



# EASTERN INGHAM FARMERS MARKET

P.O. box 534, Williamston, Michigan 48895

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Telephones: 517-525-5293 OR 616-916-9823

## 2020 Vendor Application

Sundays 10am – 2pm (May 17 – Oct 11)

Check One:  New  Returning Date: \_\_\_\_\_

Business/Farm/ \_\_\_\_\_ Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Road/Street Address) (Apartment #) (City and Zip Code)

Primary Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

Business location if not mailing address: \_\_\_\_\_

Facebook: \_\_\_\_\_ Website: \_\_\_\_\_

Name of Emergency Contact: \_\_\_\_\_ Phone(s): \_\_\_\_\_

**Workers/Helpers:** List ANYONE working the booth OR are alternate contacts (Add your own page if needed)

NAME	PHONE NUMBER(S)	RESPONSIBILITY/DUTIES

**PRODUCT CATEGORY (Check all that apply):**  Arts/Crafts  Cheese  Eggs  Fish  Flowers  Fruit  
 Honey  Maple Syrup  Meat-Beef  Meat-Pork  Meat-Poultry  Vegetables/Herbs  Other \_\_\_\_\_

Animal/Pet Food & Treats (provide copies of applicable licenses)

Prepared/Preserved Food (Provide copies of applicable licenses.) **If selling under Michigan Cottage Food Law, items that are not properly labeled will not be allowed for sale.** (Refer to Michigan Cottage Foods Information at the website [http://www.michigan.gov/mdard/0,4610,7-1225-507722\\_45851-240577--,00.html](http://www.michigan.gov/mdard/0,4610,7-1225-507722_45851-240577--,00.html))

Nursery Stock (Provide copies of applicable licenses.) (Refer to Michigan Department of Agriculture and Rural Development's publication *Nursery Stock Licensing Details and Frequently Asked Questions* at the following website: [http://www.michigan.gov/statelicenseesearch/0,1607,7-180-24786\\_24820-81466--,00.html](http://www.michigan.gov/statelicenseesearch/0,1607,7-180-24786_24820-81466--,00.html))

Licensed Food Establishment/Food Truck (Copies of current applicable licenses must be posted and visible during Market hours – 10 a.m. to 2 p.m.)

### VENDOR CATEGORY **Must raise, prepare or manufacture at least 80% of what you sell**

- 100% Home Grown:** Raise/produce 100% of the food that I/we sell.
- Farmer/Broker: Raise/produce \_\_\_\_\_% of the food that I/we sell & broker \_\_\_\_\_% of the food that I/we sell.
- 100% Home Made:** Prepare 100% of the food that I/we sell.
- Prepared Food Vendor: Prepare \_\_\_\_\_% of the food that I/we sell & broker \_\_\_\_\_% of the food that I/we sell.
- 100% Hand Made:** Manufacture 100% of the items that I/we sell.
- Artisans and Crafters: Manufacture \_\_\_\_\_% of the items that I/we sell and broker \_\_\_\_\_% items that I/we sell.
- Other - List (or attach) products \_\_\_\_\_

I/We request an exemption to the 80% self-raised/produced, self-prepared or self-made REQUIREMENT

**VENDOR FEES: SEASONAL**

SEASONAL FEE – NON-ELECTRIC SPACES – Due on or before May 17, 2019

\_\_\_\_\_ \$180.00 – 1<sup>ST</sup> Space \$180.00  
Each additional space = \$160 - Number additional spaces \_\_\_\_\_ X \$160 = \$ \_\_\_\_\_

**TOTAL AMOUNT FOR SEASON** \$ \_\_\_\_\_

Enclosed is my payment in the amount of: \$ \_\_\_\_\_

SEASONAL FEE – ELECTRICAL ACCESS SPACES – Due on or before May 17, 2020

\_\_\_\_\_ \$220 – 1<sup>ST</sup> Space \$220.00  
Each additional space = \$200 – Number additional spaces \_\_\_\_\_ X \$200 = \$ \_\_\_\_\_

**TOTAL AMOUNT FOR SEASON** \$ \_\_\_\_\_

Enclosed is my payment in the amount of: \$ \_\_\_\_\_

**VENDOR FEES: DAILY (Paid Each time you attend)**

- DAILY FEE – NON ELECTRIC SPACES = \$13/SPACE \_\_\_\_\_ days X \$13 = \$ \_\_\_\_\_
- DAILY FEE – ELECTRICAL ACCESS SPACES = \$16/SPACE \_\_\_\_\_ days X \$16 = \$ \_\_\_\_\_

Cash, checks, and money orders accepted. Make checks payable to **SOWING GROWTH**.

The first day I expect to attend Eastern Ingham Farmers’ Market will be: Sunday, \_\_\_\_\_  
If **NOT every week**, what dates will you be @ the market? \_\_\_\_\_

**APPLICABLE LICENSES AND PERMITS:**

I, \_\_\_\_\_ hereby state that I possess and will display current licenses and/or permits that are applicable to the products that I sell and as may be required by the United States Department of Agriculture, the Michigan Department of Agriculture and Rural Development, the Ingham County Health Department and/or other regulatory authority pertaining to the region where the Sowing Growth/Eastern Ingham Farmers Market is held.

**ADULT CONSENT TO PHOTOGRAPH and/or VIDEOTAPE and DISSEMINATE WITHOUT COMPENSATION:**

I, \_\_\_\_\_ hereby give my consent to be photographed and/or videotaped while participating in any activity offered by **Sowing Growth** and/or **Eastern Ingham Farmers Market**. In addition, I consent to the reproduction and use of any such photographs and videotapes by **Sowing Growth** and/or **Eastern Ingham Farmers Market** for educational, public relations and promotional purposes and I waive any claim by myself, or anyone claiming under or through me, for compensation of any kind in exchange for such photographs, videotapes and use.

**REQUIRED \*\*\*By signing below you acknowledge that the information in this Vendor Application is true**

Vendor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*AND Please sign again to acknowledge that you have read and commit to following the 2020 Vendor Rules & Requirements**

Vendor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

You may request/return applications at: [EasternInghamFM@gmail.com](mailto:EasternInghamFM@gmail.com)

Please send payments (made to “SOWING GROWTH”) or completed application to:  
*EIFM, c/o Sowing Growth, P.O. Box 534 Williamston, MI 48895*

Direct questions to: Tom Cary, Market Manager, [EasternInghamFM@gmail.com](mailto:EasternInghamFM@gmail.com) or 517-525-5293