

| Processed by: CHECK # | |
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| AMOUNT | |

Auburn Farmers Market 2023 Application

| Farmer/Grower \Box | Specialty Food \Box | Artisan/Crafter \Box | Retailer \square | Food |
|--|--|--|--|--|
| Truck 🗆 | | | | |
| | SEASON : June 15 th | nru September 28 | | |
| Name: | | | | |
| Phone: | | | | |
| Business Name: | | Business Phone: | | |
| Address: | | | | City: |
| State: | | | | Email: |
| Preferred method of contact | t from the public: Phone | , , , | s.) 🗆 Email 🗅 O | ther □ |
| Are you interested in particle available? Yes No | es Thursdays from 2:00-6:0d to complete and subrasurance prior to their first x 12' space is listed below. ovide own table and cha | 0 pm. Annual, daily, and mit an application and Market day. All items of Multiple spaces are avoirs. By order of the Fire Cl | nd drop in vendo I necessary cop are subject to Mo iilable upon requ hief via State of M | irs interested in ies of license, arket Manager est at the daily MI, there will be |
| Daily: Food Truck Vendor daily ra Daily rate participation \$5. Annual: | | ed application | | |
| Thursdays annually = \$80 D |] <u>No ref</u> | :UNDS | | |
| | INO KLI | 01403 | | |

Is your business certified organic? Yes \square **No** \square Please provide certification information with application. Indicate below if you or your business possess any other license or certification. If so, please provide a copy of your license and/or certification.

| Туре | Identification Number |
|---|---|
| Sales Tax License | |
| Commercial Kitchen License | |
| Nursery Market Dealer's License | |
| Apiary License | |
| Other | |
| Retail - I | ist all products |
| Reidii - L | |
| | |
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| **ADD ADDITIONAL PAGE(S) IF NECESSARY. | |
| | along with payment and proof of insurance ore the first scheduled Market day. |
| I certify that the above information is correct an rules and regulations of the Auburn Farmers Ma | nd accurate and that I have read and understand the rket, |
| <u>LIABILITY STATEMENT</u> | |
| representatives from any and all actions, | es employees, volunteers, agents contractors and claims or demands that the vendor or vendor's roperty damage related to the vendor's participation |
| | LY UNDERSTAND ITS CONTTENTS. I AM AWARE THAT ETWEEN MYSELF AND THE CITY OF AUBURN, MI., AND |
| | |
| Vendor Signature: | Date: |