



Saturdays, 8:00 AM to 1:00 PM, May through October
Located on North Main Street in Downtown Janesville

Prepared Food Vendor Application

Please submit fees with application. Checks should be made out to "Janesville Farmers Market, Inc."
For the purpose of this document, Janesville Farmers Market, Inc. herein is referred to JFM

1. Contact Information:

Name of Vendor:

Name of Business/Organization:

Have you been a vendor at the JFM in the past: _____ If so how many seasons: _____

Mailing Address:

City _____ State: _____ ZIP Code: _____

Business Address (if different)

City _____ State: _____ ZIP Code: _____

Primary Phone: (____) _____ Secondary Phone: (____) _____

Email: _____ (Information will be sent by e-mail unless otherwise requested.)

Website or Facebook Page: _____ Include link from JFM website? Y/N

English speaking contact, if necessary: Name _____ Phone _____

Vendor Alternate Representative(s): *Must be family member or participant in production of products sold.*

Name	Relationship to Vendor/Business	Phone/Email
1.		
2.		

2. Type of Application:

A. Seasonal: 26 weeks, May 4 through October 26: **\$150**
of 10x10 stalls _____
If parking is available I would like to purchase parking for an extra \$50 yes or no
Start date: _____ End date: _____

B. Partial Seasonal: 8 **consecutive** weeks of your choice: **\$75**
of 10x10 stalls _____
If parking is available I would like to purchase parking for an extra \$20 yes or no
Start date: _____ End date: _____

C. Daily: **\$20** Date(s) you intend to vend (not binding): _____
If parking is available I would like to purchase parking for an extra \$5 yes or no
If you require parking you will be charged the parking fee per 10x10 stall purchased

*Applications received at the February Annual Meeting receive a **10% discount** on seasonal and partial seasonal prices. Please Note: There is no discount on the parking fee.* Please check with the JFM Manager to see if parking is available.

3. Product Information

Please check the products you intend to vend. Check all that apply.

Bread		Jams/ Jellies Produced Under Pickle Law*	
Cookies		Canned Goods Produced Under Pickle Law*	
Pastries		Jams/ Jellies Produced in Licensed Kitchen	
Cakes/ Cupcakes		Canned Goods Made in Licensed Kitchen	
Pies		Candy	
Quick Breads/ Muffins		Restaurant Foods, Sandwiches, Etc.	
Pasta		Ethnic Foods (describe _____)	
Granola/ Cereal		Deli Items, Pre-packaged Salads, Pesto, Etc.	
Specialty Breads with Cheese or Vegetables		Ice Cream, Snow Cones, Frozen Treats	
Kettle Corn		Hot Coffee ground in licenced kitchen	
Spice Blends, dry		Specialty Drinks, Espresso, Cocoa, Chai, etc.	
Tea or Coffee Blends, dry		Iced Tea, Lemonade	
Oil Blends		Nonprofit Fund-raising: _____	
Packaged Drinks not made by you, such as soda and water. (requires prior approval)		Other: _____ _____	
Pet Treats or Pet Food		Other: _____	

*Items produced under the WI Pickle Law must meet production and labeling requirements.

Please list all items that are new for the 2019 season.

Please see the [Vendor Regulatory Checklist](#) and [Rock County Health Department Regulations](#) .
Contact the JFM Board or Manager with additional questions. manager@janesvillefarmersmarket.com

5. Additional Information About Your Products

Please briefly describe your local business. How does your business fit with the mission of JFM?

Please describe how you intend to use Wisconsin grown foods and materials in your products.

Please Describe your vending stand, food cart or booth. What size space do you require?

Do you need electricity? _____ Do you need vehicle parking at your booth? _____
*limited availability

6. License, Permit, Labeling and Permission Information

-Provide copies of licenses and permits issued by regulatory agencies as required for your product(s). It is the responsibility of the vendor to obtain and provide to the Market Manager copies of all licenses and permits required for the sale of vendor's products at the JFM along with this application. License and permit requirements may include, but not limited to: Commercial Kitchen License, Mobile Vending Permit, WI Sellers Permit, WI Commercial Feed License (for pet treats)

-Potentially hazardous foods need extra care in handling, as required by State and Local regulations. Examples include: meat, poultry, fish, baked goods with high-moisture vegetables, eggs, ice cream, custards, cheese, and other defined items.

