

**MARYLAND DEPARTMENT OF AGRICULTURE
OFFICE OF PLANT INDUSTRIES AND PEST MANAGEMENT
PLANT PROTECTION AND WEED MANAGEMENT SECTION
50 HARRY S TRUMAN PARKWAY
ANNAPOLIS, MD 21401
(410) 841-5920 FAX (410) 841-5835**

FOR DEPARTMENTAL USE ONLY:

Date Rec'd	Check No.	License Fee	Inspection Fee	License No.	Control No.	Date Approved	Date Mailed

MARYLAND LAW REQUIRES YOU TO HOLD ONE OF THE FOLLOWING LICENSES TO ADVERTISE, SELL, DISTRIBUTE, INSTALL OR PRODUCE NURSERY STOCK. LICENSES ARE ISSUED ON A YEARLY BASIS.
(January 1 to December 31).

**Nursery Inspection Certificate Plant Dealer License Plant Broker License
A P P L I C A T I O N**

1. I, _____ (print or type owner/proprietor's name), in accordance with Sections 5-301 through 5-313 Agriculture Article, Annotated Code of Maryland, 1985 volume, hereby apply to operate a business as a nursery, plant dealer or a plant broker in the State of Maryland.

2. _____
Firm name - as it will appear on license

3. Circle ALL that applies to your business/operation in the box below. Do you want this information listed in future printings of the Maryland Directory of Certified Nurseries, Licensed Plant Dealers, and Licensed Plant brokers? Yes No

Type of Business	Type of product(s) produced or sold	Sales Structure
A. nursery (growing plants) B. plant dealer (selling plants) C. plant broker D. landscape contractor E. greenhouse F. public/government agency	1. bedding plants/annuals 2. bulbs 3. Christmas trees - cut 4. Christmas trees - live 5. cut flowers/greens 6. fruit trees 7. general/ornamental nursery stock 8. herbaceous perennials 9. interior plants 10. native plants 11. small fruit 12. sod 13. vegetable transplants	I. wholesale II. re-wholesale III. retail IV. mail order

4. Business mailing address: _____

6. Address of principal place of business if different from item 5: _____

5. Addresses of additional sales locations in Maryland. Provide complete address, manager's name, telephone number, and information requested in questions 6-12. Use a separate sheet of paper if necessary.

7. Contact information:
 Phone: _____
 Fax: _____
 Cell phone: _____
 E-mail: _____
 Other: _____

8. If a partnership or association, list the name and address of each partner or association officer:

9. If a corporation, list the following:

a. Date incorporated: _____

b. State: _____

c. FID no.: _____

d. Address of principal office:

e. Name & address of resident agent:

10. If business name is an assumed name and not incorporated, enclose a notarized "Doing Business As" statement.

15. Landscape contractors may need a Maryland Home Improvement Contractor's License obtained from the MD Home Improvement Commission. For additional information contact: 410-230-6309 or <http://www.dllr.state.md.us/license/occprof/homeim.html>

16. Please list all sources of nursery stock sold but not produced by you including liners, plugs and finished plants. (This information will be kept confidential; information is used to help in the detection of accidentally introduced quarantine pests.) Use a separate sheet of paper if necessary.

Name of Firm

Address

17. **LICENSE AND INSPECTION FEE** for a Nursery Inspection Certificate OR Plant Dealer License OR Plant Broker License:

Fee

Business with NO growing area, sales area, or landscape holding area: \$100.00

Business with a combined growing area, sales area, and landscape holding area of 1 acre or less: \$110.00

Business with a combined growing area, sales area, and landscape holding area of more than 1 acre to 5 acres: \$120.00

Business with a combined growing area, sales area, and landscape holding area of more than 5 acres to 10 acres: \$130.00

Business with a combined growing area, sales area, and landscape holding area of more than 10 acres: \$130.00 for the first 10 ten acres **plus** \$3.00 per each additional acre

MAXIMUM FEE \$1,100

Make check payable to: **Maryland Department of Agriculture**

18. _____

Signature of Applicant

Title

Date