



# Lukas Nursery & Garden Shop, Inc.

## Landscape Contractor's Department Application

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ General Phone #: \_\_\_\_\_

**Business Start Date:** \_\_\_\_\_

**Primary Business Activity(ies):**

- Landscape Maintenance
- Landscape Design
- Municipality
- Religious Organization
- Other: \_\_\_\_\_

**Primary Contact:**

Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Alt Phone #: \_\_\_\_\_  
Fax #: \_\_\_\_\_  
Email: \_\_\_\_\_

**Secondary Contact:**

Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Alt Phone #: \_\_\_\_\_  
Fax #: \_\_\_\_\_  
Email: \_\_\_\_\_

**Business Type:**

- : Sole Proprietorship
- : Partnership
- : Corporation

**FEIN:** \_\_\_\_\_

**Tax Exempt:**  YES  NO

If Yes, please provide one of the following:

**Tax Exempt #:** \_\_\_\_\_

**Resale Certificate #:** \_\_\_\_\_

**Occupational License #:** \_\_\_\_\_

**Drivers:**

Name: \_\_\_\_\_  
Driver's License #: \_\_\_\_\_  
Name: \_\_\_\_\_  
Driver's License #: \_\_\_\_\_

**Office Use**

- Department Rules & Guidelines
- Occupational License
- Tax Exempt/Resale Certificate
- Driver's License(s)