



INTERIOR DESIGN PARTNERSHIP APPLICATION

Thank you for your interest in partnering with City Floral Garden Center. Our program is designed for qualified professionals actively working in the design industry. Please complete the form below and provide the required documentation.

Applicant Information

Full Name: _____

Business Name: _____

Email Address: _____

Phone Number: _____

Business Address: _____

Professional Information

Type of Design Work (check all that apply):

- Interior Design
- Decorating
- Home Staging
- Landscape Design
- Other: _____

Required Documentation

Please provide the following to complete your application:

- Proof of Business in the field of design, decorating, or staging
(Examples: business registration, invoice, or marketing materials)
- Current Business License (Available upon request)

Trade References

Reference Name & Contact: _____

Reference Name & Contact: _____

Resale Certificate or Tax ID (EIN):

Professional Association Membership

(e.g., ASID, IIDA, NKBA, etc.)

Organization Name: _____

Website and/or Portfolio Link:

Agreement

I certify that the information provided is accurate and that I am actively working as a professional in the design field.

Signature: _____

Date: _____

Submission Instructions

Please submit this form along with all required documentation to:

design@cityfloralgreenhouse.com

Or drop off in-store at City Floral Garden Center