



WHOLESALE ONLY: BUYER APPLICATION

LEGAL BUSINESS NAME: _____

DATE ESTABLISHED: _____ TNLA MEMBER NO. _____

PHYSICAL ADDRESS: _____

CITY _____ STATE _____ ZIP _____

MAILING ADDRESS: (IF DIFFERENT FROM ABOVE) _____

CITY _____ STATE _____ ZIP _____

PRIMARY CONTACT: _____

PHONE: _____ EMAIL: _____

Would you like to receive a weekly email list of available plant material? YES or NO

FINANCIAL GUARANTOR: _____

DRIVERS LICENSE #: _____ DOB: _____ STATE ISSUED: _____ EXPIRATION: _____

BANK NAME & LOCATION: _____

Who referred you to Green Lake Nursery? _____

What type of work does your company specialize in? _____

Are there any other approved purchasers on your account? If so please list below:

NAME _____ TITLE _____

PHONE _____ EMAIL _____

NAME _____ TITLE _____

PHONE _____ EMAIL _____

OTHER WHOLESALE NURSERY AND LANDSCAPE SOURCES

NAME: _____ LOCATION: _____ PHONE: _____

ACCOUNTS WITH NO ACTIVITY IN A TWELVE MONTH PERIOD OR ANNUAL PURCHASES UNDER \$2000 WILL BE REMOVED FROM OUR SYSTEM. GREEN LAKE NURSERY HOLDS THE RIGHT TO CANCEL AN ACCOUNT AT ANY TIME FOR ANY REASON. RESPONSIBILITY OF PLANT MATERIAL TRANSFERS TO THE CUSTOMER UPON RECEIPT. RETURNED PLANTS ARE SUBJECT TO A 15% RESTOCKING FEE. PAYMENT IS DUE AT THE TIME OF DELIVERY/PICKUP UNLESS BILLING TERMS HAVE BEEN SET UP WITH THE PAYABLES DEPARTMENT.

INDIVIDUAL/GUARANTOR SIGNATURE

PRINTED NAME

DATE