

Maine Department of Agriculture, Conservation and Forestry

Division of Animal and Plant Health - Horticulture Program

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OFFICE USE ONLY

Date Fee Rec'd: _____

Amt of Fee: _____ Check #: _____

License #: _____

Date Issued: _____

APPLICATION FOR A LICENSE TO SELL PLANTS

Maine statute (Title 7 MRSA sec.2171) requires all businesses selling Nursery Stock (see back for definition), obtain a license.

1. **Renewal** or **New**

2. **Name of Firm (or individual):** _____

3. **Firm location / street address:** _____

Town: _____ **County:** _____ **Zip Code:** _____

4. **Directions to Location** (include directions and/or a map to sales location and any additional growing locations):

5. **Name of Proprietor/Manager** _____ **Location Phone:** _____

6. **Mail Address:** _____ **Town:** _____ **State** _____ **Zip Code:** _____

7. **E-Mail address:** _____ **Website:** _____

I DO NOT wish to receive email updates from the Department on licensing and other issues concerning plant sales.

8. **Address of Other Sales Locations:** A separate license must be obtained for each permanent sales location.

Please tell us about your business. These next questions will help with inspection planning.

9. **Plant Sales at Your Operation Include:** Circle or check all answers that apply.

a. Wholesale Retail

b. Plants that I grow Plants that are grown by others

c. Types of Plants: Annuals Aquatic Plants Bulbs Fall Mums House Plants Perennials Poinsettias
Vegetable Seedlings Woody Plants Other (Please Specify) _____

d. I am growing and/or selling plants: All Year January February March April May June July
August September October November December

e. Please list any towns and the day of the week where you sell plants at the farmer's market

f. I sell plants out-of-state. Additional certification is required. Please submit a compliance agreement application.

10. **Size of Growing Area:** Greenhouse Growing Area in Square Feet: _____

Field Growing Area in Acres: Perennials _____ Woody Plants _____

11. **Sources of Plants:** List major suppliers of plant material that are sold, but not produced by your company.

Supplier Name	Address (minimum town and state)

12. **LICENSE FEE:** \$25.00 per location or see schedule on back. Make check payable to TREASURER, STATE OF MAINE

13. **Signature: (Required)** _____ **Date:** _____

