

# Englewood Farmer's Market - Every THURSDAY 9am to 2pm

## Vendor Application 2015-2016

Please check category your product line best fits into:

Produce/Plants     Specialty/Sustainable     Non-profit     Prepared Foods  
 Florida agriculturally related     Other (please describe)

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

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

Phone # (    ) \_\_\_\_\_ - \_\_\_\_\_    Email: \_\_\_\_\_

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

Description of product(s) for sale: (Please be specific and do not use "miscellaneous")

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

List your top 3 best sellers products: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Please indicate which of the products above you produce/grow: \_\_\_\_\_

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

Please indicate what percentage of your products are certified organic: \_\_\_\_\_%

What is the origin of your product and/or produce? \_\_\_\_\_

\_\_\_\_\_

Please indicate what percentage of your products/produce come from local farmers: \_\_\_\_\_%

Rates for areas shall be as follows for the 2015/2016 Season:

October - May Season \$25.00\* per space\*/week

Blackout date: Nov. 26<sup>th</sup> (Thanksgiving Day)

\*One space is defined as 10'x10' selling area (many are 20' deep to accommodate a vehicle/trailer)

Please indicate number of spaces you will need:

One space     Two spaces    If more than two spaces please indicate # [    ]

Special Requirements: \_\_\_\_\_

Please fill in and attach copies of the following documents:

Proof of Insurance: Commercial Liability \_\_\_\_\_

Sarasota County Business Tax #: \_\_\_\_\_

Florida Food Permit #: \_\_\_\_\_

Florida Sales Tax #: \_\_\_\_\_

Applicant's authorized signature: \_\_\_\_\_ name: \_\_\_\_\_ Date:    /    / \_\_\_\_\_

**Return Application** to: Englewood Farmer's Market, P.O. Box 304, Englewood, FL 34295-0304

or email it to: [vendors@englewoodfarmersmarket.org](mailto:vendors@englewoodfarmersmarket.org)

**If you need further information contact:** Lee Perron (941) 548-7843 or email to address above.

