



Kiwi Nurseries Ltd

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Contractor Verification Form 2019

(To obtain Wholesale Pricing as a Cash Account – this is not a Credit Application)

Corporate Information

Company Name: _____

Year started: _____ GST Number: _____ ^{N/A} Main Phone: _____

Main Email: _____

Address: _____
Street Address *Apartment/Unit #*

City *Province* *Postal Code*

Mailing Address: _____
(if different than above) *Street Address* *Apartment/Unit #*

City *Province* *Postal Code*

Company Contacts

Main Contact: _____ Title: _____ Direct Ph/Cell: _____

A/P Contact: _____ Title: _____ Direct Ph/Cell: _____

Contact: _____ Title: _____ Direct Ph/Cell: _____

Contact: _____ Title: _____ Direct Ph/Cell: _____

Contractor Account Information

Type of business? Landscaper, Developer, Arborist other: _____

Do you do residential or commercial landscaping? Residential Commercial

Would you like to receive Kiwi Contractor Promotions, Pricelists & Plant Catalog? Yes, Email Email: _____ Yes, Mail No

Does your company use PO Numbers? Yes No

Would you like to receive monthly Statements? Yes No

Would you like a copy of your invoice emailed to you? Yes Email: _____ No

What provides authorization to purchase on the account? Advance Order PO # Company Contact Company Decal Other (Notes below)

Authorization notes: _____

Disclaimer and Signature

I certify that all above information is true and complete to the best of my knowledge.

Name (printed): _____ Signature: _____ Date: _____

OFFICE USE ONLY

Verified Contractor: Yes No Price Level: Bronze Silver Gold Custom: _____% Contractor Account Start Date: _____

Credit Application Requested: Yes No Credit Application Sent: Yes No Credit Application Received: Yes No