



**FARMERS MARKET VENDOR APPLICATION**

Tuesdays 12pm – 6pm  
June 2 – September 29, 2020

**APPLICATION MUST BE FILLED OUT COMPLETELY AND YOUR APPLICATION FEE RECEIVED BY MARCH 1ST.**

**APPLICATION FEE IS: \$40.00 FOR A BOOTH FOR THE SEASON.**

Your Business Name: \_\_\_\_\_

Your Name: \_\_\_\_\_

WA STATE TAX (UBI)#: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone #1: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

**ALL COMMUNICATION IS BY EMAIL. BE SURE YOU CHECK YOUR EMAIL REGULARLY**

Does your business carry General Liability Insurance? \_\_\_\_\_ If yes, who is your carrier? \_\_\_\_\_

Does your business carry Product Liability Insurance? \_\_\_\_\_ If yes, who is the carrier? \_\_\_\_\_

**Daily Stall Fees: \$35.00 Per Stall (10 x 10-foot area is 1 stall). A minimum four-week commitment is required, with the first four weeks' stall fees (\$140) to be paid in advance on your first day of attendance. After the first month, the stall fee can be paid weekly at the end of each market day. Receive a discounted rate of \$30 per stall if you pay for the whole season in advance no later than June 2 (\$540 for one stall for the 2020 season – a total savings of \$90).**

Highlight or Circle Individual Dates You Are Requesting:

June 2 9 16 23 30

July 7 14 21 28

August 4 11 18 25

September 1 8 15 22 29

You are committing to attend the Crossroads Farmers Market on these dates.

Please check all licenses and permits you are required to have to operate your business and provide a copy of each with your application:

\_\_\_ Temporary Event Permit (Health Dept.)

\_\_\_ Egg Handler

\_\_\_ Food Processors Permit

\_\_\_ Grade A Dairy Permit

\_\_\_ Commercial Kitchen Permit

\_\_\_ Fisheries Wholesale License

\_\_\_ Food Handler's Permit

\_\_\_ Foragers provide copies of any National or Local Forest Permits, mycological society memberships, etc.

\_\_\_ High Hazard

\_\_\_ WSDA Hive Registration

\_\_\_ Organic Certification

\_\_\_ Other: \_\_\_\_\_

\_\_\_ Nursery License

Please list ALL items to be sold at the market: (For example, what items you are bringing that you have licenses to bring.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What other farmers markets do you attend? \_\_\_\_\_

\_\_\_\_\_

I certify that all products, or other items I offer for sale at the Crossroads Farmer's Market have been handmade or grown by me in the State of Washington. I will abide by the rules and regulations of the Crossroads Farmers Market. I understand that applications are considered on a first come, first served basis.

Enclosed is my check for \$ \_\_\_\_\_ made payable to: **CROSSROADS FARMERS MARKET**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**YOUR CONTRACT IS NOT COMPLETE WITHOUT YOUR SIGNATURE ON THE VENDOR RULES AGREEMENT SHEET AND THE APPLICATION FEE.**

**PLEASE SEND TO ROZ LIMING, CROSSROADS BELLEVUE, 15600 NE 8<sup>TH</sup> STREET, #K-17, BELLEVUE, WA 98008**