

**ITHACA FARMERS' MARKET**

**FOOD VENDOR APPLICATION**

Note: this application is for all new or existing Food Vendors, Enhanced Agriculture Vendors, and Agriculture and Craft Vendors who sell food or beverages for all or part of the season.

**A) Membership Information**

**Date** \_\_\_\_\_

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

Name#1 \_\_\_\_\_ Name#2 \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

First year vending at IFM? \_\_\_\_\_ Are you under 18? \_\_\_\_\_

Health Department Permit# \_\_\_\_\_ Sales Tax# \_\_\_\_\_

Agriculture and Market Permit# \_\_\_\_\_

Fire Permit# \_\_\_\_\_ Home Processing Permit# \_\_\_\_\_

Other retail or wholesale outlets for this product \_\_\_\_\_

For which markets are you applying to sell your products at?  
\_\_\_early (Apr-May) \_\_\_late (Nov-Dec) \_\_\_Whole season (Apr-Dec)

**B) Product Information**

Please provide us with a detailed list of products you plan to sell.

Prepared/Ready to Eat Foods: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Processed and/or Packaged Foods (describe method used): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Baked Goods: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Beverages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there any special on site preparation needed? \_\_\_\_\_  
Please explain if yes: \_\_\_\_\_

List any commercially pre-made mixes: \_\_\_\_\_

**C) Electrical Equipment** (each booth is allotted 4 AMPS)

Equipment	Amperage
_____	_____
_____	_____
_____	_____
_____	_____

**D) Other Information**

Are you primarily a Food, Craft, Enhanced Ag. or Ag. Vendor?

Specify the approximate percent of any ingredients or supplies that you use that you grow yourself: \_\_\_\_\_% What Items? \_\_\_\_\_

Specify the approximate percent of any other locally-grown ingredients or supplies that you use: \_\_\_\_\_% What items? \_\_\_\_\_

I attest to the truth and accuracy of all information provided by me. If approved for membership in the Ithaca Farmers' Market, I agree to abide by all membership rules and regulations. If accepted, I will submit photocopies of all certificates and permits before the first market I attend.

Signed: \_\_\_\_\_

**For Food Committee use only / Do not write below this line**

This applicant needs these permits:

- \_\_\_\_\_ Health Department
- \_\_\_\_\_ Ag. & Markets
- \_\_\_\_\_ Home Processor
- \_\_\_\_\_ Fire
- \_\_\_\_\_ Sales Tax
- \_\_\_\_\_ Approved
- \_\_\_\_\_ Not Approved