

WaterScapes Aquatic Plant Nursery



P.O. BOX 1827
SEFFNER, FL 33583-1827
Tel: (813) 986-2503 * Fax: (813) 982-2242
info@waterscapesnursery.com

CUSTOMER INFORMATION SHEET

BUSINESS NAME: _____

BILLING ADDRESS: _____

CITY & STATE: _____ ZIP: _____

SHIPPING ADDRESS: _____

CITY & STATE: _____ ZIP: _____

PHONE: _____ FAX: _____ EMAIL: _____

PREFERRED SHIPPING METHOD:

- AIRPORT – PREFERRED AIRPORT _____
- DOOR TO DOOR – ☐ FEDEX ☐ UPS

RESALE (Tax ID #) _____ (Please include a copy of your present tax-exempt certificate)

AUTHORIZED BUYER(S): _____

HOW DID YOU HEAR ABOUT US? Internet: _____ Referral: _____

Other: _____

TYPE OF BUSINESS: ☐ DISTRIBUTOR ☐ PET SHOP ☐ GARDEN CENTER

DAYS & HOURS OF OPERATION: _____

WHAT TYPE OF PLANTS DO YOU CARRY: ☐ AQUARIUM ☐ POND

WOULD YOU LIKE TO RECEIVE EMAILS FOR OUR WEEKLY AVAILABILITY?

☐ YES

☐ NO

WHO ARE YOU CURRENTLY BUYING FROM, WHAT IS YOUR REASON FOR SWITCHING/ADDING SUPPLIERS? _____