City of Ann Arbor Farmers Market

2019 Daytime Vendor Application Checklist

To be completed by the applicant/vendor before turning into market office

Please ensure you have completed all of the following before submitting your application (check box when complete): □ Notarization (please make sure notary uses seal/stamp) Contact information is complete (please include an email address if possible) ☐ Relevant license, certification, and inspection numbers are listed At least two references with contact info listed ☐ Property information and address(es) are complete Complete producer product list Varieties Months available □ Estimated yield) ☐ Attached copies of valid licenses, certifications, and inspections ☐ Map/sketch of farm properties attached (for farm properties only) Attached Ingredient List for Prepared Foods and/or Value Added Products ☐ Attached Product & Materials List for Artisan Products Attached Lease Agreement Information (for each property not owned by the applicant) This application is subject to the requirements of the Market Operating Rules. Please see Section III.1 for more information. The application is valid from the date it is approved by market staff through March 1, 2020. Please submit a HARD COPY of your application to the market office at 315 Detroit St, Ann Arbor MI 48104. For internal use only: Rec'd Date: ______Rec'd By:_____ Review Date:_____ Items missing/need to complete application (check when complete):

Application: ☐ Approved ☐ Denied

VENDOR CONTACT INFORMATION FOR THE PUBLIC

Please provide contact information that Market Staff can provide when your contact information is requested.

At least one contact option should be provided.

Vendor Name:			
Business Name:			
Addresses:			
Mailing address:		Business location (if different):	
Telephone numbers: Business:	Mobile:	Home:	
Email address:	Website:		
		ported Agriculture) Information SA share pickup at Ann Arbor Farmers Market	
	□ Wednesday	ys □ Saturdays	
	CSA Months (ci	rcle all that apply):	
□ Jan	□ May	□ Sep	
□ Feb	□ Jun	□ Oct	
□ Mar	□ Jul	□ Nov	
□ Apr	□ Aug	□ Dec	



City of Ann Arbor Farmers Market 2018 Daytime Markets Vendor Application

Vendor Name			
(Vendor Name is defined as	the name of person/busines	ss that will hold seniority for	Farmers Market)
Business Name			•
Applicant's Name			
Mailing Address			
City	State	Zip	
Mailing Address City Home Phone Centert F mail	Work Phone	Cell Phone	
Contact E-mail		Website	
Vendor Identity (choose one Check one:	e) 🗆 Producer	□ Artisan	
□ This is my first time	applying to the Ann Arbor F	armers Market.	
•	lor at the Ann Arbor Farmers		
□ I am a former vende	or and I am reapplying for e	ntry.	
	e market before but my app		
Maria de Deservação de La Colonia de Colonia	41 - 4 1 - 3		
Market Products (check all			-1
□ Vegetables □ Fruit			
☐ Meat/Seafood ☐ Dairy			-
☐ Artisan products ☐ Othe	r (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	-		
□ Corporation	Total years of operation		
□ Cooperative	Total years of operation		
□ Non-Profit Organization	Total years of operation		
☐ Other (specify)	Total years of operation		
- Curior (opeony)	rotal yours of operation		
List below the license and ins	spection numbers required f	or the operation of your busi	ness and/or sale of your
products, and any other licen			
Provide copies of all valid	& required licenses, regist	trations, certifications, or p	permits with your
application packet.			
Michigan ada tau Kanasa	and an		
Michigan sales tax license nu	ımber		
Nursery dealer license numb	er	-	
Plant dealer license number	umbor		
Plant or nursery inspection n Organic certification license r	numher		
Licensed kitchen number			
Other relevant license number	 er		
Other relevant inspection nur	mbers		

If you are a business or cooperative, please list names and addresses of all owners and 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 **Email** List immediate family members (as defined by the Public Market Operating Rules Section VII.1.A.) 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 **Email** List any others who actively participate with vendor at market (employees, etc). Please note only those individuals listed on the application will be allowed to sell on behalf of a vendor at the market. Name Relationship Phone **Email** Do you buy and resell any products at other sales outlets? □ No If you answered yes, please answer A & B: A. Per the Public Market Operating Rules (Section V.1.B.), the Ann Arbor Farmers Market is a producers' only market, and resale is prohibited. If you purchase and resell any product(s) at other sales outlets, list these products below: B. Describe how you ensure that resale items will not be sold at the Ann Arbor Farmers Market: Please provide two references below. (Immediate family members, business partners and employees NOT allowed): Relationship Phone Name **Email**

