



Office Use Only	
Date rcvd _____	
Check/MO <input type="checkbox"/>	Credit Card <input type="checkbox"/> Amount paid _____
Electric needed/paid <input type="checkbox"/>	

2016 Maple Grove Farmers Market Vendor Application

Every Thursday, June 9 to October 20, 2016 3 to 7 p.m. (3 to 6 p.m. in October)
 Market location: Maple Grove Community Center parking lot, 12951 Weaver Lake Rd, Maple Grove, MN 55369
ADDRESS FOR CORRESPONDENCE: PO Box 1180, Maple Grove, MN 55311
 Phone: 763-494-5955 Fax: 763-494-6421 Email: farmersmarket@maplegrovern.gov

Fee is determined by space size requested and other factors. Fee must accompany this application for consideration to participate.

Only one applicant per household will be allowed. Any household applying under multiple names will not be considered.

PLEASE PRINT

Date of application: _____

Business/Farm name: _____

Name of primary seller: _____

Street address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

Email: _____ Website: _____

Address where crops are grown or items are produced: _____

(This information MUST be provided and we reserve the right to inspect location at any time before or during the market season.)

You are being asked to supply certain information about yourself that may be private information. The requested information may be used by the Farmers Market staff, Administration department, and other City employees as reasonably necessary. The purpose of this requested information is to compile a list to allow the City to contact you with information regarding your status as a vendor, market related updates/questions, weather related closures, etc. Failure to supply the requested data may result in the delay of the City supplying you with information.

Do you give permission to release your name, phone number, email and website to customers interested in contacting you for information and/or special orders? Yes _____ No _____

List additional sellers and indicate relationship to primary seller (spouse, child, parent, friend, employee, etc.)

Name of additional seller	Relationship to primary	Name of additional seller	Relationship to primary

STALL FEES AND RELATED FEES

Number of market stalls requested (choose one)

1 (2 parking spaces / 1 tent) \$275

1½ (3 parking spaces / 2 tent max) \$450

2 (4 parking spaces / 3 tent max) \$625 NOTE: vendors who occupied four spaces in 2015 may reapply for four spaces. No new four-space stalls will be allocated in 2016.

3-day trial run \$75 (2 parking spaces / 1 tent) Applicant will work directly with Market Manager on logistics, but attendance at three outdoor markets is required.

Your market vehicle must fit in your space. If it does not, you will have to request/pay for a larger stall or park oversized vehicles outside of the market area.

Each parking space is roughly 9 feet wide. It is not possible to fit two 10' canopies into two parking spaces, nor is it possible to fit three 10' canopies into three parking spaces. Please plan accordingly.

I wish to purchase electricity from the market for \$20. Amps used: _____ Note: Vendors requiring electricity are required to use the market's hook-ups. Limited (220 & 110) electricity is available. Vendors must ensure that their equipment/electrical needs are compatible with the market's electrical poles.

NEW for 2016: Vendors who do not plan to display a professional-quality banner or sign showing their farm name, city, and state must pay an additional \$100 at the time of application. An additional \$10 fee will be assessed on each market date when a sign or banner is not displayed. Please contact market staff for a list of sign and banner companies.

ITEMS TO BE SOLD

Please list all items you intend to sell on the Product Inventory Page attached to this application.

We require a detailed list of the items you plan to offer at our market. For example, if you plan to sell "canned goods," you must list the specific names of each canned item. This helps us to avoid potential product overlap. Please note that approval of your application could be delayed if you fail to provide a detailed list of items

Items not listed on the Product Inventory may not be sold. If application is accepted, any additions to items sold must be submitted in writing and cannot be sold until approved by Market staff.

CANNED/PROCESSED/BAKED FOOD ITEMS

Are you selling any canned, processed, or baked food items? yes no

Are these items made in a licensed and inspected commercial kitchen? yes no

If yes, provide the name and address of the commercial kitchen: _____

If yes, you must provide a copy of your MN Dept. of Ag Retail Mobile Food Handler and/or other applicable license with this application.

