arm Processed	l Food	Prepared Food	Craft	OK on WEB?
Primary Product Description e.g. produce, fruit, dairy, honey or pizza				
Business Owner Name				
Contact Person (if other than Owner)				
Farm/Business Name				
Day/Evening Phone				
Cell Phone				
Email Address				
Web Address				
Physical Farm/Business Address (please include cross streets)				
Business Mailing Address (if different than physical location)				
County Farm or Business is located in				
WA State Tax UBI Number (REQUIRED)				Mark rows above OK
Emergency Contact Name & phone number				to publish on MKT. WEB page

please add Duvall Farmer's Market as additional insured and provide a copy of that form with your application or have your insurance company send a copy of the additional insured form including Duvall Farmers Market in email to info@duvallfarmersmarket.org or send a hardcopy via US postal mail at our PO box listed near the end of this document. If you cannot provide this document, please contact info@duvallfarmersmarket.org for additional instructions.

OTHER SELLERS: Other than you, who will be selling for you at your booth?

	NAME OF ADDITIONAL SELLER		PHONE # OF ADDITIONAL SELLER	LICENSE PLATE OF VEHICLE
1.				
2.				
3.				
What	other Farmers Markets	do sell in and what days?		
What	additional information	may we put on our webpage	to describe and advertise your busin	ness?
If acc	epted and your category	y is full, would you like to be p	laced on the Waiting List? Yes	No
Do yo	ou need electricity? Ye	s No Elo	ectricity is NOT available - contact t	he market manager
Dov	ou require Water? Yes		discuss bringing your own generate	•
ро ус	ou require waterr res	NO (NI	OTE: NON-WATER might be availab	nie – Check back later <u>)</u>
	_		ner in their booth at all times with	
		_	K rating is also required. All fire ex 12 months – as per the Duvall Fire	_
			•	·
			10'x20' or 10'x30'canopy. 10'x15' b f a larger size is needed later mark i	
			ne size? – use an 'X'!) Note: we may	
STAL	L SPACE REQUESTED:	10' X 10' 10' X 2	0′ 10′ X 30′	10' X 15'

When you need to change booth size please notify the market manager at least one week in advance. Booth fees are 6% of gross sales with a minimum booth fee based on booth size. The minimum booth fee for a 10'x10'booth is \$25, a 10'X15'booth is \$35, a 10'x20'booth it is \$45 and for a 10'x30' it is \$60. The minimum booth fee applies if 6% of gross sales is less than the minimum booth fee for your booth size. Full chart on page 11 of the Guidelines & Policies document. Small Sample below:

Gross Sales & Booth Size to Booth Fee Calculator					
Gro	ss Sa	ales	10x10 feet	10x20 feet	10x30 feet
\$0.00	to	\$416.67	\$25.00	\$45.00	\$60.00
\$416.68	to	\$425.00	\$25.50	\$45.00	\$60.00
\$426.00	to	\$450.00	\$27.00	\$45.00	\$60.00

NOTE: table to the left is a sample only. Full table will be printed on back of weekly sales recording sheet for reference.

LICENSE AND PERMIT REQUIREMENTS

Please check all licenses and permits which are required to sell your products. Please submit a current copy (2022) of each when submitting Vendor Application. All Documents are verified prior to fully accepting your application. The exception is those vendors waiting on King County Health Department permits. Please note pending permits, licenses, registrations or certificates below and supply copies to the market manager on market opening day.

