



Please complete and return to: GMFSI, 45 Swift St., So. Burlington, VT 05403

Or fax to : (802)863-8351

**This application is to apply for purchasing status only. All new accounts are accepted on a COD basis. Thank you.*

SECTION 1: GENERAL INFORMATION All applicants complete this section.

NAME OF BUSINESS: _____

BUSINESS ADDRESS: _____

TELEPHONE: Business: _____ Home: _____

VERMONT TAX EXEMPT #: _____ **OTHER EXEMPT # IF OUTSIDE VERMONT:** _____
: attach a copy of your Vermont State resale certificate or other exempt number form.

DESCRIPTION OF BUSINESS: _____

How long have you been in business: _____ Have you ever applied for customer status with us before? _____

If yes, under what name: _____

Names of employees authorized to purchase for you (optional):

SECTION 2: FINANCIAL INFORMATION All applicants complete this section.

NAME OF BANK: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

DEBIT CARD NUMBER: _____ **EXPIRATION DATE:** _____

Please list two business references:

I understand that by being approved for customer status by GMFSI, I will be responsible for all purchases made by myself and my employees. We accept all major credit cards. All new accounts will be COD. Additional review and a credit card back up may be required for credit terms. I, the undersigned, certify that the statements made on this Application are true and correct.***

SIGNATURE: _____ **TITLE:** _____

DATE: _____
Processing of your application may take up to two weeks. Purchases may not be allowed until you are approved and given a customer number. If you wish to be approved for the purchase of fresh cut flowers and/or greens, please continue to SECTION 3.

FOR COMPANY USE ONLY:

APPROVED FOR PURCHASES ONLY

APPROVED: _____ **DENIED:** _____

DATE: _____ **GMFSI CUSTOMER NUMBER:** _____



CUSTOMER APPLICATION*

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SECTION 3: FLORIST INFORMATION

Complete this section ONLY if you are requesting approval to buy fresh cut flowers and greens and plan to potentially be purchasing required average of \$150.00 per week or more (\$7,500.00 per year) of fresh cut flowers and greens.

How long have you been in the floral business? _____ years _____ months _____ new

Do you have a trained/experienced designer on staff? _____ yes _____ no

What type of cooler(s) do you have? _____ display _____ walk-in _____ other _____ none

How would you like to receive your flowers: _____ pick up _____ GMFSI delivery _____ other _____ need more information

What type(s) of floral solution do you use? _____ hydration _____ conditioner _____ food

Approximately how much do you expect your wholesale purchases from GMFSI to total: (circle each choice)

Weekly: \$10 \$50 \$100 \$200+ Monthly: \$40 \$200 \$800+ Yearly: \$500 \$2,500 \$10,000

What are your daily hours of operation?

Monday _____ Thursday _____
Tuesday _____ Friday _____
Wednesday _____ Saturday _____

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NAME: _____ TITLE: _____

ADDRESS: _____

Processing of your application may take up to two weeks. Purchases may not be allowed until you are approved and given a customer number.

GMFSI reserves the right to limit access of fresh floral products to only companies whose primary purpose is to purchase and resell fresh cut flowers and greens. Approval will be on an individual basis and each decision will be made solely by the Company.

FOR COMPANY USE ONLY:

APPROVED FOR PURCHASES ONLY

APPROVED: _____ DENIED: _____

DATE: _____

GMFSI CUSTOMER NUMBER: _____