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| SECTION 1 – Customer Information | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | |
| Landowner Name: | | | | | | |  | | | | | | | | | | | | | | | | | | | VDOF Use Only | | | |
|  | | | | | | | Print Clearly | | | | | | | | | | | | | | | | | | | Order Number | | | |
| Applicant Address: | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | |
| Residential Address | | | | | | | Street Address or Rural Route and Box Number (PO Box is NOT Acceptable) | | | | | | | | | | | | | | | | | | | Receipt Number | | | |
| Business Address | | | | | | | | City: | |  | | | | | | State: | | |  | Zip: | | |  | | |  | | | |
|  | | | | | | |  | | | | | | | | | | | | | | | | | | | Region | | | |
| Home Phone: | | |  | | | | | | | | | | Work Phone: | | | |  | | | | | | | | |  |  | | | |
|  | | | | | | |  | | | | | | | | | | | | | | | | | | |  | County | | | |
| E-mail: | |  | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | |
| Requested Shipping Date: | | | | | | | | |  | | | | | (We ship on Monday, Tuesday, and Wednesday from January through mid-April.) | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SECTION 2 – Order Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Quantity Needed | | | | Description (Kind of Trees, Seed or Package) | | | | | | | | | | | | | | | | | | | | Price Per Unit | | | | | Total Item Cost | |
|  | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | |  | |
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| Subtotal: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Sales Tax (5.3% of Order Subtotal) [Tax-exempt orders must submit a completed sales tax exemption  (i.e. ST-18; blank sales tax exemption forms can be found at tax. Virginia.gov).] | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Shipping (30% of Order Subtotal; $15 minimum): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Total Amount Due (Payment must be enclosed at the time of order): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| SECTION 3 – Payment Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Make check payable to "State Forester". * No refunds after May 1st. * A $20.00 service charge will be applied to all refunds except those caused by the nurseries' inability to deliver ordered seedlings. * If seedlings do not arrive in good condition, (i.e. dry, damaged or diseased), claims must be made by telephone or in writing within 7 days of receipt. All unsatisfactory or rejected goods must be held for our advice or disposition. It is agreed between the purchaser and the Department of Forestry that our liability will not exceed the original purchase price of the product. The Department of Forestry assumes no responsibility or liability for the planting of any tree seedlings and in the sale thereof, makes no warranties, expressed or implied, of merchantability or fitness for a particular purpose and makes no warranties regarding the survival or rate of growth of any seedlings. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I have enclosed a check made payable to “State Forester”. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I hereby authorize the Virginia Department of Forestry to charge my credit card. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Visa | | | | Mastercard | | | | | | | Discover | | | Signature: | | |  | | | | | | | | | | | | |
|  | Credit Card: | | | | | |  | | | | | | | | | | | | | |  |  | | | | | |  | |  |
|  |  | | | | | | Number (Credit card will be charged on the date of the order.) | | | | | | | | | | | | | |  | Security Code (3 digits) | | | | | |  | | Expiration Date |
|  | Cardholder Address: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | (If different from delivery address) | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Return Order To: | | | | | | Augusta Nursery  PO Box 160, Crimora, VA 24431 | | | | | | | | | | | | | | | | | | | Phone: (540) 363-7000  Fax: (540) 363-5055 | | | | | |