



**GREENSTREET**  
G R O W E R S

# WHOLESALE BUSINESS APPLICATION

**Greenstreet Growers, Inc.**

P.O. Box 410, Tracys Landing, MD 20779-0410

Phone – 410.867.9500 / Fax – 410.867.6130

**Applicant Business Name:** \_\_\_\_\_

**Principal Owner Name:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**Shipping Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Billing Department Contact:** \_\_\_\_\_ **Direct Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_ **In Business Since:** \_\_\_\_\_

**Sales & Use Tax License Number:** \_\_\_\_\_

*\*\*\*Please include copy of business Sales & Use Tax License Certificate if applicable\*\*\**

**Are you Tax Exempt:**  Yes  No **Tax Exemption Number:** \_\_\_\_\_

*\*\*\*If tax exempt, please attach a copy of Certificate of Exemption\*\*\**

**Are P.O. Numbers Required for All Orders?**  Yes  No

**Name of Purchaser(s):** \_\_\_\_\_

### Circle All Seasonal Plant Material That You Are Interested In:

Mulch & Hardgoods / Houseplants / Plant Rentals / Flowering Plants / Seasonal Annuals / Bedding Annuals

Annual Hanging Baskets / Perennials / Vegetables & Herbs / Chrysanthemums / Poinsettias / Trees & Shrubs

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**FOR OFFICE USE ONLY**

Customer Number:

Terms:

Date Approved:

Customer Level:

Store:

Date Created: