

PI-17
11/18

Oklahoma Department of Agriculture
2800 North Lincoln Boulevard
P O Box 528804
Oklahoma City, OK 73152-8804
405-522-5953

OFFICE USE ONLY

Receipt # _____

418 \$ _____

Date: _____
.....

County _____

Territory # _____

**NURSERY GROWER
License Application**

OFFICE USE ONLY
NFI / _____
AGN # _____

This license applies only to the location address for which the license is issued. Each location where live plants are sold must be licensed. License year is October 1 to September 30 of each year.

PLEASE PRINT

Business Name _____ **Phone #** _____

Email Address(s) _____ **Fax** _____

Location Address _____ **County** _____

City _____ **Zip Code (9 Digit)** _____

Directions _____

Mailing Address (Same) _____

City _____ **Zip Code (9 Digit)** _____

Type Of Growing Operation (Check all that apply):

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Greenhouse | <input type="checkbox"/> Aquatic | <input type="checkbox"/> Wholesale Sales | <input type="checkbox"/> Medical Marijuana |
| <input type="checkbox"/> Container Nursery | <input type="checkbox"/> Field Grown | <input type="checkbox"/> Retail Sales | <input type="checkbox"/> Industrial Hemp |
| <input type="checkbox"/> Sod | <input type="checkbox"/> Ball & Burlap | <input type="checkbox"/> Seasonal Sales | |

Nursery License Per Location -----	\$25.00
_____ Sq Ft Greenhouse @ \$1.00/1000 Sq Ft (\$1.00 Minimum) -----	
_____ Acres @ \$1.00/Acre (\$1.00 Minimum) -----	
TOTAL -----	

Make Checks Payable to Oklahoma Department of Agriculture, Food & Forestry

I agree to comply with the Oklahoma Horticulture Law and Rules and Regulations. I agree that when any change in information on this form occurs I will notify the Department of Agriculture in writing.

Owner, Manager, or Responsible Party

Date

Please Print Name _____

Online Application for Nursery Grower License can be made via our partner, Kelly Registration Services at:
<http://www.kellysolutions.com/OK/NurseryDealer/newapplication/applynow.asp>