

LISBON

FARMERS MARKET

2012 Vendor Application Instructions

Mail Completed application package to:

Make checks payable to Lisbon Farmers Market Committee

Market spaces will be assigned when application is complete and paid in full.

Fees: \$80 for 16 consecutive weeks

\$20 per guest spot per day

The Lisbon Farmers Market will be held weekly Thursday June 28 through October 11, 2012. Market hours are 3:30pm to 6:30pm. Set up begins at 2:30 and all vendors must be in place and Ready for sales from 3:15 to 6:30pm. There will be no selling prior to 3:30 and all vendors must vacate spaces by 7:30pm

All vendors must provide a sign identifying their farm/business. Signs can be no smaller than 8 1/2" by 11" and no larger than 10'.

Vendor Attendance: Vendors are expected to maintain weekly attendance. In case of an unexpected absence, Vendors must contact the Market Master in advance. There is one Vendor per spot. Sharing a space with another Vendor is not allowed. The Market will be open rain or shine. The Lisbon Farmers Market Committee reserves the right to close the Market in an emergency situation. Attempts will be made to contact Vendors for unforeseen closures. Regular weekly attendance is mandatory. Chronic absences will jeopardize the location of your space.

Insurance: The proper insurance, including product liability insurance, is the responsibility of the Vendor. A certificate of \$300,000 minimum liability insurance demonstrating market coverage is required. The Town of Lisbon assumes no liability for loss or injury caused by products sold by any Vendor.

A family atmosphere is the expected decorum at the Market. Disruptive or abusive behavior will not be tolerated. Please note for safety reasons there will be no smoking.

Vendors violating any of these regulations may be dismissed from the Market without refund of fees.

Please contact the Market Master, _____ at _____

Lisbon Farmers Market

Vendor Application

Name _____

Business/Farm Name _____

Mailing Address _____

Phone _____ Cell phone _____

Email _____ WebSite _____

CT Sales Tax # _____

UNCAS Health District permit # _____

Documents listed below must be submitted prior to market participation. Please attach all documents appropriate to products/items your will be selling.

Proof of Liability Insurance

Crop Plan & Specialty Crop Plan*

Copies of all licenses and certificated related to products or services being offered

*Forms available from the CT Department of Agriculture

Please list what you intend to sell. Describe growing methods; organic, conventional, grass fed, free range, etc. Describe any products or services not listed on crop plan.

I attest to the truth and accuracy of the information provided in this application. I have read the Lisbon Farmers Market Rules and agree to abide by them. I understand that all food/goods offered must be **grown and produced in Connecticut**.

Signed _____ Date _____

Print Name _____

Please see Vendor application instructions for more information