

Atlantic Nurseries, Inc.

691 Deer Park Avenue, Dix Hills, NY 11746

PH: 631-586-6242 | FX: 631-586-6287 | E-MAIL: info@atlanticnurseries.com

Business Registration Form

Date: _____

Legal Name of Business: _____

Mailing Address*: _____

City: _____ State: _____ Zip: _____

*Note: If mailing address is a PO Box, you must provide a business address/location.

Office Use Only:

Approved by: _____

Date: _____

Business Address/Location: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Office Fax: _____

Main Contact/Business Owner:

Second Contact:

Name: _____

Name: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

Permission to send faxes/emails? Yes No *Please circle one

Business Legal Status:

Corporation: _____ Partnership: _____ Proprietorship: _____ Year Established: _____

Nature of Business (primary):

L/S Design/Install: _____ L/S Design: _____ L/S Maintenance: _____

Retail: _____ Non-Profit: _____ Other-Specify: _____

Referred by / Heard about Atlantic through:

NSLGA Show: _____ Current Customer - name: _____

Metro Hort Show: _____ Other - explain: _____

To register we will require copies of the following:

- Business certificate, landscape license, business check or business credit card
- Drivers license (owner's preferred)

If business is tax exempt, please provide NYS "Resale Certificate" ST-120:

http://www.tax.ny.gov/pdf/current_forms/st/st120_fill_in.pdf

If contractor project is tax exempt, please provide NYS "Contractor Exempt Purchase Certificate" ST-120.1:

http://www.tax.ny.gov/pdf/current_forms/st/st120_1_fill_in.pdf

If organization is tax exempt, please provide "Exempt Organization Certificate" ST-119.1. Form only available by calling NYS Sales Tax Office 518-485-2889.

Revised March, 2021