



City of Ann Arbor Farmers Market

2010 Vendor Application

Vendor Name _____

(Vendor Name is defined as the name of person or business that holds or will hold seniority for Farmers Market. Vendors with seniority must use the name or business that has previously established seniority with the Market)

Contact Information:

Business Name _____

Person's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail _____ Web site _____

Vendor Identity

Choose **one**:

☐ Producer

☐ Artisan

☐ Food Cart Vendor

Applying to sell on (check all that apply): Wednesday _____ Saturday _____

If you chose "producer," please check all of the following products that apply:

☐ Grower

☐ Processor

☐ field grown crops

☐ baked goods

☐ greenhouse items

☐ jams/jellies

☐ nursery stock

☐ dairy products

☐ perennials

☐ specialty product (specify) _____

☐ meat/poultry

☐ eggs

☐ other _____

Type of business

Choose **one**:

☐ Sole Proprietorship

Total years of operation _____

☐ Assumed Name

Total years of operation _____

☐ Partnership

Total years of operation _____

☐ Limited Liability Company

Total years of operation _____

☐ Corporation

Total years of operation _____

If you are a business or cooperative, please list names and addresses of other persons involved and attach copies of the partnership, incorporation, organization, cooperative, or assumed name papers filed with the state or county. Also, provide the most recent annual filing for the business or cooperative (if any).

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

List immediate family members who are actively participating in the business or actively participating with the vendor at market. If any of these immediate family members have a stall of their own at the Ann Arbor Farmers Market, they cannot be listed on the application.

Name	Relationship	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any others who actively participate with vendor at market (employees, etc).

Name	Relationship	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other markets (if any) where you are a vendor :

Check one:

- ☐ This is my first time selling at the Ann Arbor Farmers Market
☐ Date seniority established at Ann Arbor Farmers Market (or current daily vendor number): _____

Farm Information (if applicable). List all addresses where items are grown or produced.

Property 1:

Street address: _____
City: _____ Zip code: _____
Total # of acres used to produce products: _____ Rent or own (*circle applicable answer*)
Total # of greenhouses ____ What months of the year is this property used? _____

Property 2:

Street address: _____
City: _____ Zip code: _____
Total # of acres used to produce products: _____ Rent or own (*circle applicable answer*)
Total # of greenhouses ____ What months of the year is this property used? _____

Property 3

Street address: _____
City: _____ Zip code: _____
Total # of acres used to produce products: _____ Rent or own (*circle applicable answer*)
Total # of greenhouses ____ What months of the year is this property used? _____

Property 4

Street address: _____
City: _____ Zip code: _____
Total # of acres used to produce products: _____ Rent or own (*circle applicable answer*)
Total # of greenhouses ____ What months of the year is this property used? _____

Total Acres Farmed (for all parcels of land): _____
Acres in Production (for all parcels of land): _____
Vegetables ____ Fruit ____ Nursery ____ Pasture ____ Greenhouse ____ Herd Size ____

Draw a farm (or farms) diagram below.

Grower Product List

Describe the number of varieties and expected months of availability of **each product you grow and sell**. You may attach additional sheets if necessary; this list is not comprehensive. If you are selling **nursery stock, bulbs, or cut flowers**, please attach a complete list of the items you intend to sell. The source of materials used **in growing** your products should be indicated: own product, locally grown, or purchased. The products should meet MDA, Washtenaw County Health Department, and USDA regulations, and good food safety practices.

Product	# of varieties	Month(s) Available	Estimated Yield	Source of Material
Vegetables				
EX: Artichokes	1	June	100	Seed saved
Arugula				
Asian Greens				
Beans, green				
Beans, dry				
Beets				
Bok Choy				
Broccoli				
Broccoli Rabe				
Brussels Sprouts				
Cabbage				
Carrots				
Cauliflower				
Celery				
Chard				
Collards				
Corn				
Cucumbers				
Eggplant				
Endive				
Escarole				
Fennel				
Garlic				
Kale				
Kohlrabi				

Leeks				
Lettuces				
Mustard Greens				
Onions				
Parsnips				
Peas				
Peppers (hot)				
Peppers (sweet)				
Potatoes				
Pumpkins				
Radicchio				
Radishes				
Romanesco				
Rutabaga				
Salad Mix				
Shallots				
Spinach				
Squash (winter)				
Squash (summer)				
Sweet Potatoes				
Tomatoes				
Tomatoes (heirloom)				
Turnips				

Product	# of varieties	Month(s) Available	Estimated Yield	Source of Material
Fruit				
EX: Apples	20	6	500 bu	own trees
Apples				
Apricots				
Asian Pears				
Blackberries				
Blueberries				
Cherries				
Cranberries				
Figs				
Gooseberries				
Grapes				
Melons				
Nectarines				
Peaches				
Pears				
Plums				
Quinces				