	se of selling at the Ann Arbo	resses where items are grown, proc r Farmore Markot	inced, created, or stored <u>for the</u>		
		properties, please attach all additiona	al information to this application		
П					
Ш	Please provide a map for each farm property address, if you do not already have one on file. The diagram should consist of a sketch drawing or a printed map (i.e. Google Maps aerial view), clearly				
		nclude location of greenhouses and st			
	· • •	of any of the properties listed, approv	•		
		or any or the properties listed, approv approved annually by the Market Mana			
	may not be sold at the Ann Ar	• •	iger. Froducis irom rejected leases		
П	-	reement for any of the properties listed	on the application, you must		
Ш	provide a copy with this applic	eation.			
	•	ase agreement for the leased propertie	• •		
		riting as an attachment to this applicati	on All lease documentation must		
	include the following informati				
		t Name, Phone Number, Email.			
		Owner Name, Phone Number, Email.			
	3. Lease term start and e				
		duced by vendor on leased property.	pagagalwark gamplatad by wander		
	5. Explanation of time sp	ent by vendor on leased property, prod	esses/work completed by veridor.		
Prope	rtv 1				
- Drongr	ty Owner Name:				
Addres	SS:	City:	State: Zip code:		
What r	months of the year is this prope	rty used?			
Total A	Acres Farmed:	Total Kitchen/Workshop Squar	re Footage:		
_					
Green	house Information (If there ar	e more than 3 greenhouses on this sit	e, attach additional information)		
	Square Footage	Heat Source (if any)	Purpose/Use		
1	9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	,	- s.p		
2					
3					
3					
_					
	ction on this property (Check				
∃ Vege	etables 🗆 Fruit	☐ Nursery Stock ☐ Decorative Pla	ants/Cut Flowers □ Dairy		
□ Mea	t/Seafood □ Value-added	foods $\ \square$ Prepared Foods $\ \square$	Artisan products		
Othe	er (please specify)				
	rty Use (Check all that apply):				
	Pasture Greenhouse Food Preparation Packaging Cooking/Baking				
☐ Artist/Craftsman Workshop ☐ Storage ☐ Other (please specify)					
		ige methods on this property (refrigera			
storage	e, etc.):				

Property 2:Property Owner Na	me:	
Address:	City:	State:Zip code:
What months of the year is this	property used?	p Square Footage:
otal Acres Faimed.	rotal Kitchen/workshop	p Square Footage
Greenhouse Information (If th	ere are more than 3 greenhouses on	n this site, attach additional information)
	Heat Source (if any)	
1		
2		
3		
Production on this property (Check all that apply):	
☐ Vegetables ☐ Fruit	□ Nursery Stock □ Decora	ative Plants/Cut Flowers □ Dairy
☐ Meat/Seafood ☐ Value-a	added foods □ Prepared Food	ds □ Artisan products
Other (please specify)		
Property Use (Check all that a		ging Dooking/Doking
	☐ Food Preparation ☐ Packag	
Artist/Craftsman vvorksnop	☐ Storage ☐ Other (please	specify)
Storage Please evolain produc	t storage methods on this property (re	efrigeration dry storage other cold
	t storage methods on this property (re	
torage, etc.)		
Property 3: Property Owner Na	ame:	
Address:	City:	State:Zip code:
Vhat months of the year is this	property used?	_
otal Acres Farmed:	Total Kitchen/Workshor	p Square Footage:
No 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		. (b.) - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1
		n this site, attach additional information)
Square Footage	Heat Source (if any)	Pulpose/Ose
1		
2		
3		
Production on this property (Check all that apply):	
□ Vegetables □ Fruit	□ Nursery Stock □ Decora	ative Plants/Cut Flowers □ Dairy
☐ Meat/Seafood ☐ Value-a	added foods	ds □ Artisan products
Other (please specify)		
Property Use (Check all that a	pply):	
☐ Pasture ☐ Greenhouse	□ Food Preparation □ Packag	ging □ Cooking/Baking
Artist/Craftsman Workshop	☐ Storage ☐ Other (please	specify)
·		
	t storage methods on this property (re	
storage, etc.):		

Product List: Please provide the number of varieties, the expected months of availability and estimated yield for each product you sell. On a separate piece of paper list all varieties for any items with an asterisk (*) and any items for which you grow 5 or more varieties. If you sell products not listed here, please include a supplemental product list with this application. Any products NOT submitted in writing with this application are not allowed to be sold without prior submission of an application update form and approval of the market manager.

