



Customer Contact Info Form

(Please complete and return)

Company Name: _____

Please use exact corporation name.

DBA or Trade Names: _____

Mailing Address: _____

City _____ State _____ Zip _____

Physical Address: _____

City _____ State _____ Zip _____

Business Phone Number: _____ - _____ - _____

Purchaser Name(s): _____

Purchaser Cell Phone: _____ - _____ - _____ Purchaser Email: _____

A/P Contact Name: _____

A/P Direct Phone: _____ - _____ - _____ A/P Email: _____

Owner Direct Phone: _____ - _____ - _____ Owner Email: _____

**Our Terms are Due on Receipt unless Credit Terms have been established & approved.*

How would you like to pay?

- Credit Card
*3% Fee
Complete Form*
- ACH (E-Check)
*No Fee
Complete Form*
- Check on Delivery
*No Fee – Give to Delivery Driver
Include Copy of Driver’s License*
- Project Credit Terms
*Must Complete Credit App
Subject to Approval*

To Order

Call Us at **386-754-0161** to place Order.

Email request for estimate and/or material lists / plans and to Sales@gsnursery.com

the **highlight** of your day

Scan & return to Office@gsnursery.com or fax to 386-754-6901