



WHOLESALE ACCOUNT APPLICATION

Business Name _____

Mailing Address _____ City _____

State _____ Zip _____ Phone _____ Fax _____

Shipping Address (if different) _____

City _____ State _____ Zip _____

AP Email _____ Website _____

Year Business Established _____ Federal Tax ID _____

Tax Exempt? _____ (attach certificate if yes)

Owner(s) _____ Title _____

Email _____ Cell _____

Owner(s) _____ Title _____

Email _____ Cell _____

Trade Description (select one): Landscape contractor Garden Center

Landscape Architect/Designer Municipality General Contractor Non-Profit

Property Manager Other _____

The purpose of this application is to qualify trade customers. To request a credit account the credit application and personal guarantee must be completed and submitted for processing.

Internal Use:

Account # _____ Date _____

Assigned Sales Rep _____ Processed by _____



Marketing Information: Old Glory Wholesale Nursery, LLC. sends emails pertaining to availability, sales, events and industry news. Most business owners find the information useful to their purchasers, designers and sales teams. Please list anyone who should receive these emails, Individuals may opt-out at any time.

Name _____ **Title** _____

Email _____ **Cell** _____

Name _____ **Title** _____

Email _____ **Cell** _____

Name _____ **Title** _____

Email _____ **Cell** _____

Name _____ **Title** _____

Email _____ **Cell** _____

Name _____ **Title** _____

Email _____ **Cell** _____

Name _____ **Title** _____

Email _____ **Cell** _____