



# BAKER'S Nursery

WHOLESALE APPLICATION

ATTACH COPY OF BUSINESS  
LICENSE

Baker's Nursery, LLC

*Only licensed landscape firms and retail nurseries need apply.  
This is NOT a credit application!*

Your Name \_\_\_\_\_

Business Name \_\_\_\_\_

Nature of Business \_\_\_\_\_ County \_\_\_\_\_

Business Mailing address \_\_\_\_\_

Physical street address (home) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone (\_\_\_\_) \_\_\_\_\_ Home phone (\_\_\_\_) \_\_\_\_\_

Fax (\_\_\_\_) \_\_\_\_\_ Mobile phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_ @ \_\_\_\_\_

Year established \_\_\_\_\_ Federal Tax ID \_\_\_\_\_

Authorized buyers \_\_\_\_\_  
\_\_\_\_\_

If you wish to pay by check — SC DL # \_\_\_\_\_

Trade reference #1 \_\_\_\_\_ Phone # \_\_\_\_\_

Contact person \_\_\_\_\_

Trade reference #2 \_\_\_\_\_ Phone # \_\_\_\_\_

Contact person \_\_\_\_\_

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_

**You may fax this to us, with a copy of your business license (843) 589-2803**