

OSCAR G. JOHNSON VA FARMERS' MARKET
2010 Vendor Application

Completed applications and all supporting documents are due May 22th 2010. Please mail completed application to:

Oscar G. Johnson Medical Center
325 E "H" Street
Iron Mountain, MI 49801
Attn Dept: MH-Karen Krebsbach, LMSW
Fax: 906-779-3147

Please read the accompanying market rules for the Oscar G. Johnson Medical Center VA market for more details about the rules and regulations of the farmers' market.

VENDOR NAME & CONTACT INFORMATION:

Vendor's Name: _____

Business Name: _____

Business Address: _____

City, State Zip: _____

Township: _____ County: _____

Business Telephone: _____ Home Telephone: _____

Cell Phone: _____ Fax Number: _____

E-mail Address: _____ Website Address: _____

I am a (n): Individual Family LLC Partnership Corporation Other

I am a U.S. Veteran: Yes No

Have you participated in a farmers' market in the past? Yes No

Name of market _____ City, State: _____

MARKET DATES & RATES

The Oscar G. Johnson VA Farmer's Market will occur on Wednesday 7:00 AM to 1:00 PM CST. Start date is June 16th, 2010. The market will run through September, 29th 2010.

LOCATION & BOOTH INFO

The market will take place on the VA Medical Center grounds; in the pavilion area on the back west side of the facility.

LICENSING/INSURANCE

Each vendor must furnish a current and valid copy of any and all licenses and permits necessary for their operation. All food shall be from sources approved or considered satisfactory by the local health officials and the Department of Agriculture, and shall be clean, wholesome, free from spoilage, free from adulteration and misbranding, and safe for human consumption. Vendors are also required to comply with all Michigan Department of Agriculture Rules and Regulations.

If you are selling your product as organic either through labeling or implying it is organic through your company name or advertising, the raw ingredients and their final percentage in the finished product must be organically certified and meet USDA organic labeling standards. Additionally, the facility where your product is produced or processed must be licensed for organic processing. Please attach all necessary documentation to support this with the application.

Are you required by the State of Michigan to be licensed? _____

If so, please attach copies of current licenses.

Do you carry general liability insurance or product liability insurance for this business/farm? _____

If so, please attach a copy of your certificate of insurance.

If you are a grower, are you certified Organic? _____

If so, please attach a copy of your certification.

Are you required to have a health department license or safe food handling certificate?

If so, please attach a copy of your certification.