WASHINGTON STATE LICENSES:	
○ Washington State Business License	http://www.bls.dor.wa.gov/
Specialty Business License	
○ Egg Handler/Dealer	https://dor.wa.gov/state-endorsements/egg-handlerdealer
C Liquor License	https://dor.wa.gov/state-endorsements/liquor-retail-and-nonretail
Scale License	https://dor.wa.gov/state-endorsements/weighing-and-measuring-devices
Nursery Retailer/Wholesaler	https://dor.wa.gov/state-endorsements/nursery-dealer-retailerwholesaler
· · · · · · · · · · · · · · · · · · ·	for cut flowers or <\$100 in sales of Live plants per year for business.
WSDA LICENSES:	
Food Processor License	https://agr.wa.gov/departments/food-safety/food-safety/food-processors
Cottage Food Permit	https://agr.wa.gov/departments/food-safety/food-safety/cottage-food
Milk Producer / Processor License	https://agr.wa.gov/departments/food-safety/food-safety/dairy
Organic Certification	https://agr.wa.gov/services/licenses-permits-and-certificates/summary-
descriptions/organic-certification	
○ Honey Bee Hive Registration	https://agr.wa.gov/services/licenses-permits-and-certificates/summary-
descriptions/apiary-registration	
WASHINGTON STATE FISH & WILDLIFE: FISH & SHELL Wholesale Fish Dealers License 10/wholesale fish buyer endorsement.pdf Direct Retail Endorsement License 07/2022 fish dealer license.pdf Aquatic Farm Registration 02/aquatic farm application.pdf	https://wdfw.wa.gov/licenses/commercial https://wdfw.wa.gov/sites/default/files/2022- https://wdfw.wa.gov/sites/default/files/2022- https://wdfw.wa.gov/sites/default/files/2022-
KING COUNTY HEALTH DEPARTMENT PERMITS: http://www.kingcounty.gov/depts/health/env Exemption from Permit Minimal Temp. Food Establishment Moderate Temp. Food Establishment Complex Temp. Food Establishment Mobile Food Establishment	ironmental-health/food-safety/food-business-permit/farmers-market.aspx http://www.kingcounty.gov/depts/health/environmental-health/food-
safety/food-business-permit/mobile.aspx	
O Food Worker Cards	http://www.kingcounty.gov/depts/health/environmental-health/food-
safety/food-worker-card.aspx	
O Commercial Kitchen Permit	

Note: Infused Vinegars require at least a Cottage Permit, but Infused Oils require instead a Food Processing License. All processed food items to be sold at the market must be listed on either your Cottage Permit or Food Processing License. Exemptions to this are listed on Food Processing License web page (link included above).

MARKET DAYS - EXCUSED/NOT-EXCUSED

Please let the Market Manager know as soon as possible if you cannot to be present at market on your scheduled day. It is our desire to present to our community a full market with no holes. NO SHOW Vendors will be charged the minimum size based stall fee for missed weeks and will not be allowed to set up again until all NO SHOW Fees are paid in full. VENDORS MUST GIVE MARKET MANAGER 24 HRS. NOTICE i.e. by noon on Wednesday to avoid a NO SHOW fee.

PLEASE <u>CIRCLE OR HIGHLIGHT</u> THE DAYS YOU KNOW YOU WILL BE PRESENT:

May	June	Jul	У	Aug	Sept	Oct
5	2	2	7	4	1	6
12	9	9	14	11	8	13
19	1	6	21	18	15	
26	2	3	28	25	22	
	3	0			29	

PAYMENT OPTIONS

- **OPTION A:** Pay for entire season before April 1^{ST} = \$440.00 for the 24 week calendar. The registration fee is waived. (The Yearly Fee only covers the minimum charge of \$25 for the first 10'x10' booth space.)
- ➤ **OPTION B:** Standard Payment for those vendors who do not wish to pay for entire season. Please submit a \$35.00 application fee with this application. Minimum daily stall fee is \$25.00 for a 10′x10′ booth, payable at close of market. (For more booth fee information see the previous page).

FARMERS: (information provided below is used in	ı vendor selectic	tion process)		
Are you a certified organic grower? YES	NO	Certification number:		
Do you have any other certifications? YES	NO	If yes, please attach a copy of that certification.		
If not certified organic and you wish to explain you	ur growing prac	actices, please attach a separate sheet and describe.		
What is the total # of acres you cultivate for your	r farmers marke	·ket business:		
What is the total # of acres you own:				
What is the total # of acres you lease/rent and farm yourself:				
What is the total # of acres of orchards:				
What is the total # of acres of row crops:				
What is the total # of acres of livestock:				

NON-FARMERS (information provided below is used in vendor selection process)

Please attach a separate sheet and list all materials or ingredients that are from the State of Washington as well as listing the materials, ingredients, and their origin if not from the State of Washington. Crafters, Processed Food and Prepared food are all juried vendor categories so please submit at least 3 photos of your work, product labels or menus.

PRODUCT INFORMATION

ALL VENDORS (information provided below is used in vendor selection process & permit/license/insurance verification)
PLEASE LIST ALL ITEMS YOU INTEND ON SELLING AT MARKET ALONG WITH DATES WHEN AVAILABLE IF NOT A FULL SEASON PRODUCT.
(Please add a separate sheet of paper if more space is required.)

PLEASE NOTE: Vendors will be granted a permit to sell only what is listed. Please submit any additional items to the Market Manager for consideration before putting them out for sale.

