The Wildflower Garden Center, LLC.

733 PA-93

Sugarloaf, PA 18249

Email: in fo@the wild flower gc.com

Phone: 570.710.0839

www.thewildflowergc.com



Contractor Application Form

*The following application certifies Contractors to be eligible for a $\underline{15\%}$ contractor discount on all $\underline{non-discounted}$ items and materials throughout the Garden Center $\underline{excluding}$ annual flowers.

Business Name:		
Street Address:		
City:	State:	Zip:
Mailing Address:		
City:		
Phone: ()	Email:	
Principal Owner/s Information	tion:	
Name:		
Residence Address:		
City:		
Name:		
Residence Address:		
City:		
Phone: ()	Email:	
Business Type/Form (Pleas	e check one):	
Sole Proprietorship/Individual	General Part	nership Corporation
•		ited Partnership
	· ———	· .———
Federal Employer Identification N		e):
SSN for Sole Proprietors/Individu	als/Partnerships:	

PA/State Contractor Number: _				
Non-Owner Business Contact:			_ Title: _	
Office Phone: ()				
Email:				
*For the entity applying, this application partnership. All members if a limited I/we the undersigned individual/s and designees to obtain information from Additionally, I/we acknowledge that extent. I/we also acknowledge that any reason by The Wildflower Garden	d liability company. And, buthorize inquiry by The Wi m all available sources and all information provided contractor privileges, if gr	oy the owner if ildflower Garde d through any above is true o	a sole pro en Center, means dee and accura	prietorship. LLC. and its emed necessary. te to the fullest
Signature:		Date:	/_	/
Full Name:	Tit	:le:		
Signature: Full Name:		Date:	/	
Signature:		Date:	/	/
Full Name:	Tit	:le:		