ORDER FORM



COMPANY DETAILS	
Company Name	VAT NUMBER:
	OFFICE TEL:
Email Address :	
Applicants / Account Holder's Name : —	
PERSONAL INFORMATIO	N
First Name & Surname :	
Cell No :	Postal Address :
Delivery / Physical Address :	
	Code
PLANTING INFORMATION	
Type of Seeds :	Type of Seeds :
QTY to Deliver:	QTY to Deliver :
Date to Deliver:	Date to Deliver :
Type of Seeds :	
QTY to Deliver :	Transport Required : Yes No
Date to Deliver:	Delivered in Trays or Liners :
By signing this form, you agree that all the informati PLEASE NOTE: 50% deposit is required to secure your	