Are these items prepared in your home? yes no

If yes, you must provide a copy of your Cottage Foods Producer Registration from the MN Dept. of Ag. with this application. Find information about this new process here: <http://www.mda.state.mn.us/cottagefood>

MEAT PRODUCTS

Are you selling any meat products? yes no

If yes, please provide name and address of meat processor:

If yes, you must provide a copy of your MN Dept. of Ag Retail Mobile Food Handler or other applicable license with this application.

Are you a member of Minnesota Grown? yes no

Are you a registered Farmers Market Nutrition Program vendor? yes no

Are your items certified organic? yes no If yes, include a copy with this application of your National Organic Standard certificate as provided by a USDA accredited agent.

List other farmers markets you plan to attend in 2016 _____

Minnesota sales tax ID number (if applicable) _____

What food related licenses do you currently hold? **(INCLUDE COPIES WITH THIS APPLICATION.)**
Skipping this step may delay approval of your application.

Additional licensing from the Hennepin County Environmental Health Department may be required to participate in the market. Please contact them at 612-543-5200 to ensure that you are fully licensed.

MARKET ATTENDANCE

Please check **ALL** days you plan to attend the market. We understand plans may change, but you must contact us (763-494-5955) if your attendance will be different than the days listed here.

- | | | |
|----------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> June 09 | <input type="checkbox"/> July 28 | <input type="checkbox"/> September 15 |
| <input type="checkbox"/> June 16 | <input type="checkbox"/> August 4 | <input type="checkbox"/> September 22 |
| <input type="checkbox"/> June 23 | <input type="checkbox"/> August 11 | <input type="checkbox"/> September 29 |
| <input type="checkbox"/> June 30 | <input type="checkbox"/> August 18 | <input type="checkbox"/> October 6 |
| <input type="checkbox"/> July 7 | <input type="checkbox"/> August 25 | <input type="checkbox"/> October 13 |
| <input type="checkbox"/> July 14 | <input type="checkbox"/> September 1 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> July 21 | <input type="checkbox"/> September 8 | |

Please check:

- I understand that I must be actively involved and invested in the planting, growing, harvesting, and/or processing of products I wish to sell at the market. Resale of agricultural and other products is prohibited unless I receive express permission from market management.
- I have read and agree to abide by all City of Maple Grove Farmers Market guidelines and rules.
- I understand that, once I receive written confirmation of my acceptance, the season fee is non-refundable.
- I agree to accept Maple Grove Farmers Market tokens (debit/credit, promotional and if applicable, EBT tokens and PoP Club tokens) from customers for payment of goods purchased and understand that I will be reimbursed for market tokens submitted to Market staff. The EBT program requires a separate agreement between Market and Vendor, and only vendors who have this agreement will be reimbursed for EBT tokens. PoP Club tokens will only be reimbursed for vendors who sell produce/food-bearing plants.
- I agree that the City of Maple Grove and the Maple Grove Parks and Recreation Board are not liable for any injury, illness, theft, loss, or damage of any kind to either the buyer or seller, or their property, arising out of or pertaining to preparation for, participation in, or use or consumption of products bought, sold, or provided at the Maple Grove Farmers Market; whether such injury, illness, theft, loss or damage occurred prior, during, or after the Maple Grove Farmers Market. By participating in the Market, seller further agrees to indemnify and hold the City of Maple Grove and the Maple Grove Parks and Recreation Board harmless for and against any claims for such injury, illness, theft, loss or damage.
- I understand that it is recommended that I carry my own general liability and product liability insurance, as the City of Maple Grove does not provide this coverage.
- I understand that alcohol and drugs (unless used with prescription) are prohibited at the Market. Vendors must be drug-free and sober upon arriving at the Market. Violation of this policy is grounds for suspension from the Market or immediate revocation of vendor access, in the sole discretion of Market staff.
- The City of Maple Grove takes pictures and videos of people participating in/attending the Maple Grove Farmers Market for use in marketing and promotional purposes. I grant permission to use the name, pictures, videos and quotes of my employees and me for this purpose.