-Liability Insurance – Vendor is responsible for their own personal and product liability insurance. Insurance is encouraged for all vendors. Insurance is **required** for vendors selling potentially hazardous foods.

-Vendors will provide copy of automobile insurance.

-Labeling – Vendors are responsible for meeting all labeling requirements.

7. Agreement

I have read the rules, regulations and policies as described for the JFM and hereby agree to abide by them. Further, I agree to sell at the JFM only such items as those listed above. I also acknowledge these products must be of my own production and produced at the location described on my application, with the exception of items approved in writing by the JFM Manager or Board of Directors.

I agree that the JFM has authority to immediately settle any disputes regarding product legitimacy, procedural and vendor conduct rule violations subject to appeal under the procedures set forth in the market rules.

I agree to allow for inspection of my records and of the premises where the products offered for sale are produced. The JFM and/or representatives of the market will carry out these inspections at any time. Failure to allow an inspection will constitute a violation of market policies.

I understand that the JFM does not carry any insurance policies to cover individual participants and that I may be required to carry such insurance.

Vendor Signature: _____ **Date:** _____

Photo Release: I authorize Janesville Farmers Market, Inc. to photograph me, my products and my representatives throughout the event and use the photographs in related promotions. I understand and agree that the Janesville Farmers Market may edit, duplicate, distribute, reproduce, broadcast and/or reformat these images in any form and manner without payment of fees, in perpetuity.

Vendor's Signature: _____ Date: _____

Include Vendor Fee with application
Please submit complete application materials to:
Janesville Farmers Market, Inc.
PO Box 8252 Janesville, WI 53547-8252
manager@janesvillefarmersmarket.com



JFM Hold Harmless Form

The undersigned hereby represents that he/she is the Applicant or the Officer or other Authorized Agent of the Applicant named herein and that he/she is over 18 years of age.

The undersigned further acknowledges that he/she had read and is familiar with the [Janesville Farmers Market Policies, Procedures and Rules](#) and recognizes and agrees by his/her signature hereto that the issuance of any permit is expressly conditioned upon Applicant's acceptance and continuing compliance at all times with said Policies, Procedures and Rules.

Applicant on behalf of him/herself and his/her heirs, successors and assigns, hereby releases fully and forever, and discharges the City of Janesville, the Janesville Farmers Market Inc., and each and every of the perspective officials, officers, employees and agents from any and all claims, actions, cause of action, damages, costs and/or expenses of any kind or nature, including attorney's fees, however caused and incurred by the applicant, arising from or in any way connected with the issuance of permission to Applicant to be a vendor at the Janesville Farmers Market and the resulting operation of Applicant's business at said Market.

Applicant hereby agrees to indemnify and hold harmless the City of Janesville, the Janesville Farmers Market Inc., and each and every of their respective officials, officers, employees, and agents from and against any and all claims, actions, causes of action, damages, costs and/or other expenses of any kind or nature, including attorney's fee, arising from or in any way connected with the Applicant's use of public space, operation of Applicant's business and the use of the same by Applicant's agents, members, partners, associates, contractors, servants, employees, invitees and licensees.

The undersigned declares under penalties and perjury that the factual information furnished by him/her in Applicant's Application is true, accurate and complete to the best of his/her knowledge.

Applicant shall be responsible for compliance with all laws, rules, regulations and ordinances governing the sale of all goods at the Janesville Farmers Market.

The Janesville Farmers Market Board of Directors reserves the right to terminate the Market Contract of any or all Vendors at any time without cause and without reimbursement of fees paid.

Date: _____

Applicant: _____

Address: _____

Telephone: _____

Application materials include: Vendor Application * Product Checklist *Hold Harmless Form

*If applicable, copies of valid Wisconsin Sellers Permit, *Nursery License, *Nursery Inspection Certificate

*Food Licenses, *WIC/Senior Voucher Certification and other regulatory requirements needed for the sale of product at this site.

Please submit complete application materials to:

Janesville Farmers Market, Inc.
PO Box 8252 Janesville, WI 53547-8252
manager@janesvillefarmersmarket.com
(608) 289-9292, manager@janesvillefarmersmarket.com

Vendor Profile

*If same as previous years no need to fill out

For use on the website and other promotions

Vendor Name:

How long have you been vending at the Janesville Market:

How long have you been in business:

Who helps you farm/produce/vend:

How many markets do you attend:

If more than Janesville, when/ where:

Your favorite thing(s) to make/ do with your products:

In a few short sentences describe your business: