



**NEW VENDOR APPLICATION 2017/18**     **EXISTING VENDOR RENEWAL 2017/18**  
(Selling at Eastern Market since: \_\_\_\_\_)

**SECTION 1: RENTAL DAY DESIRED: SEE VENDOR HANDBOOK FOR DESCRIPTION (Check all that apply)**

**Saturday** (Year-round)     **Sunday** (June - September)  
 **Tuesday** (June - September)     **Wholesale** (Growers only)

**SECTION 2: CONTACT INFORMATION (Complete all that apply)**

Name of Farm/Business: \_\_\_\_\_ Year Est: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Facebook Address: \_\_\_\_\_ Twitter: \_\_\_\_\_

Alternate Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Customers often ask for contact information regarding our vendors. May Eastern Market Corporation share your business phone number and email addresses?**     YES     NO

**SECTION 3: FOR FOOD, PLANT, & FLOWER VENDORS**

**SEE VENDOR HANDBOOK FOR DESCRIPTION (Complete all that apply)**

**VENDOR CATEGORY:**

**Farmer** (*Must grow 100% of what you sell*)     **Farmer/Dealer** (*Must grow 51% of what you sell*)  
 **Dealer** (*Grows less than 50% of what you sell*)     **Specialty Food**     **Food Truck/Cart**

**PRODUCT CATEGORY (CHECK ALL THAT APPLY):**

Fruits     Dairy / Eggs     Plants  
 Vegetables     Meat / Poultry     Flowers  
 Fish/Seafood     Nursery Stock

Specialty Foods (Describe) \_\_\_\_\_

Prepared/Ready to Eat Foods (Describe) \_\_\_\_\_

Other (Describe) \_\_\_\_\_



## SECTION 6: REQUIRED ATTACHMENTS

This information is **mandatory** as it assists Eastern Market Corporation staff to familiarize themselves with your business. Attach the following hard copy items to this application.

1. All applicable business licensing information (sales tax, MDA, nursery stock, etc.)
2. Business description / biography / history\*
3. Sample graphics / labels / banners\*
4. Pictures of farm or business / pictures selling at other markets\*

*\*Applies to new vendor applications only*

## SECTION 7: SELLING EXPERIENCE (FOR NEW VENDOR APPLICATIONS)

### REFERENCES:

Venue: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact phone or email: \_\_\_\_\_

Venue: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact phone or email: \_\_\_\_\_

## SECTION 8: DEMOGRAPHIC PROFILE

**Is your business:** Immigrant Owned: \_\_\_\_\_ Minority Owned: \_\_\_\_\_ Woman Owned: \_\_\_\_\_ (check all that apply)

**How many employees does your business employ (Include yourself)?** Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

**What is your ethnicity:** \_\_\_\_\_ Prefer Not To Answer: \_\_\_\_\_

## SIGNATURE

**By my signature below, I hereby acknowledge that I have read and understand all provisions of the Eastern Market Public Market Policies & Procedures, and I agree to be bound by all terms and conditions contained therein without exception.**

**I certify to the best of my knowledge and belief, all of the information provided in this application is true, correct, and provided in good faith. Inspection of Vendor's farm/place of business by Eastern Market Corp. may occur as a condition of selling at Market.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

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