

The Riverview Farmers' Market
Application Form 2014

Please print all information clearly. Return to 344 Webster Ave., Jersey City New Jersey 07307 or email to farmsintheheights@gmail.com, by March 15, 2014. If you have any questions please call 510-452-7178. All checks should be made payable to Farms in the Heights.

The Riverview Farmers Market will start on Sunday, May 4, 2014 and will run through the end of Oct. (depending on demand we may extend to the third week in November, 2014) 9 am – 2pm.

NAME: _____ PHONE: _____
E-Mail Address: _____
NAME OF BUSINESS/FARM: _____
MAILING ADDRESS: Street/PO Box _____
Physical location of farm Street/location _____
City, County and Zip _____
SS# or Tax ID code to expedite permit _____

Vendor Type:

Farm Vendor

Sells agricultural products grown on their own farm within 200 miles of Jersey City, NJ. Farm vendors can sell both added-value (such as jelly or cheese) and/or fresh agricultural products, 80% of which are directly grown or produced on their own farm. Farm vendors may sell a portion of products from other local NJ farms upon approval of the board. (All products/produce from other farms must be labeled).

Prepared Food Vendor

Sell foods including: baked goods, coffee, sauces, jellies, and dairy. FITH prioritizes vendors who source as much of their ingredients from local farms within 200 miles of Jersey City. In compliance with NJ regulations such foods must be prepared in licensed inspected commercial kitchen. See Ch. 24 of the NJ Health regulations.

Concession Food Vendor

Food trucks with City and State verified permits may sell food cooked at the market. Vendors may also sell reheated food that has been prepared in a commercial kitchen. FITH prioritizes vendors who source as much of their ingredients from local farms within 200 miles of Jersey City as much as possible.

Specialty Vendor

Which includes merchandise, products or services that complement the food offerings or further the mission of KFM, i.e. knife sharpening, organic beauty products or local pet food.

Artisan/Craft Vendor

Which are vendors who sell unique and high-quality handcrafted art and craft work.

Please specify what type of vendor category pertains to your business or farm?

If you are a farm vendor please indicate:

NUMBER OF ACRES UNDER CULTIVATION: _____

FARMING PRACTICES Certified Organic__ Registered Organic__ Chemical Fertilizer and Pesticide free__ Conventional__ Bio-Dynamic__:

PRODUCTS FOR SALE:

List items, fresh or prepared, which you intend to sell. Please be as specific as possible.

Will you be selling any products produced by another vendor or establishment? Please list and indicate the percentage of your products that are not produced by yourself.

PRICING: Our neighborhood is mixed income and we would like to ensure that products sold at the market are reasonably affordable for our community. Please list the price range of your products and if these prices are comparable to similar products sold at Farmers Markets.

Employees: Please list all of the employees who will be working at your booth other than yourself along with contact information. If you staff changes please provide new contact information:

Farms in the Heights expects all vendors who employ hired staff to comply with New Jersey Labor standards for wages and breaks and Equal Employment Opportunity guidelines.

Vendor fees:

- Food vendors (farm, prepared and concession) \$35 fee for a 12ft x 12ft booth, there will be a \$10 dollar fee for one or more additional booths.
- Specialty, Craft, Artisan and small business incubators designated by the board (which can include some food vendors) will be charged a \$20 weekly fee.

Vendors who pay in full by May 4, 2014 will receive a %10 discount.

A \$50 permit fee is required with this application by March 15, 2014. (Does not apply to non-food vendors.) If you are accepted in the Market it will be used for your health permit or not cashed. Make all checks payable to Farms in the Heights Inc.

NUMBER OF BOOTHS _____

Will you be participating in the WIC Farmers Market Nutritional Program in the 2014 season? If yes, you will be asked to display your WIC poster at your market display.

YES___ NO___

Please describe the tables, trucks, freezers, etc in your display. Indicate how much space your booth requires. Include a list of any special needs your booth will require. The Farmers' Market Board will make every effort to accommodate your needs.

INSURANCE: Every vendor and nonprofit organization at the Riverview Farmers' Market is required to show proof of liability insurance and to name Riverview Farmers Market as additionally insured.

Name of insurance carrier: _____ Policy Number: _____

SIGNATURE: _____ DATE: _____

I HAVE READ THE ATTACHED FARMERS' MARKETVENDOR RULES AND REGULATIONS AGREEMENTAND AGREE TO ABIDE BY THEM. I UNDERSTAND THAT NON-COMPLIANCE WITH THE BY-LAWS OF THE MARKET OR WIC REGULATIONS CAN RESULT IN MY MEMBERSHIP BEING REVOKED.

SIGNATURE OF

VENDOR: _____ DATE: _____

