



Business Name

Contact Name

Mailing Address

Business Phone

Cellular Phone

Fax

Email

Product/Service Offered (We will list these on our website)

Business License Number

Current Insurance Company

Check #

PO #

SEND FORM AND ENCLOSE PAYMENT (\$50.00 for a company, and \$75.00 for a supplier)
Make Check Payable to DGMA
TO: P. O. BOX 7955,
WILMINGTON, DE. 19803

For more information visit our website:
www.delawarelandscaping.org