

Nursery Name _____

CHECK HERE for change of address or phone # _____



**APPLICATION FOR
PROFESSIONAL LANDSCAPE CONTRACTOR**



We offer a 20% discount to those who make their primary living as a Landscaper Contractor. Once your application has been approved, we will notify you in writing, and your name will be added to our special accounts directory. Your discount cannot be shared or transferred.

Please be sure to attach some form of identification (business card, flyer, copy of business license, voided business check, etc.) To show you are in the "green" industry.

YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THIS ID.

If you wish to be considered for **BILLING** please ask for an **Application for Credit**.

TYPE OF BUSINESS _____

COMPANY NAME _____

STREET ADDRESS (NOT P.O. BOX) _____

MAILING ADDRESS (IF DIFFERENT) _____

CITY, STATE, ZIP CODE _____

PRIMARY BUSINESS TELEPHONE _____

(THIS WILL BECOME YOUR ACCOUNT NUMBER!!)

BUSINESS FAX _____

HOME PHONE/ CELL PHONE _____ / _____

E-MAIL ADDRESS _____

(Make sure you give an email address in order to receive notification of our specials)

OWNER OF COMPANY _____

HOW LONG IN THIS BUSINESS? _____ YEARS or _____ MONTHS.

CUSTOMER'S SIGNATURE x _____ DATE _____

FAX TO: (540) 854-6392 OR PHONE: (540) 854-5387

MAIL TO: Meadows Farms Attn. Kate Meadows 4300 Flat Run Road, Locust Grove, VA 22508

Please notify us if your address, e-mail address or phone number changes.

FOR OFFICE USE ONLY: APPD / NMI / NIB / EID / LTR