

# FARMERS' MARKET APPLICATION FORM

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*Please provide the following information and submit it to the Health Protection & Investigation Division.*

Name of Market: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Operator's Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Proposed start-up date at the Market: \_\_\_\_\_ Seasonal  Year-Round

Are you a vendor at other Farmers' Markets? Yes  No  If yes, please provide the location:  
 \_\_\_\_\_

Food Menu List ALL food to be prepared or served (attach separate list if needed)	Source of Food Name and address of grocer, supplier, and manufacturer (attach separate list if needed)

Will there be any sampling of your food products at the market?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will there be any food preparation on site?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES, where will hand washing occur? _____	
** Note that sharing of hand sinks with other vendors is not permitted	

Will dishwashing be required?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
If YES, how and where	Double Sink <input type="checkbox"/>	Triple Sink <input type="checkbox"/>
Location	On site at Market <input type="checkbox"/>	Other <input type="checkbox"/> _____

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How will you maintain proper internal food temperatures ( $\leq 4^{\circ}\text{Celsius}$  or  $\geq 60^{\circ}\text{Celsius}$ ) during transport of hazardous food to the market?

- |   |   |
|---|---|
| Insulated Coolers with ice packs <input type="checkbox"/> | Refrigerated transport vehicle <input type="checkbox"/> |
| Frozen transport vehicle <input type="checkbox"/>         |   |

How will you achieve and maintain proper internal food temperatures ( $\leq 4^{\circ}\text{Celsius}$  or  $\geq 60^{\circ}\text{Celsius}$ ) of hazardous food at the market?

- |  |  |
|--|--|
| Mechanical refrigerators <input type="checkbox"/>            | Grill <input type="checkbox"/>             |
| Freezers <input type="checkbox"/>                            | Stovetop <input type="checkbox"/>          |
| Hot holding units <input type="checkbox"/>                   | Hot holding units <input type="checkbox"/> |
| Insulated containers with ice packs <input type="checkbox"/> | Other <input type="checkbox"/>             |

I \_\_\_\_\_ certify and I accept responsibility for ensuring the above information is correct and will be adhered to.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature of Public Health Inspector \_\_\_\_\_ Date: \_\_\_\_\_

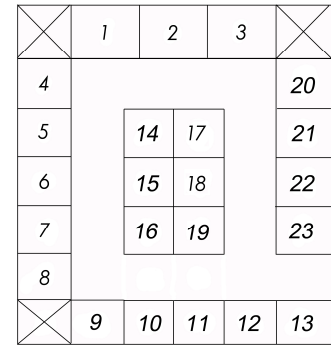
(The Health Protection and Promotion Act 1990, Chapter H.7 as amended provides a fine of not more than \$5,000.00 if convicted of contravening provisions of R.R.O. 1990, Regulation 562 amended to O. Reg. 308/06 entitled "Food Premises").

Booth preference? \_\_\_\_\_

### HOW TO BE A SUCCESSFUL VENDOR

- Smile, talk about your product & SAY THANK YOU!
- Use a cover for your table and your product/produce will stand out more.
- Slanted/raised surfaces display goods more attractively.
- Layering and floor space can be used to conserve space.
- Keep your work area, counter and items neat and clean.
- DON'T SELL ANYTHING YOU WOULD NOT WANT TO BUY
- Signs can help answer customers' questions when you are busy
- Clearly mark your prices for customers to see
- Samples are good, when done in accordance with Public Health guidelines
- Invite your friends and family each week – talk about the market!

*Wellesley Farmers' Market  
FLOOR PLAN*



**Market Policies:** There will be no refunds. Your spot is not confirmed until your payment is received by cash or check (checks to Wellesley NEH Agricultural Society). You are responsible for manning your booth, change, tables, signs, and leaving your area exactly as it was upon arrival. Failure to clean-up may result in your removal from market participation. After your stand is set up, you are asked to park your vehicle by the arena. Late arrivals only hurt the market and risk injury to customers – please use the hour prior to the market to set up your booth and be ready by 8am sharp. Do not remove your products and stand until 12pm.

***I have read, understood and will comply with the Market Policies above & provided on website:***

Vendor Signature \_\_\_\_\_

Vendor Name \_\_\_\_\_

Date Signed \_\_\_\_\_