Completed applications from returning vendors received by March 4, 2016 will be considered first and notified of their status by March 18. New vendor applications are considered for acceptance throughout the season. Return of the vendor fee will be given to any application that is not accepted.

Submit your Application by mail or email to: Maple Grove Farmers Market, P.O. Box 1180, Maple Grove, MN 55311 or farmersmarket@maplegrovern.gov. All materials may be submitted by either US Mail or email. However, we strongly suggest that you submit payment (check, money order, or attached credit card form) via US Mail to the address above.

- This **completed application** (above boxes must be checked and signature/date below required. Incomplete applications will result in delayed consideration and approval.)
- **Stall Fee** (make checks payable to the City of Maple Grove or see credit card option). *Please remember to include the \$20 electricity fee if applicable.* Fee will be returned in the event that your application is not accepted.

Fee per stall: 1 stall=\$275 1½ stalls=\$450 2 stalls=\$625 3-day trial run=\$75

- **Electricity Fee if needed** (\$20)
- **No-banner fee** (\$100 if you choose not to display a professional-quality sign or banner identifying your business)
- **Paper or scanned copies of any food related licenses**
- Completed **MN Department of Revenue Form ST-19**
- **Photo of primary seller/product/display/booth** (Not necessary if you participated in the 2015 outdoor or indoor market.)

Incomplete information or failure to include all forms could delay your acceptance. Incomplete applications will be returned in their entirety to the vendor. Late applications could result in placement on the waiting list.

Signature of primary seller: _____ Date: _____

Call 763-494-5955 or email farmersmarket@maplegrovern.gov with questions.

PRODUCT INVENTORY FORM Vendor Name _____

REVIEW THIS LIST BEFORE COMPLETING THE FORM.

PLACE A CHECK TO THE LEFT OF ALL ITEMS WHICH YOU HOPE TO SELL AT MAPLE GROVE FARMERS MARKET IN 2016.

Our Market places a strong emphasis on vendor grown/-raised/-made items. A very limited number of non-farmstead/non-vendor-made consumable items may be approved for sale at the discretion of market staff.

Please note that market guidelines do not allow for the sale of arts or crafted items.

FRUITS, VEGETABLES, HERBS AND ORNAMENTALS: For items with an (*), please provide a detailed listing below or attach a separate sheet

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> apples* | <input type="checkbox"/> cucumbers | <input type="checkbox"/> mushrooms | <input type="checkbox"/> radishes |
| <input type="checkbox"/> Asian vegetables* | <input type="checkbox"/> eggplants | <input type="checkbox"/> okra | <input type="checkbox"/> rhubarb |
| <input type="checkbox"/> beans, fresh | <input type="checkbox"/> fennel | <input type="checkbox"/> onions | <input type="checkbox"/> rutabagas |
| <input type="checkbox"/> beans, dried | <input type="checkbox"/> garlic | <input type="checkbox"/> parsnips | <input type="checkbox"/> spinach |
| <input type="checkbox"/> beets | <input type="checkbox"/> grapes | <input type="checkbox"/> pears | <input type="checkbox"/> squash (summer)* |
| <input type="checkbox"/> berries* | <input type="checkbox"/> greens | <input type="checkbox"/> peas (shell) | <input type="checkbox"/> squash (winter)* |
| <input type="checkbox"/> broccoli | <input type="checkbox"/> gourds | <input type="checkbox"/> peas (pod) | <input type="checkbox"/> sweet corn |
| <input type="checkbox"/> Brussels sprouts | <input type="checkbox"/> herbs (fresh)* | <input type="checkbox"/> peppers* | <input type="checkbox"/> Swiss chard |
| <input type="checkbox"/> cabbage | <input type="checkbox"/> kale | <input type="checkbox"/> plums | <input type="checkbox"/> tomatillos |
| <input type="checkbox"/> carrots | <input type="checkbox"/> leeks | <input type="checkbox"/> popcorn/ornamental corn | <input type="checkbox"/> tomatoes* |
| <input type="checkbox"/> cauliflower | <input type="checkbox"/> lettuce | <input type="checkbox"/> potatoes | <input type="checkbox"/> turnips |
| <input type="checkbox"/> celery | <input type="checkbox"/> melons* | <input type="checkbox"/> pumpkins* | <input type="checkbox"/> other* (list below) |

