



City of Ann Arbor Farmers Market

2011 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)
 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 _____

Market Products (check all that apply):

Produce (fruits, vegetables)	Baked goods	Meat
Value-added foods (jam, jelly, etc)	Dairy products	Cut flowers
Nursery Stock	Other Plants	Prepared Foods
Other (please specify) _____		

Type of business:

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 _____
Other (specify)	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) you sell items :

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? _____

Total Acres Farmed (for all parcels of land): _____

Acres in Production (for all parcels of land): _____

Vegetables ____ Fruit ____ Nursery ____ Pasture ____ Greenhouse ____ Herd Size ____

New for 2011: If you lease any of the above properties, approved lease verification papers are required (see Lease Verification)

Draw a farm (or farms) diagram below.

Product List

Describe the number of varieties and expected months of availability of each product you 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.

Product	# of varieties	Month(s) Available	Estimated Yield
Nursery Stock			
Annuals			
Bulbs			
Ferns			
Hanging Baskets			
Houseplants			
Michigan Natives			
Perennials			
Succulents			
Tomato Plants			
Tree Starts			
Vegetable Starts			
Fruit			
Apples			
Apricots			
Asian Pears			
Blackberries			
Blueberries			
Cherries			
Cranberries			
Figs			
Gooseberries			
Grapes			
Melons			
Nectarines			
Pawpaws			
Peaches			
Pears			
Plums			
Quinces			
Raspberries			
Strawberries			
Watermelon			

Product	# of varieties	Month(s) Available	Estimated Yield
Vegetables			
Artichokes			
Arugula			
Asian Greens			
Beans, green			
Beans, dry			
Beets			
Bok Choy			
Broccoli			
Broccoli Rabe			
Brussels Sprouts			
Cabbage			
Carrots			
Cauliflower			
Celery			
Chard			
Collards			
Corn			
Cucumbers			
Daikon			
Eggplant			
Endive			
Escarole			
Fennel			
Garlic			
Kale			
Kohlrabi			
Leeks			
Lettuces			
Mustard Greens			
Onions			
Parsnips			
Peas			
Peppers (hot)			
Peppers (sweet)			
Potatoes			

	# of varieties	Month(s) Available	Estimated Yield
Product			
Nursery Stock			
Radicchio			
Radishes			
Rhubarb			
Romanesco			
Rutabaga			
Salad Mix			
Shallots			
Spinach			
Squash (winter)			
Squash (summer)			
Tomatillos			
Tomatoes			
Tomatoes (heirloom)			
Tomatoes (paste)			
Turnips			
Zucchini			

Herbs			
Basil			
Cilantro			
Oregano			
Parsley			
Sage			
Thyme			
Meat/Poultry			
Beef			
Chicken			
Duck			
Lamb			
Pork			
Rabbit			
Turkey			
Other			
Cheese			
Eggs			
Honey			
Mushrooms			
Nuts			

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: _____

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VENDOR CONTACT INFORMATION FOR THE PUBLIC

Market customers, vendor organizations and other persons or entities ask for contact information for a vendor or all vendors. Please provide the contact information that the City can provide in response to such requests. Several categories are listed. You do not need to provide contact information on every line, but at least one address should be provided. ***All of the information on this form will be publicly available to anyone who asks for it. Do not include any information that you do not want given to customers, vendor organizations, or others who may ask for your contact information. This information may be collected and used by the Ann Arbor Farmers Market for promotional purposes for your business.***

Vendor Name: _____

Business Name: _____

Date: _____

Addresses (list one or more):

Mailing address:

Business location (if different):

Telephone numbers:

Business: _____

Mobile: _____

Home: _____

Email address: _____

Website: _____

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