



The Food Trust Farmers Market Program Food Vendor Application 2020

VENDOR APPLICATION INSTRUCTIONS

Please respond to each of the numbered items on the Application Form, pages 2 through 11. Where necessary, you may continue your answer on a separate page.

Include the following documents with your application: (1) Copies of any permits and licenses identified on page 9, Licenses and Permits; (2) Copies of all Certificates or other proofs of insurance identified on page 10, Insurance; and (3) a W-9 form.

Sign your name and date the Acknowledgement and Agreement (page 11). By signing this page, you acknowledge that, if accepted to participate in The Food Trust 2020 Farmers Market Program, you agree to sell in accordance with the rules of The Food Trust Farmers Market Program and comply with all legal obligations relating to your participation.

Please return the completed Application Form by emailing to farmersmarket@thefoodtrust.org. The agreement page must be signed, and a scan or picture of that page will suffice. As The Food Trust offices are currently closed and staff is working remotely, please contact us if you need to mail or fax your application package.

There is no application fee in 2020 season (May 1 2020 – April 30 2021).

POC-owned, women owned, veteran owned, LGBTQ owned businesses are encouraged to apply.

Any questions about the Application should be directed to The Food Trust by email (farmersmarket@thefoodtrust.org), by phone (215-575-0444), or by fax (215-575-0466)

It is the policy of The Food Trust to ensure equal opportunity without discrimination or harassment on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, disability, marital status, citizenship, national origin, genetic information, or any other characteristic protected by law. The Food Trust prohibits any such discrimination or harassment.

APPLICATION

Owner/Operator Contact information	
1. Business Name	
2. Contact Person (First, Last)	
3. Phone	
4. Email address(es)	General Communication: PayPal:
5. Website	
6. Mailing Address	Street: City, State, ZIP: County:
7. Please select your business type (select all that apply):	<input type="checkbox"/> Farm Fresh Products <input type="checkbox"/> Value-Added/Prepared Farm Foods <input type="checkbox"/> Dried Flowers, Crafted Farm Products <input type="checkbox"/> Processed Foods <input type="checkbox"/> Prepared Foods
8. How did you hear about The Food Trust Farmers markets? Check all that apply	<input type="checkbox"/> Another vendor (name: _____) <input type="checkbox"/> Passed/visited a market <input type="checkbox"/> Penn State Extension <input type="checkbox"/> Event/Conference (name: _____) <input type="checkbox"/> Print Advertisement <input type="checkbox"/> Other
About the Farm/Facility (if applicable)	
9. Farm Address	Street: City, State, ZIP: County:
10. Farm Size (acres)	
Vegetables/herbs	
Fruit	

Other	
TOTAL acres	
Farm practices	
11. Are you certified organic grower?	
12. Please describe other special agricultural practices on your farm (e.g. IPM)	
13. If applicable, please describe livestock management practices employed and the living conditions for animals (e.g. pasture raised)	
Market Availability	
14. Which months are you available to sell?	
15. Which days of the week are you available to sell?	
16. Are you interested in selling year-round at a produce stand located at a school or community-organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
17. How many markets are you available to sell?	<input type="text"/> markets per week <input type="text"/> markets per month Other notes:
18. Are you interested in pop-up opportunities? Note any factors that would be important (e.g. location).	<input type="checkbox"/> Yes <input type="checkbox"/> No Notes:
19. What languages do you speak fluently?	
Product Description: Please attach pages or printed materials that describe product information.	

<p>20. Please describe the products that you plan to bring to market. Farm fresh products can be identified on the following page.</p>	
<p>21. Please describe which ingredients are sourced locally and who provides these ingredients</p>	
<p>22. The Food Trust attempts to place vendors at markets to best represent the community served and promote community values. What makes you or your business unique or well-suited for Philadelphia area Farmers Markets?</p>	

Crop List: Please identify the crops that you will grow for market and write in the number and types of varieties. Locally sourced ingredients should be described in question 22 above.

