



FOR OFFICE USE ONLY

Certificate No. _____

Year _____

State of New Jersey
DEPARTMENT OF AGRICULTURE
TRENTON, N.J. 08625

DIVISION OF PLANT INDUSTRY

JOSEPH W. ZOLTOWSKI, DIRECTOR

Date: _____

DEALER'S AGREEMENT

(ALL DEALERS ARE REQUIRED TO SUBSCRIBE TO THE FOLLOWING AS A CONDITION PRECEDENT TO RECEIVING A CERTIFICATE. THEY ARE ENTITLED TO SUBMIT AS LARGE A LIST AS THEY PLEASE, BUT WILL BE HELD CLOSELY TO THEIR AGREEMENT.)

I hereby agree that I will purchase nursery stock for resale from the following firms only, such firms having been approved by the New Jersey Department of Agriculture:

NAME

ADDRESS

It is understood, however, that this list may be added to by the consent of this said Department. I further agree to receive no stock which is not accompanied by an official certificate of inspection and to distribute no stock which has not been inspected.

PROPRIETOR (Please Print)

WITNESS:

SIGNATURE

Signature

FIRM NAME (Please Print)

Address

ADDRESS (Please Print)

PLEASE RETURN TO:
DIVISION OF PLANT INDUSTRY
PO BOX 330
TRENTON, NJ 08625-0330
TEL. NO. (609) 406-6939
FAX. NO. (609) 406-6960

CITY ZIP CODE COUNTY

TELEPHONE NUMBER

Please give the location address
of your property if this is a new
dealership

