



*Curious Creek*  
F I B E R S

3070 Palm Street ~ San Diego, CA 92104  
619/280-2404 ~ 619/280-3410 Fax  
yarn@curiouscreek.com ~ www.curiouscreek.com

**PURCHASE APPLICATION**

Business Name \_\_\_\_\_ Telephone \_\_\_\_\_

Primary Contact \_\_\_\_\_ Store Manager \_\_\_\_\_ Fax \_\_\_\_\_

Business Owner(s) \_\_\_\_\_

Billing Address \_\_\_\_\_

Shipping Address \_\_\_\_\_

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

Email address \_\_\_\_\_ Website URL \_\_\_\_\_

Tax ID/Resale License Number \_\_\_\_\_

Corporation { } Partnership { } LLC { } Sole Proprietorship { }

Years in business \_\_\_\_\_ Store square footage \_\_\_\_\_

Description of store type and product lines \_\_\_\_\_

**If a Corporation** Fictitious Business Name \_\_\_\_\_

Officers name (s) \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Federal or Employer ID Number \_\_\_\_\_

**If sole proprietorship or partnership please list for proprietor or at least one partner:**

Name \_\_\_\_\_ Driver's License/ID number \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

**Trade References (Please list three whom your store orders from)**

Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Account number \_\_\_\_\_

Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Account number \_\_\_\_\_

Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Account number \_\_\_\_\_

**Purchase Terms**

Opening order minimum \$1500 prepaid by check or money order. Future orders \$100 minimum.  
All orders must be prepaid.

No skein/bag minimums required.

All items will be shipped by UPS ground transport and insured unless otherwise requested and will be billed at counter rates.

No materials may be returned for credit without prior approval.

A 10% restock fee will apply and be billed for all returns of non-defective product.

A \$35 fee will be billed for any returned checks.

**Personal Guarantee**

I (We) warrant that the information on this purchase application is correct and hereby agree to the terms and conditions, and service charges imposed.

I (We) \_\_\_\_\_ and \_\_\_\_\_  
{print name(s)}

Personally guarantee payment of any debts to Curious Creek Fibers.

Date \_\_\_\_\_ Company Name \_\_\_\_\_

Signature of Owner \_\_\_\_\_

Signature of Owner \_\_\_\_\_

Signature of Owner \_\_\_\_\_