



LICENSED GROWER APPLICATION AND QUESTIONNAIRE

Today's Date _____ Contact _____
Company Name _____
Mailing Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____ Cell _____
Email _____ Website _____
Royalty Contact _____ Royalty _____
(if different from above) Email _____

1. Who do you sell to? (Please check appropriate areas below)

- Growers Municipalities Mass Merchants Re-Wholesalers
 Retailers Landscapers Other

2. What geographic market(s) do you sell into?

3. Please list other trademarked/patented plants you are currently licensed to grow:

4. Please ship us your most current price list and/or catalog when returning this application. Thanks!

Note: You may be asked to complete a credit application.