

# Grower Application



**CIVANO**  
ORNAMENTALS

**Mailing:** PO Box 1100  
Sahuarita, Arizona 85629  
**Location:** Highway  
Tucson, Arizona 85756

**Sales Office:**  
520-746-9205

**BUSINESS NAME:** \_\_\_\_\_

**BUSINESS ADDRESS:** \_\_\_\_\_

**CITY, STATE & ZIP:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_

**FAX:** \_\_\_\_\_

**BUSINESS EMAIL:** \_\_\_\_\_

**PRIMARY CONTACT:** \_\_\_\_\_

**PRIMARY CONTACT PHONE:** \_\_\_\_\_

**ACCOUNTING MANAGER:** \_\_\_\_\_

**ACCOUNTING PHONE NUMBER:** \_\_\_\_\_

**ACCOUNTING EMAIL:** \_\_\_\_\_

**BILLING ADDRESS:** \_\_\_\_\_

**CITY, STATE & ZIP:** \_\_\_\_\_

**TAX EXEMPT:**

YES

NO

**IF YES, IS THE FORM PROVIDED?**

YES

NO

**PAYMENT METHOD:**

COD

PRE-PAYMENT

N30

**SIGNATURE:** \_\_\_\_\_

**PRINTED NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

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