

Oklahoma Department of Agriculture



OKLAHOMA
Dept. of Agriculture,
Food and Forestry

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OFFICE USE ONLY

Receipt # _____

418 \$ _____

Date _____

NURSERY DEALER RENEWAL

This license applies only to the location address for which the license is issued. Each location where live plants are sold must have an individual license. **License year is January 1 to December 31 of each year. License fees are due December 31st. License fees double January 16th.**

PLEASE PRINT

License Number: _____

Business Name _____ Owner Name _____

Email Address(s) _____ Phone # _____

Location Address _____ County _____

City _____ Zip Code (9 Digit) _____

Mailing Address (Same) ☐ _____

City _____ Zip Code (9 Digit) _____

TYPE OF OPERATION (Check all that apply):

- | | | | |
|--|-------------------------------------|--|--|
| ☐ Farmers/Flea Market | ☐ Greenhouse | ☐ Wholesale Sales | ☐ Medical Marijuana |
| ☐ Garden Center/ Nursery | ☐ Store | ☐ Retail Sales | ☐ Industrial Hemp |
| ☐ Landscape/Interiorscape | ☐ Sod Store | ☐ Seasonal Sales | |

Nursery License Per Location ----- \$38.00

Do you have more than one location where you sell plants? Yes ☐ No ☐

If Yes, please list the other locations you would like to renew the license for in the space provided below.

How many licenses would you like to renew in total? _____ X \$38.00 =

Make Checks Payable to Oklahoma Department of Agriculture, Food & Forestry

I agree to comply with the Oklahoma Horticulture Law and Rules and Regulations. I agree that when any change in information on this form occurs I will notify the Department of Agriculture in writing.

Owner, Manager, or Responsible Party

Date

Additional location address: _____

Form ID: 41418B