

Protect. Promote. Prosper.

Nursery License Application

Please allow 15 business days to process this application in full. You can expedite this process by coming to the ODA Salem office and paying in-person at the cashier's office located on the first floor.

If this application is for the upcoming 2023-2024 Season, please do not mail this before May 15th or your payment will default to the 2022-2023 Season. This license will expire on June 30 following the date of issue. Fees are not prorated. <u>Do not email this form or any credit card information</u>.

PLEASE CHECK THE API	PROPRIATE BOX BELOW	
Payment f	or upcoming season (July 1st, 2023, to Ju	ne 30 th , 2024)
Payment f	or previous season (2022-2023 season)	Other
CONTACT INFORMATION	ı	
Legal Name (Owner/s):		
Contact Name:		
Mailing Address:		
	Cell number:	
Email*		
*Pleas	e include your email, this is the primary way w	ve will contact you
BUSINESS LOCATION IN	FORMATION	
Business Name:		Store ID (if applicable):
Location Address**		
Phone number:	Fax numbe	er:
	**Add additional growing locations on page 5 o	

LICENSE TYPE (ONLY CHOOSE ONE, CONTACT THE NURSERY PROGRAM IF YOU NEED GUIDANCE) Each of the following includes one retail location. Additional retail locations require additional dealer licenses.			
Nursery Stock Growers & Collectors of Native plants (grow plants outside or in greenhouses)			
Greenhouse Growers (exclusively grow plants in greenhouses or indoors, no outside fields)			
Nursery Dealers, Florists & Landscapers (sell, but do not propagate any plants)			
CALCULATE YOUR FEE Minimum total license fee is \$158 and a maximum of \$25,000.			
License fees are based upon gross sales/purchases reported herein as gained between July 1st (of last year) through June 30th (of this year). New applicants for a nursery license can report \$0 for the previous season.			
Nursery stock covers living plant material that is intended to keep living after purchase. Please do not report sales of soil, cut flowers, or other non-living plant material.			
 Nursery stock <u>does</u> include bareroot plants, plants with roots, tubers, bulbs, cuttings for propagation, and plugs (such as a tomato seedling) to name a few. 			
• Nursery stock <u>does NOT</u> include products such as cut flowers, decorative cuttings, or food to be eaten (such as a grown tomato) since these are not intended to keep growing after sales.			
 Seed sales are managed by ODA's Seed Regulatory Program and require an additional license. Please visit the <u>Seed Licenses</u> webpage for more information or contact their main office (503.986.4620/seedservices@oda.oregongov). 			
1. TOTAL GROSS SALES/PURCHASES OF NURSERY STOCK: \$0 New nursery license holders put \$0 in the Total gross sales/purchases (Line 1) for their first year as the license fee is based on the previous year's sales (for growers) or purchases (for dealers) of nursery stock.			
2. CALCULATED BASE FEE \$			

THE TOTAL ON LINE 4 IS THE COST OF YOUR LICENSE FOR YOUR FIRST SEASON.

Please keep track of nursery stock sales/purchases during this next season so will you have an accurate number for Line 1 next year.

PAYMENT METHOD

IMPORTANT NOTES:

- Only use USPS to mail in your payments (do not send this using UPS or FED-EX).
- Do not email this form or payment information, all emailed submissions will be rejected.
- Please print and fill out all pages, then mail them to the appropriate address below.
- Email or fax receipts are available for credit card payments ONLY.
- You can pay in person at the payment window on the first floor of the ODA Salem Office location (635
 Capitol Street NE, Salem) to expedite this process. Public access is through the doors on the West side.

CHECK OR MONEY ORDERS:

Make checks payable to Oregon Department of Agriculture. All dishonored checks or electronic payments will incur a \$25.00 administrative fee per ORS 30.701. Mail check or money order to:

Oregon Department of Agriculture P.O. Box 4395, Unit 17 Portland, OR 97208-4395

Secure Fax Line:

503-986-4746

Expiration Date: _____

OR

CREDIT CARDS:

<u>Do not email this form</u> or payment information, all emailed submissions will be rejected. Digital signatures on this form are not accepted and will result in a rejected payment.

635 Capitol Street NE

Card Number: _____

Oregon Department of Agriculture

Print email address or fax number: _______

For Visa, MasterCard, Discover, or American Express card charges, complete the following information:

Name of cardholder: _______ Phone: _______

Address of cardholder: _______ Total Charges: _______

*Digital signatures are not accepted, please use a pen

LEAVE THIS PAGE BLANK, CONTINUE ON PAGE 5

IF YOU ARE A NURSERY STOCK GROWER OR GREENHOUSE GROWER, PLEASE INCLUDE ADDITIONAL ADDRESSES FOR EACH LOCATION WHERE YOU GROW PLANTS

Nursery Name	No additional locations
Location Name/ID:	
Location Address:	
Location Name/ID:	
Location Address:	
255311511714411253.	
Location Name/ID:	
Location Address:	
Location Name/ID:	
Location Address:	
Location Name/ID:	
Location Address:	