Raspberries				
Strawberries				
Watermelon				
Nut Crops				

Greenhouse Crops

Annual Plants

Product	# of varieties	Month(s) Available	Estimated Yield	Source of Material
Greenhouse				
EX: Ferns	5	6	100	purchased plugs
Hanging Baskets				
Houseplants				
Vegetable Starts				
Herbs				
Basil				
Cilantro				
Oregano				
Parsley				
Sage				
Thyme				

Meat/Poultry/Eggs/Other

Product	# of varieties	Month(s) Available	Estimated Yield	Source of Material
Meat/Poultry				
EX: Beef	Angus	12	50 head	purchased calf
Chicken				
Duck				
Lamb				
Pork				
Rabbit				
Turkey				
Beef				
Buffalo				
Eggs				
Other				
Mushrooms				
Honey				
Maple Syrup				

Prepared Foods

Prepared foods include items such as baked goods, hot foods, coffee, pasta, jams and jellies, and cheese. **These items should have ingredients that you have combined or assembled to create the product and be prepared in a licensed facility.** The products should meet MDA, Washtenaw County Health Department, and USDA regulations, and good food safety practices.

Vendors must list all products they wish to sell at the Ann Arbor Farmers Market. Additional products may be added, contingent upon Market Manager's approval, at any point during the season.

Product name	Description	Source of ingredients
EX: Bread	whole wheat	flour from Westwind Mills, Linden, MI
EX: Flavored oils	olive oil with garlic and herbs	garlic, herbs from my garden

Artisan Product Classification

If applying as an artisan, include pictures of your craft and other supporting information. The source of ingredients should be indicated as your own product, locally grown, or purchased.

Product	Description	Source of Ingredients
EX: bowls	turned wood salad bowls	hard wood from property owned

Food Cart Vendors

A food cart vendor is a vendor who sells food items for immediate consumption that are made or prepared at the market prior to the Market by the vendor and offered for sale at the Market from a licensed cart. Food Cart Vendors may not offer products that directly compete with items offered for sale by Producers or Artisans. The products should meet MDA, Health Department, USDA regulation and good food safety practices.

Product	Description	Source of Ingredients
EX: burritos	breakfast burritos with bacon, eggs, and salsa	Local bacon from Apple Schram Orchard, local eggs from Back Forty Acres, purchased salsa

List below the license and inspection numbers required for the operation of your business and/or sale of your products, and any other license, registration, certification, or permit required by local, state, or federal law. Provide copies of all current and valid licenses, registrations, certifications, or permits with your application packet.

Michigan sales tax license number _____
 Nursery dealer license number _____
 Plant dealer license number _____
 Plant or nursery inspection number _____
 Organic certification license number _____
 Other relevant license number _____
 Other relevant inspection numbers _____

Give the name, address, and phone of at least 2 people who can verify that you are growing or producing items offered for sale at market (family members and business -related persons NOT allowed):

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Vendor's Affidavit

- I/We _____ certify that I/ We am/are a Producer (s), Artisan (s), or Food Cart Vendor as defined in the Public Market Operating Rules and the ordinances of the City of Ann Arbor, and intend to offer for sale and sell only articles of my/our own production or

raising while occupying the Market. I agree that verification of this may be sought by the City of Ann Arbor in accordance with the Public market Operating Rules.

- I/We understand that I/we am/are entitled to sell or offer for sale only such items that have been described on this Vendor Application filed with the Market Manager.
- I/We understand that my/our Vendor Application must be updated and approved prior to selling any new items.
- I/We understand and agree that I/we am/are prohibited from supplementing my/our own products with any other products that are partially or totally produced by anyone else.
- I/We acknowledge receipt of a copy of the Ann Arbor Farmers Market Operating Rules in effect as of this date and agree to comply with them.
- I/We further swear that all information provided to the City of Ann Arbor in or along with this Vendor Application by me/us on my/our behalf is complete and correct.
- I/We understand and agree that violation or falsification of any of the terms of this affidavit will result in immediate and permanent loss of permission to sell any product at the Ann Arbor Farmers Market.
- If signing for a business or cooperative, the individual(s) signing this Application and Affidavit have the requisite authority to do so.

Signature of Applicant (s): _____

Or Authorized Agent for Applicant(s): _____

Subscribed and sworn to before me on this _____ day of _____, 20 _____

Notary Public

County

My commission expires: _____

This application valid for three years. Thank you for your interest in the Ann Arbor Farmers Market.

FOR INTERNAL USE ONLY

Date Application Received: _____

Received by: _____

Date Application Approved: _____

Signed: _____

Date Fee Received: _____