Vegetables	No. of varieties		No. of varieties		No. of varieties
Artichokes		horseradish		Squash, winter	
Arugula		kale		Sweet potatoes	
Asparagus		kohlrabi		Swiss chard	
Beans (lima)		leeks		Tomatoes (including tomatillo)	
Beans (snap or green)		lettuce		turnips	
Beans (Dry, edible)		mushrooms		Herbs (describe):	
Beets		mustard greens			
bok choy		okra			
broccoli		onions			
broccoli rabe		parsnips			
brussel sprouts		peas			
cabbage (including Chinese)		peppers, hot		Other (describe):	
carrots		peppers, sweet			
cauliflower		potatoes			
celeriac		pumpkins			

celery		radishes			
collards		rhubarb			
Corn, sweet		rutabagas			
cucumbers		salsify			
eggplant		spinach			
endive		sprouts			
fennel		Squash, summer			
garlic					

Fruits	No of varieties	Meats/Poultry	No of varieties	Other Farm Produced products	No of varieties
apples		Chicken: whole/parts (specify)		Honey	
apricots				Horseradish products	
blackberries				Jam, preserve, jelly	
blueberries				Cider, other juices	
cantaloupes				Baked goods	
cherries		Lamb/Goat (specify cuts)		cheese	
grapes				eggs	
nectarines				Cut flowers	
peaches				Dried flowers	
pears				Potted plants	
plums		Beef (specify cuts)			
Raspberries, black				Other (describe):	
Raspberries, red					
strawberries					
watermelon					
Other		Pork (specify cuts)			

			Value Added Meat products (specify)		

Licenses & Permits

Please check the licenses and permits that you are submitting with your Application:

Submitting (y/n)?	License / Permit type	Notes
	Organic grower certification	
	Retail Food Facility License	
	Food Safety Modernization Act Certificate	
	Philadelphia Commercial Activity License	
	City of Philadelphia food retail license (e.g. food trucks)	
	City of Philadelphia OFP inspection	
	City of Philadelphia Food Safety Certificate	
	Local Jurisdiction: Kitchen/Facility License and inspection permit	
	Pennsylvania Raw Milk permit Pennsylvania Milk Manufacturing permit Pennsylvania Milk Warehouse permit (if no manufacturing permit)	
	Egg Processing license	
	Pennsylvania Liquor Control Board	
	State Pesticide Applicator License	
	State Honey Bee Hive Registration	
	Fish or shellfish licenses	
	Other (please describe):	

Insurance

Please check the Certificates or other proof of insurance you are submitting with this Application:

Submitting (y/n)?	Insurance	Notes
	General Liability Insurance	
	Product Liability Insurance	
	Liquor Liability Insurance	
	Other (please describe)	

ACKNOWLEDGEMENT AND AGREEMENT

By signing this page, and in exchange for The Food Trust accepting your application to participate in the 2020 Farmers Market Program, you acknowledge and agree to abide by and conform to any and all policies, rules, guidelines and procedures established by The Food Trust for The Food Trust 2020 Farmers Market Program (“Rules”), as set forth in “The Food Trust Farmers Markets Program 2020 Vendor Handbook” and such other rules, guidelines, obligations or changes to the 2020 Vendor Handbook as may be provided from time to time in writing to you by The Food Trust.

You also acknowledge and agree that you will comply at all times with all applicable local, state and federal laws, ordinances and regulations (“Legal Requirements”) required for participating in The Food Trust 2020 Farmers Market Program, including (but not limited to) licenses, permits, safety requirements and insurance.

You acknowledge that any failure to follow any of the Rules could result in penalties, including (but not limited to) warnings, the imposition of fees and fines for infractions, and the suspension or termination of your market space or permit to sell.

You acknowledge and agree that you will indemnify, defend and hold harmless The Food Trust against any and all claims, losses, damages, injury, costs, charges, liability or exposure related to or arising from your participation in The Food Trust 2020 Farmers Market Program.

I have read, fully understand, and agree to adhere to all of the Rules of The Food Trust and Legal Requirements.

Name (Please Print)

Signature

Date

AGREED: The Food Trust

By: _____

Title: _____ Date