

## Cash Card Application

Business Name:			
Owner Name:			
Address:			
City:		State:	Zip:
Phone Number:	Cell Number:		
Type of account:	Landscape ContractorPlumber	Professional Gardener Other (explain)	
	e (if resale please give #) e#	Must have resale card or	n file
Social Security #			
Driver License #			
Email Address			
the amount you sp Spend 500.00 2,501.00 5,001.00	Benefits of a part of the property of the pend, we will give you a reber of 2,500.00 and receive 1% of 5,000.00 and receive 2% of 7,500.00 and receive 3% of 10,000.00 and receive 4%	ses for one calendar year ate in the form of our KT	S "Turf Bucks". \$500 in purchases
Applicant Signatu	ire		
Print Name			
Employee Initials	ployee Initials Date		