

please fill out entire application

**CHECK ONE:**

Prepay

Credit Card

Date of Application \_\_\_\_\_ Credit Amount Requested \_\_\_\_\_

Registered Business Name \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Address (if different than above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Business \_\_\_\_\_ Date established \_\_\_\_\_

Name of Subsidiary or Division \_\_\_\_\_

Corporation, State of \_\_\_\_\_ Date of Incorporation \_\_\_\_\_  Partnership  Proprietorship

Have you ever had a business failure?  Yes  No If YES, when? \_\_\_\_\_

Under what name? \_\_\_\_\_

**PRINCIPALS (owners, managers, partners, etc.)**

1) Name \_\_\_\_\_ Title \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Driver's License# \_\_\_\_\_ SS# \_\_\_\_\_

2) Name \_\_\_\_\_ Title \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Driver's License# \_\_\_\_\_ SS# \_\_\_\_\_

3) Name \_\_\_\_\_ Title \_\_\_\_\_



## **CONSOLIDATED SKATEBOARDS**

I authorize you to obtain such information as you may require concerning the statements and information in this application, and agree that the application, including the information furnished by me, are true and complete and are made for the purpose of obtaining credit. I further agree to submit such additional information concerning my financial status as you request. I also understand that there is a 1-1/2% late charge on past due accounts. It is understood and agreed that the undersigned will continue to be liable in the event of the sale of the business without complying with the bulk sales law. If there are any changes in the structure of my company, I will notify **CONSOLIDATED SKATEBOARDS**. I have read and agree to the terms and conditions of this application.

Signature of Principal or Officer \_\_\_\_\_

please complete and return to **CONSOLIDATED SKATEBOARDS**

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