

Auburn Int'l Farmers Market



Algona • Auburn • Pacific



Auburn Int'l Farmers Market 2012 Vendor Application

VENDOR CONTACT INFORMATION	
FARM/BUSINESS NAME:	UBI NUMBER
	APPLYING FOR: (Please check one) <input type="checkbox"/> Full Season <input type="checkbox"/> Partial Season
MAILING ADDRESS:	STALL PREFERENCES: (Please check one) <input type="checkbox"/> Single Stall 10X10 <input type="checkbox"/> Double Stall 10X20
PHYSICAL FARM PRODUCTION ADDRESS: If your farm has no mailing address, please describe its location using major roads, intersections, etc. indicating north, south, east, west and attach to this application.	STALL UTILITIES: (Please mark all that apply) <input type="checkbox"/> Water <input type="checkbox"/> 110 Volt Electricity - \$5.00 Daily Fee
COUNTY:	WEBSITE:

PRIMARY CONTACT ON THE FARM	
NAME:	PHONE:
	CELL:
	EMAIL:
PRIMARY CONTACT AT THE MARKET	
NAME:	CELL:
	EMAIL:

May we share your contact information with customers and/or the WSFMA? YES NO

Please list names of people who will sell your product at the Market.

Name	Relationship	Name	Relationship

Please indicate the type of product(s) or service(s) to be offered at the Market.

- Farmer/Produce Prepared Food Craft Entertainment
 Processed Nursery/Plant Non-Profit Other

Please list items to be sold at the Market and approximate dates of availability.

Crop Description	Date	Crop Description	Date	Crop Description	Date

PLEASE SEE AND FILL OUT OTHER SIDE

Please indicate the Sundays you would like to reserve at the market: AIFM Sundays 9:00 am to 2:00 pm June 1 June 10 - Sept. 23

Vendor is not required to attend every week.

JUNE 10th 17th 24th
 JULY 1st 8th 15th 22nd 29th
 AUGUST 5th 12th 19th 26th
 SEPTEMBER 2nd 9th 16th 23rd

Request for Space(s)

Stall fees are \$30.00 per stall per day - Stall site will be reserved ONLY WITH ADVANCE PAYMENT OF FEES.

Description	Application Fee	Daily Stall Fee	# of Days	# of 10X10 Stalls	Total Cost
Farmer/Produce	\$20.00	\$30.00	_____	x _____ =	\$ _____
Food Vendor	\$20.00	\$30.00	_____	x _____ =	\$ _____
Crafter	\$20.00	\$30.00	_____	x _____ =	\$ _____
Daily Stall Utilities	N/A	\$5.00	_____	x _____ =	\$ _____
Total All Fees =					\$ _____

Please indicate all licenses and permits required to operate your business and provide a copy of each with this application.

- | | | |
|---|--|--|
| <input type="checkbox"/> Food Processor Permit | <input type="checkbox"/> Fisheries Wholesale License | <input type="checkbox"/> Organic Certification |
| <input type="checkbox"/> Commercial Kitchen Permit | <input type="checkbox"/> Grade A Dairy Permit | <input type="checkbox"/> Pesticide Applicators License |
| <input type="checkbox"/> Food Handler's Permit | <input type="checkbox"/> Nursery License | <input type="checkbox"/> Other |
| <input type="checkbox"/> Temporary Event Permit (Health Department) | | |

DISCLAIMER: Vendors please read and initial each item below and sign at the bottom

- *All vendors must be licensed or otherwise authorized to conduct business in the State of Washington. Vendors are responsible for their own permit and license requirements and tax liabilities. _____
- *All vendors agree to exercise the utmost care in the use of the market facilities. **Smoking is not permitted in the Market areas.** _____
- *The Auburn Int'l Farmers Market does not guarantee the marketability for fitness of the vendor's goods, nor does the Market guarantee the success of the vendor's efforts. _____
- *Auburn Int'l Farmers Market reserves the right to restrict items for sale that are deemed inappropriate and not in keeping with the image of the AIFM or the Washington State Farmers Market Association. _____
- *All vendors will only sell what is listed on this application and are responsible for the quality and safety of what they sell. _____
- *All vendors must provide their own tables, chairs, extension cords, canopies, weights and other operating equipment. _____
- *Depending on menu items, food vendors may be required to apply for a temporary food-service permit. Please contact the Seattle-King County Dept of Public Health for information

INSURANCE – The City of Auburn does not maintain insurance that will respond to claims against the applicant arising out of the use of the booth by the applicant, its members, or those attending the event. Depending on the type of booth and products being sold, you may be required to maintain insurance and name The City of Auburn as an additional insured on the policy. After reviewing this policy, The City of Auburn will determine whether or not you must obtain liability insurance. _____

AGREEMENT – The Applicant agrees to defend, indemnify and hold harmless The City of Auburn, Sound Transit, its agents, employees, officials and volunteers, from any and all claims, injuries, damages, losses or suits, including the cost of attorney fees, arising out of or in connection with activities or operations performed by the Applicant or on the Applicant's behalf arising out of the use of the booth except for injuries and damages caused by the sole negligence of The City of Auburn. _____

Vendors are responsible for making their onsite representatives aware of all AIFM Rules and Regulations.

Vendor has read, understands and agrees to comply with the 2012 Auburn International Farmers Market Rules and Regulations.

VENDOR'S SIGNATURE _____ DATE _____

PLEASE RETURN COMPLETED FORM

<p>This application will not be accepted without:</p> <ol style="list-style-type: none"> 1. Completed Application Form 2. Your Signature Above 3. Full Payment of Application Fee (\$20.00) 4. Full Payment of First Stall Fee (\$30.00) 5. Current Copies of Licenses and Permits 	<p>MAKE CHECKS PAYABLE TO - City of Auburn - AIFM</p> <p>Mail To: Auburn International Farmers Market City of Auburn, Parks, Arts & Recreation 910 Ninth Street SE Auburn, WA 98002</p>
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For more information please contact: Joanne Macnab, AIFM Market Manager Phone: 253-266-2726
 E-mail: jmacnab@auburnwa.gov Fax: 253-931-4005

For Market Use Only			
Application Received	Date	Vendor Number	
Application Fee	Date/Amt	Booth Number	
Application Accepted	Date	Confirmation Letter	Date
Application Denied & Reason	Date	License/Permits Received	Date