

Protect. Promote. Prosper.

### Nursery License Renewal Form 2025-2026

## **CONTACT INFORMATION** Legal Name (Owner/s): \_\_\_\_\_ License #: AG-L \_\_\_\_\_ Contact Name: \_\_\_\_\_ Mailing Address: Phone number: Cell number: Fax number: \*\*\*Please include your email, this is the primary way we will contact you PLEASE CHECK THE APPROPRIATE BOX BELOW Payment for season (July 1st, 2025, through June 30th, 2026) Other Payment for previous season (2024-2025 season) DO CHANGES NEED TO BE MADE TO YOUR RECORD? Update business name Update mailing address Update business location Update contact information Please include the corrected information in the form below. New owners require a new License number, fill out the New Nursery License Form. **BUSINESS LOCATION INFORMATION (**where the plants are held) Business Name: DBA (if applicable):\_\_\_\_\_\_ Store ID (if applicable):\_\_\_\_\_ Location Address: Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

#### **ADDITIONAL NOTES:**

#### **CALCULATE YOUR FEE**

Minimum total license fee is \$158 and a maximum of \$25,000.

Please use the online Nursery – Fee Calculator to fill in the sections below (available at: <a href="https://oda.direct/nurserycalculator">https://oda.direct/nurserycalculator</a> or scan the QR code). If you prefer to calculate these by hand, please download the "Nursery Fee Schedule" document from our website or contact us for a copy to be emailed, mailed, or faxed to you (nursery@oda.oregon.gov; Phone: 503-986-4644; Fax: 503-986-4786).

#### YOUR LICENSE FEE IS BASED ON:

Nursery Stock or Greenhouse Growers: calculate the total gross <u>sales</u> of nursery stock

Nursery Dealers, Florists, & Landscapers: calculate the total gross purchases of nursery stock

On this online Nursery – Feel Calculator, enter your season total from Line 1 then click on your license type. The calculator will automatically generate the numbers for lines 2 and 3 on the right side of the website. Only calculate the penalty fee for line 4 if you are making a late payment (after August 30<sup>th</sup>).



| 1.   | TOTAL GROSS SALES/PURCHASES OF NUR   | SERY STOCK*: \$  |
|------|--|--|
| Lice | ense season is July 1 <sup>st</sup> (last year) to June 30 <sup>th</sup> (th | nis year), gross sales/purchases are for this date range.  |
| *Nı  | ursery stock is living plant material, do not includ                         | de sales of soil, cut flowers, or other non-living material.   |
| 2.   | CALCULATED BASE FEE  | \$   |
| 3.   | RESEARCH ASSESSMENT FEE  | \$   |
|      |  |  |
| (lin | e 2) is assessed on the late renewals. Only calcu                            | te penalty fee equalling 30% of your calculated <u>base fee</u> late line 4 if you are making a late payment for renewal, will not generate this fee, please use a calculator. |
| (lin | e 2) is assessed on the late renewals. Only calcu                            | late line 4 if you are making a late payment for renewal,  |

#### **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.
- Please allow 15 business days to process this application in full. This license will expire on June 30, following the date of issue. Fees are not prorated.
- 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 \$35.00 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:**

Digital signatures on this form are not accepted and will result in a rejected payment.

635 Capitol Street NE

Salem OR 97310-2532

Oregon Department of Agriculture

| rint email address or fa | x number:                      |                                     |               |
|--------------------------|--------------------------------|-------------------------------------|---------------|
| or Visa, MasterCard, D   | iscover, or American Express o | card charges, complete the followin | g information |
| ame of cardholder:       |                                | Phone:                              |               |
| ddress of cardholder:    |                                |                                     | <del></del>   |
|                          |                                |                                     |               |
| ianature*:               |                                | Total Charges:                      |               |

Card Number:

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

| License #: AG-L   | _ | No additional locations |
|-------------------|---|-------------------------|
| Location Name/ID: |   |                         |
| Location Address: |   |                         |
|                   |   |                         |
| Location Name/ID: |   | _                       |
| Location Address: |   |                         |
|                   |   |                         |
|                   |   |                         |
| Location Name/ID: |   | _                       |
| Location Address: |   |                         |
|                   |   |                         |
|                   |   |                         |
| Location Name/ID: |   |                         |
| Location Address: |   |                         |
|                   |   |                         |
| Location Name/ID: |   |                         |
| Location Address: |   |                         |
|                   |   |                         |
|                   |   |                         |