

## NEW CUSTOMER INTAKE FORM

Please fill out your information below and attach resale certificate.

Email to [NomesNursery@gmail.com](mailto:NomesNursery@gmail.com)



# NOMES NURSERY

WHOLESALE TILLANDSIA AIR PLANTS  
BROMELIADS EXOTICS & MORE

For Internal Use

SR

Date

165 Marine Drive Calhoun, GA 30701 Phone (706) 528-2096  
Website: [NomesNursery.com](http://NomesNursery.com) Email: [NomesNursery@gmail.com](mailto:NomesNursery@gmail.com)

\_\_\_\_\_/ N/A Y / N  
Business Name Tax Exempt

\_\_\_\_\_  
Contact Name Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Shipping Address

\_\_\_\_\_  
City State Zip Code

**BILLING** Visa Mastercard Amex Discover Other \_\_\_\_\_

\_\_\_\_\_  
Name on Credit Card Credit Card Number

\_\_\_\_\_/\_\_\_\_\_  
Expiration Date CVV2 Billing Address

\_\_\_\_\_  
City State Zip Code

I, the undersigned cardholder, authorize the merchant, Nomes Nursery to charge my credit card for purchases related to goods and services. I understand that my information will be saved to file for future transactions on my account.

\_\_\_\_\_  
Customer Signature Date

### Minimum Order \$200

Plants \$2.00 and under - minimum 10 plants per species  
Plants between \$2.01 and \$9.99 - minimum 5 plants per species  
Plants \$10.00 and over - 1 plant per species

### Order Level Discounts

\$400.00 - 10% \$800.00 - 20% \$1200.00 - 30%

[www.NomesNursery.com](http://www.NomesNursery.com)