



## WHOLESALE DISCOUNT APPLICATION

Please return completed form to [wholesale-accounts@gardeners.com](mailto:wholesale-accounts@gardeners.com)  
or your local GSC Garden Center

DATE:

BUSINESS NAME		DATE BUSINESS EST.	
OWNER / MAIN CONTACT			
MAILING ADDRESS			
CITY, STATE, ZIP			
BUSINESS PHONE		CELL	
E-MAIL		WEBSITE	
NAME OF BOOKEEPER / ACCOUNTANT			PHONE #
PLEASE DESCRIBE YOUR BUSINESS			
FEDERAL ID #			
SHOULD WE CHARGE YOUR FIRM SALES TAX? YES___ NO___			
Please send your certificate with your completed application. Tax exempt status <b>will only be granted upon receipt of the appropriate state tax exempt form.</b> In Vt forms S-3, VT S-3C or S-3C. MA forms ST-4 or ST-5, Maine- Maine Resale Certificate, in NY- ST 119.2 or ST-120			
DO YOU REQUIRE P.O. NUMBERS OR PROJECT NAMES ON INVOICES? YES___ NO___			
Which Garden Center will you primarily purchase from?			
	Burlington VT		Lebanon NH
	Williston VT		Greenland NH
			Hadley MA
Please provide Gardener's Supply Company with <b>at least two</b> of the following demonstrating your company as an established and recognized business within the green industry.			
*Trade Name Registration	*Business Card	*Nursery registration	
		*State Landscape, Grower or Nursery association	
*Company Check	*Company Emblem	Membership	