



NC Landscape Contractors' Licensing Board

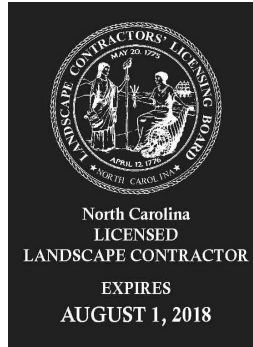
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Telephone: 919-266-8070 * Fax: 919-782-9470
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Decal and Official Seal Order Form

Official 3.75 X 5 Decal @ 3.00 each

Official 5" Seal @ 3.50 each

Official 10" "Door" Seal @ 5.00 each



Official License Decal

5" Official Seal

10" Official "Door" Seal



Shipping & Handling fee

1-2 decals \$2.00
3-6 decals \$3.00
7-10 decals \$4.00 _____

Subtotal _____

7.25% NC Sales Tax _____

Total amount due \$ _____

Official Yearly 3.75 X 5 Decal @ 3.00 each *

- (1) Official Yr. Decal **\$5.36** (\$3.00+\$2.00 Shipping+**\$.36** NC Sales Tax)
- (2) Official Yr. Decal **\$8.58** (\$6.00+\$2.00 Shipping+**\$.58** NC Sales Tax)
- (3) Official Yr. Decal **\$12.87** (\$9.00+\$3.00 Shipping+**\$.87** NC Sales Tax)
- (4) Official Yr. Decal **\$16.09** (\$12.00+\$3.00 Shipping+**\$1.09** NC Sales Tax)
- (5) Official Yr. Decal **\$19.31** (\$15.00+\$3.00 Shipping+**\$1.31** NC Sales Tax)

Official 5" Seal @ 3.50 each *

- (1) Official 5" Seal **\$5.90** (\$3.50+\$2.00 Shipping+**\$.40** NC Sales Tax)
- (2) Official 5" Seals **\$9.65** (\$7.00+\$2.00 Shipping+**\$.65** NC Sales Tax)
- (3) Official 5" Seals **\$14.48** (\$10.50+\$3.00 Shipping+**\$.98** NC Sales Tax)
- (4) Official 5" Seals **\$18.23** (\$14.00+\$3.00 Shipping+**\$1.23** NC Sales Tax)
- (5) Official 5" Seals **\$21.99** (\$17.50+\$3.00 Shipping+**\$1.49** NC Sales Tax)

Official 10" "Door" Seal @ 5.00 each *

- (1) Official 10" Door Seal **\$7.51** (\$5.00+\$2.00 Shipping+**\$.51** Sales Tax)
- (2) Official 10" Door Seals **\$12.87** (\$10.00+\$2.00 Shipping+**\$.87** Sales Tax)
- (3) Official 10" Door Seals **\$19.31** (\$15.00+\$3.00 Shipping+**\$1.31** Sales Tax)
- (4) Official 10" Door Seals **\$24.67** (\$20.00+\$3.00 Shipping+**\$1.67** Sales Tax)
- (5) Official 10" Door Seals **\$30.03** (\$25.00+\$3.00 Shipping+**\$2.03** Sales Tax)

* Landscape License Number: _____

Name: _____

E-mail: _____

Company: _____

Address: _____

City, State Zip: _____ Phone Number: (____) _____

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|---|
| <p>Payment Amount _____ <input type="checkbox"/> Pay by Check or <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express</p> <p>Credit Card # _____ Expiration Date _____ Security Code _____</p> <p>_____ <i>Name as it appears on credit card</i></p> <p>_____ <i>Mailing address if different from above</i></p> <p>_____ <i>City, State Zip</i></p> <p>_____ <i>Signature</i></p> |
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Mail or Fax to: **NCLCLB**
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