

APPLICATION FOR FARM MARKET OPERATIONS

Name of Market Operator _____

Home Address and Phone Number of Market Operator _____

Place/Location where Market will Conduct Business _____

Name, Address and Phone Number of Property Owner where Farm Market Will Conduct Business at _____

Type of Products to be Sold at Farm Market _____

The undersigned Market Operator certifies under penalty of law that the above statements are true as they verily believe. The undersigned further certifies under penalty of law that fifty percent or more of the gross income received from the Farm Market operations is derived from produce raised on farms owned or operated by the Market Operator in a normal crop year.

Market Operator's Signature

The above Market Operator being duly sworn and cautioned upon their oath did sign this form before me and in my presence this _____ day of _____, 199 ____/200 ____.

Notary
My Commission Expires _____

Fee: \$35.00

Applicant: _____

Date Paid: _____