

Mailing: PO Box 288, Aroma Park, IL **l** Shipping: 4481 S 3250E Rd, Saint Anne, IL 60964

Phone: 800-344-7697 **l** Email: sales@kankakeenursery.com

**New Customer Form**

**(We Require First Pickup/Delivery to be COD)**

**Company name:**

**Billing address:**

**City: State/Province:** **Zip:**

**Check here if shipping address is same as Billing address:** [ ]

**Shipping address (if different than Billing):**

**City:** **State/Province:** **Zip:**

**Office Phone: Primary Contact Name:**

**Primary Contact Email:**

**Primary Contact Office Phone:**

**Primary Contact Mobile:**

**Payment (**Choose **ONE**)**: COD** [ ]  **Credit Card Only** [ ]   **Send Me a Credit App** [ ]

**Primary type of business** (check **ONE** that most accurately describes your business):

**Re-Wholesale** [ ]  **Retail/Garden Center** [ ]  **Commercial Landscaper** [ ]

**Residential Landscaper** [ ]  **Municipality** [ ]  **Grower** [ ]   **Other** [ ]