	1		
	# of varieties	Estimated Months Available	Estimated Yield
Nursery Stock*			
Annuals*			
Bulbs*			
Ferns*			
Hanging Baskets*			
Hostas*			
Houseplants*			
Michigan Natives*			
Perennials*			
Potted Herbs*			
Succulents*			
Tree Starts*			
Vegetable Starts*			
Decorative Plants			
Bittersweet			
Cut Flowers*			
Evergreens			
Ornamental			
Eggplant			
Ornamental Peppers			
Pussy Willow			
Winter berry			
Wreathes*			
VVIcatios			
Other			
Cheese*			
Chicken Eggs			
Duck Eggs			
Grains*			
Honey			
Mushrooms*			
Nuts*			

	# of varieties	Estimated Months Available	Estimated Yield
Fruit			
Bitter melon			
Blackberries			
Blueberries			
Cantaloupe			
Cranberries			
Elderberries			
Gooseberries			
Grapes*			
Honeydew			
Raspberries			
Strawberries			
Watermelon			
Tree Fruit*			
Apples*			
Apricots*			
Asian Pears*			
Cherries*			
Figs*			
Nectarines*			
Pawpaws*			
Peaches*			
Pears*			
Persimmons			
Plums*			
Quinces*			

	# of varieties	Estimated Months Available	Estimated
Vegetables			
Artichokes			
Arugula			
Asian Greens			
Asparagus			
Beans, dry			
Beans, green			
Beets			
Bok Choy			
Broccoli			
Broccoli Rabe			
Brussels Sprouts			
Cabbage			
Carrots			
Cauliflower			
Celery			
Chard			
Collards			
Corn			
Cucumbers			
Daikon			
Edamame			
Eggplant			
Endive			
Escarole			
Fennel			
Garlic			
Gourds			
Herbs*			
Kale			
Kohlrabi			
Leeks			
Lettuce (Head)			
Lettuce (Salad			
Mix)			
Lima Beans			
Mesclun Micrographs*			
Microgreens* Onions			
(Bunching)			
Onions (Storage)			

	‡ of ⁄arieties	Estimated Months	Available Estimated Yield
Vegetables(cont')	# /	<u> </u>	
Parsnips			
Peppers*			
Potatoes			
Potatoes (Sweet)			
Pumpkins			
Radicchio			
Radishes*			
Rhubarb			
Romanesco			
Rutabaga			
Shallots			
Spinach			
Squash Blossoms			
Squash (Summer)			
Squash (Winter)			
Tomatillos			
Tomatoes*			
Turnips			
Wheatgrass			
Zucchini			
Meat/Seafood			
Beef			
Chicken			
Duck			
Fish*			
Goat			
Lamb			
Pork			
Rabbit			
Turkey			

Prepared Foods, Value-Added Products, Etc.: <u>Attach a complete product list, including a list of ingredients for each product. Please identify which ingredients are locally produced in each product.</u>

☐ Both in a licens	chen compliance with Michigan Cottage Food sed kitchen and in my home kitchen und blease indicate which type of kitchen is u	der Cottage Food Laws (if you
What percentage of your food products □ 0% □ 1-25% □ 26-50%	s are made with locally produced ingredices are made with locally produced ingredices are made with locally produced ingredices.	ents?
Artisan Product Classification: <u>Inclu</u> make each product and sample pho	ude a complete product list including toos of the finished work.	a list of materials used to
	☐ Metal ☐ Personal products Clothing ☐ Glass/Ceramics ☐ Ot	
Vendor's Affidavit		
City of Ann Arbor, and intend to while occupying the Market. I/We understand that the City mamendments to this Application time, and I/We agree to provide Manager. I/We understand that I/we am/a described on this Application file. I/We understand that my/our Application file. I/We understand and agree that any other products that are partered and understand date and agree to comply with the I/We further swear that all inform by me/us on my/our behalf is continued.	oplication must be updated and approvent I/we am/are prohibited from supplementially or totally produced by anyone else. If the City of Ann Arbor Public Market Opthem. If the matter of the City of Ann Arbor Public Market Opthem.	y/our own production or raising ify this Application, any Market Operating Rules, at any me as determined by the Market uch items that have been do by the Market Manager prior onting my/our own products with erating Rules in effect as of this in or along with this Application rms of this affidavit will result in Ann Arbor Farmers Market.
Signature of Applicant (s):		
Or Authorized Agent for Applicant(s):		
Subscribed and sworn to before me on	this day of	, 20
N	otary Public	
_	county	

My commission expires: