



# SCHUBERT NURSERY, INC.

## ***BEFORE YOUR FIRST ORDER CAN BE PROCESSED OR SHIPPED . . .***

In compliance with Sales Tax laws, this Resale Form must be completed and submitted to Schubert Nursery with a copy of your Resale License to show that merchandise purchased is for resale. Please fax your documents to 888.883.5040.

**Your Company Name:** \_\_\_\_\_

**I hereby certify that I hold a valid Seller's Permit No.:** \_\_\_\_\_ **issued**  
**pursuant to the Sales and Use Tax Law.**

**I am engaged in the business of selling the following:** \_\_\_\_\_

---

That the tangible personal property described herein which I shall purchase from Schubert Nursery, Inc. will be resold by me in the form of tangible personal property; provided, however, that in the event any of such property is used for any purpose other than retention, demonstration or display while holding it for sale in the regular course of business, it is understood that I am required by the Sales and Use Tax Law to report and pay tax, measured by the purchase price of such property or other authorized amount.

**Description of property to be purchased:** Live Plant Material – Nursery Stock

**Please PRINT the information requested below:**

Authorized Plant Buyer: \_\_\_\_\_ Title: \_\_\_\_\_

Bill to  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Ship to  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Your Website Address: \_\_\_\_\_

**Signature of Authorized Agent:** \_\_\_\_\_ **Title:** \_\_\_\_\_

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