DESCRIPTION OF ALL PRODUCTS FOR SALE AT THE MARKET	DATE AVAILABLE

HOLD HARMLESS AGREEMENT

I have read, understand, and agree to comply with the **2022 Duvall Farmers Market Guidelines and Policies** and by signing my name below, I am bound by the terms and conditions outlined in the 2022 Duvall Farmers Market Application and the Guidelines and Policies. I understand and agree that any family members and employees at the Duvall Farmers Market site will be made aware of and bound by the same Guidelines and Policies of the Duvall Farmers Market. Vendors are responsible for the quality and safety of the products they sell and agree to comply with all Federal, WA State and King County Health Department Rules and Regulations.

By signing below, Vendor agrees to defend, indemnify, keep and hold harmless the Duvall Farmers Market, Duvall Farmers Market Board of Directors, Duvall Farmers Market Manager, and all other agencies the Duvall Farmers Market has agreements with, and all surrounding businesses, their agents and representatives from and against, any and all claims and demands, whether for injuries to persons, loss of life, or damage to property, on or off the premises, arising out of the use or occupancy of the premises by Vendor and shall defend at vendor's own expense any action brought against the Duvall Farmers Market and any of the above mentioned organizations or any other person or organization with which Duvall Farmers Market has a contractual relationship by vendor's acts or omissions.

Vendor further agrees to defend, indemnify, and save harmless the City of Duvall, its appointed elective officers, and employees, from and against all loss of expense, including but not limited to judgments, settlements, attorney's fees and costs by reason of any and all claims and demands upon the City of Duvall, its elected or appointed officials or employees directly or indirectly arising out of the permit issued for the Duvall Farmers Market. It is further provided that no liability shall attach to the City of Duvall, by reason of issuing the Permit for the Duvall Farmers Market.

Vendor Signature:	Date:	
Parent/Guardian Signature:	Date:	
if Vendor is under the age of 18		

By signing this application, Vendor agrees that they and their employees have read and will adhere and abide by ALL Duvall Farmers Market Guidelines and Policies.

PLEASE RETAIN A COPY OF THIS SIGNED DOCUMENT FOR YOUR RECORDS

THANK YOU!

APPLICATION CHECK LIST.

Please initial each item on the checklist that is completed and sign the checklist below.

- I have Read the Duvall Farmers Market Guidelines & Policy document.
- I have signed the Hold Harmless Agreement on the previous page.
- I have printed and filled out the pages above and checked off all permits and licenses that I need.
- I have included a check or money order for the \$35.00 application fee or \$440 fee for the full season note: full season fee must be paid before April 1st and all checks/money orders shall be made out to: Duvall Farmers Market
- I have attached copies of any and all applicable Certifications (e.g. Organic certification).
- I have attached copies of all Licenses Permits and Tests required for the products I intend to sell.
- I have attached an Additional Insured form listing Duvall Farmers Market as the additional insured.
- I have specified a website address or attached three (3) photos of work, product labeling, menus, or brochure. This is required for all Craft/Artisan Vendors, Processed food vendors, Prepared food vendors as well as Farmers selling items in these categories.
- I am a Craft, Processed or Prepared food vendors and I have included descriptions of the ingredients or materials used in making my products and included the state/country of the ingredients origin. Products made from ingredients or materials sourced in the State of Washington are given preference in vendor selection. This information will be important in full categories.
- I am waiting for the King County Health Department to process my health permit. Please check with them about the status. I will bring a copy of my health permits for the market manager on opening day of the market.

Vendor Signature:	Date:
By signing above I agree that I have completed all of th	e initialed items above. Applications that do not include the
required permits, test results, ingredient information a	and insurance paperwork cannot be accepted and the
manager will contact you for missing items before appr	roving.

Please retain a copy of this signed application for your records.

NOTE: Refunds are not given once your application has been approved and your check deposited. Vendor is required to pay all NSF fees.

Please send payment and completed Application to:

Duvall Farmers Market

PO BOX 219, PMB 190 Duvall, WA 98019

You may also drop off your completed Application at Valley Mail on 26311 NE Valley Street #A which moved in late 2016 & is now across the street behind Family Grocery Store.

Unless otherwise requested, please do not email this application form.

If you have any questions or need assistance, please do not hesitate to contact our Market Manager.

Thank you,
Duvall Farmers Market Manager
info@duvallfarmersmarket.org