

Consignment Agreement

NAME: _____ PHONE: (____) ____ - _____ EMAIL: _____@_____

MAILING STREET ADDRESS/PO BOX: _____ TOWN: _____ STATE: ____ ZIP: _____

SHIPPING STREET ADDRESS: _____ TOWN: _____ STATE: ____ ZIP: _____

SADDLE MAKE/MODEL: _____ SEAT SIZE: _____ TREE WIDTH: _____ AGE (IF KNOWN): _____

SERIAL #: _____

PURCHASED NEW OR USED: _____ PURCHASE DATE: _____ PURCHASE PRICE: _____

REPAIR/REFLOCK HISTORY: _____

FLAWS, BLEMISHES, ALTERATIONS: _____

OTHER INFORMATION THAT MIGHT HELP MATCH SADDLE WITH A NEW OWNER: _____

ASKING PRICE: _____ (If you are unsure what to charge, we can discuss on phone. Remember, commission is 20 percent.)

I CERTIFY THAT I AM THE LEGAL OWNER OF THIS SADDLE AND AGREE TO THE TERMS SET FORTH IN NEW ENGLAND SADDLE FIT'S
CONSIGNMENT POLICY. SIGNATURE: _____ DATE: _____



OFFICE USE ONLY

CONSIGNOR ID: _____ INVENTORY # _____ DATE SOLD: _____ CHK #: _____ ISSUED ON: _____

If shipping via USPS, use this address: New England Saddle Fit, P.O. Box 816, Whately, MA 01093

If shipping via UPS or FedEx, use this address: New England Saddle Fit, 35 Masterson Rd. , Whately, MA 01093



Lise Krieger Certified Saddle Fitter

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newenglandsaddlefit@comcast.net . 203 . 685 . 2308 . newenglandsaddlefit.com

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