Please provide a detailed listing of items marked with (*) as well as any items not listed above.

MEAT/POULTRY

- | | | | | |
|--------------------------------|----------------------------------|--------------------------------|-------------------------------|---------------------------------|
| <input type="checkbox"/> beef | <input type="checkbox"/> chicken | <input type="checkbox"/> goose | <input type="checkbox"/> lamb | <input type="checkbox"/> turkey |
| <input type="checkbox"/> bison | <input type="checkbox"/> pork | <input type="checkbox"/> goat | <input type="checkbox"/> duck | <input type="checkbox"/> fish |

Other/Detailed listing of cuts or processed meats:

PLANTS/FLORALS:

- | | | |
|--|---|---|
| <input type="checkbox"/> annual bedding plants | <input type="checkbox"/> cut flowers/arrangements | <input type="checkbox"/> hanging baskets |
| <input type="checkbox"/> perennials | <input type="checkbox"/> potted plants | <input type="checkbox"/> trees/shrubs/vines |

Other/Detailed listing:

BAKED GOODS: For items with an (*) please provide a detailed listing in "other" section.

- | | | | |
|--|--------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> breads (yeast)* | <input type="checkbox"/> coffee cake | <input type="checkbox"/> fruit pies* | <input type="checkbox"/> scones |
| <input type="checkbox"/> breads (quick)* | <input type="checkbox"/> cupcakes* | <input type="checkbox"/> muffins* | <input type="checkbox"/> sweet rolls |
| <input type="checkbox"/> cookies* | <input type="checkbox"/> candy* | <input type="checkbox"/> Other (list below) | |

Other/Detailed listing:

FARMSTEAD PRODUCTS: For items with (*) please provide detailed listing in "other" section.

- | | | | | | | |
|----------------------------------|---------------------------------|---|---|-------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> cheese* | <input type="checkbox"/> fiber* | <input type="checkbox"/> maple
syrup | <input type="checkbox"/> soap/lotion
(product of farm) | <input type="checkbox"/> eggs | <input type="checkbox"/> honey | <input type="checkbox"/> nuts |
|----------------------------------|---------------------------------|---|---|-------------------------------|--------------------------------|-------------------------------|

Other/Detailed listing:

PROCESSED FOODS/VALUE-ADDED PRODUCTS: For items with (*) please provide detailed listing in "other" section.

- | | | | |
|--|---|--|------------------------------------|
| <input type="checkbox"/> cheese* (not product of the farm) | <input type="checkbox"/> relishes* | <input type="checkbox"/> sauces* | <input type="checkbox"/> wild rice |
| <input type="checkbox"/> dried herbs/spices* | <input type="checkbox"/> pickled foods* | <input type="checkbox"/> tea* | <input type="checkbox"/> mustard* |
| <input type="checkbox"/> jams, jellies, fruit syrups* | <input type="checkbox"/> oil* | <input type="checkbox"/> canned veggies* | <input type="checkbox"/> other |
| <input type="checkbox"/> juice or cider* | <input type="checkbox"/> salsa* | <input type="checkbox"/> vinegars* | |

Other/Detailed listing:

NON-FARMSTEAD CONSUMABLE ITEMS

- | | |
|---|---|
| <input type="checkbox"/> Soaps and Lotions (list below) | <input type="checkbox"/> Other (list below) |
|---|---|

READY-TO-EAT ITEMS: Please attach a detailed menu or list items below:

BRANDED ITEMS: Vendors may sell one or two items displaying their farm or business brand (for example, cookbooks, t-shirts, or caps) List specific items here: _____



MAPLE GROVE

FARMERS MARKET

Use this sheet for credit card information only.
It will be destroyed after the payment
has been processed.

