



Town of Halfmoon Farmers' Market

Town of Halfmoon Farmers' Market Application 2020

Application Steps.

1. Fill out and sign application.
2. Agree to abide by Halfmoon Farmers' Market Rules.
3. Attach copies of all required permits and licenses as necessary for your business. Examples:
 - a. Sales tax certificate
 - b. Nursery Grower and Nursery Dealer Registration Certificate (required for any vendor growing and selling plants intended for outdoor use)
 - c. Home Processing Exemption Inspection Report (for vendors of home-processed foods, a copy of this report or a copy of your 20-C Food Processing License)
 - d. Organic Labeling (all growers/producers claiming organic status or advertising produce or other products as organic must be certified by their state chapter of NOFA, OCIA, Demeter Society, or other certified program)
4. Complete and sign the Hold Harmless and Indemnification Agreement.
5. Mail application to: Farmers' Market, Town of Halfmoon, 2 Halfmoon Town Plaza, Halfmoon, NY 12065.
6. You will need to submit the following items prior to your first day at the Market:
 - a. A copy of Product Liability Insurance with a minimum coverage amount of \$1,000,000 listing "Halfmoon Farmers' Market" and the Town of Halfmoon" as certificate holders.
 - b. A check made out to "Town of Halfmoon" for the amount of your approved booth size.

For questions please contact:

Desired booth size

☐

12x12

☐

24x24

Farm / Business Name _____

Name of Vendor _____

Address _____

City _____

Phone _____ Sales Tax ID Number _____

Email Address _____

Briefly describe your operation (size, years in business, animals, greenhouses, organic, IPM, employees, where you source ingredient, etc.).

What are your current sales outlets (farm stand, wholesale, retail, co-op, restaurants, pick your own)? Please list all farmers' markets in which you participate.

What products do you propose to sell that you grow, produce or create?

Please indicate when you plan to start coming to the Market and when you will finish.

_____ I plan to attend for the full Season. I will start attending on _____ .

_____ I plan to attend for a partial season.

Dates: _____

_____ I wish to accept EBT/Food Stamps at the Market for qualified products.

I certify that the above information is true. I have read and understood the Halfmoon Farmers Market Rules and will abide by the Halfmoon Farmers' Market Rules, without exception or conditions. The Market Manager has the authority to decline any and all products a vendor may sell.

Vendor Signature _____ Date _____