



IFA NURSERIES, INC.®

BudCap® ORDER FORM

Company: _____

Name: _____

Address: _____

Phone: _____

City/St/Zip: _____

Date: _____

ORDER FOR INSTALLED BUDCAP®s (Includes Labor and Materials)

LOT NO.	NURSERY	LOT CODE ¹	EST. LIFT DATE ¹	DENSITY OPTION ² A, B, C	% OF Lot to Cap	4" X 4.4" POLY-LITE QUANTITY ³ @12¢
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
TOTAL QUANTITIES						

1 Lot code and lift date needed 30 days prior to lift

2 Density options:

A. All useable trees

B. Contiguous % (e.g. 50% = all useable trees capped in 50% of containers)

C. Dispersed % (e.g. 50% = 50% of useable trees capped in each container)

3 Min. total order = 8,000. Call for prices on quantities over 500M

ORDER FOR BUDCAP®s by the ROLL (Not Installed on Seedlings)

For Application after planting	4" X 4.4" POLY-LITE QUANTITY @ 6¢	5" X 4" POLY-CLEAR QUANTITY @ 6¢
Increments of 500. Call for prices on quantities over 500M		

Authorized by

Date

Roger Wimer
Office/Cell: (360) 749-1785
Fax: (360) 636-7950

Steve Akehurst
Office: (541) 995-3793
Cell: (541) 556-8907
Fax: (541) 995-4739