Under Minnesota law the information provided on this application is considered public and is available to anyone, except for the following:

The information regarding your credit card is private and will be provided only to yourself and to those people who need to know it in order to process your payment. This includes city employees who process your payment and employees of applicable financial institutions. You are not required to provide your credit card information if you want to pay by another method. However, if you choose to pay by credit card you must provide your credit card information to pay the appropriate fee. Otherwise, your application will not be processed.

TO PAY BY CREDIT CARD VISA MASTERCARD DISCOVER AMERICAN EXPRESS	Name as it appears on credit card _____ Please print
	Billing address for credit card: _____ Street address
	_____ City State ZIP
	Type of credit card <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER <input type="checkbox"/> AMERICAN EXPRESS
	Expiration Date ____ / ____ / ____
	Card Number _____
	CSV # _____ (3 digit number on back of card / on front for American Express)
	\$ Amount _____ (add \$20 for electricity if applicable)
	Cardholder signature: _____
	Date: _____

Operator Certificate of Compliance

Read the information on the back before completing this certificate. **Person selling at event:** Complete this certificate and give it to the operator/organizer of the event. **Operator/organizer of event:** Keep this certificate for your records.

Do not send this form to the Department of Revenue.

Print or type

Name of business selling or exhibiting at event		Minnesota tax ID number	
Seller's complete address		City	State
			Zip code
Name of person or group organizing event			
Name and location of event			
Date(s) of event			

Merchandise sold

Describe the type of merchandise you plan to sell.

Sales tax exemption information

Complete this section if you are not required to have a Minnesota tax ID number.

- I am selling only nontaxable items.
- I am not making any sales at the event.
- I participate in a direct selling plan, selling for _____ (name of company), and the home office or top distributor has a Minnesota tax ID number and remits the sales tax on my behalf.
- This is a nonprofit organization that meets the exemption requirements described below:
 - _____ Candy sold for fundraising purposes by a nonprofit organization that provides educational and social activities for young people primarily aged 18 and under (MS 297A.70, subd. 13[a][4]).
 - _____ Youth or senior citizen group with fundraising receipts of \$10,000 or less per year (MS 297A.70, subd. 13[b][1]).
 - _____ A nonprofit organization that meets all the criteria set forth in MS 297A.70, subd. 14.

Sign here

I declare that the information on this certificate is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.

Signature of seller	Print name here
Date	Daytime phone ()

PENALTY — Operators who do not have Form ST19 or a similar written document from sellers can be fined a penalty of \$100 for each seller that is not in compliance for each day of the selling event.

Information for sellers and event operators

Operators/organizers of craft, antique, coin, stamp or comic book shows; flea markets; convention exhibit areas; or similar events are required by Minnesota law to get written evidence that persons who do business at the show or event have a valid Minnesota tax ID number.

If a seller is not required to have a Minnesota tax ID number, the seller must give the operator a written statement that items offered for sale are not subject to sales tax.

All operators (including operators of community sponsored events and nonprofit organizations) must obtain written evidence from sellers.

Sales tax registration

To register for a Minnesota tax ID number, call 651-282-5225.

A registration application (Form ABR) is also available on our website at www.taxes.state.mn.us.

Information and assistance

If you have questions or want fact sheets on specific sales-tax topics, call 651-296-6181. TTY: Call 711 for Minnesota Relay.

Most sales tax forms and fact sheets are also available on our website at www.taxes.state.mn.us.

For information related to sellers and event operators, see Fact Sheet #148, *Special Event Exhibitors and Operators*.

We'll provide information in other formats upon request to persons with disabilities.