

Attendance:

_____ I plan to attend year-round

_____ I will be a seasonal vendor

Pictures of your products are required for the application. Email (3) pictures to: mdfmmarketdirector@gmail.com

SPACE NEEDS:

Some spaces will accommodate trailers with a 10'x10' canopy. Others have room for a canopy but no vehicle. Please specify your needs by checking the appropriate box:

10'x10' (number of spaces needed): _____

10'x10' with vehicle (provide vehicle in feet and justification of why vehicle is needed):

INSURANCE:

General Liability Insurance: ALL VENDORS are required to obtain a liability insurance policy of not less than (\$1,000,000,000.00) one million dollars, listing Midland Downtown Farmer's Market as additional insured on the policy.

***Insurance policy information must be given to the Market Director prior to the vending at the market.

***All Vendors are required to have vehicle insurance on the vehicle they are using at market. Proof of insurance may be asked for by market director.

VENDOR EXPENSE:

Market Registration Fee: \$50

Weekly Vendor Fee: \$40

APPLICATIONS:

(Applications that are incomplete will NOT BE CONSIDERED FOR APPROVAL)

ELECTRONIC APPLICATIONS CAN BE EMAILED TO: mdfmmarketdirector@gmail.com

HOLD HARMLESS AGREEMENT: Vendor **HAS READ AND UNDERSTANDS** the Midland Downtown Farmer's Market guidelines and policies and **IS BOUND BY TERMS AND CONDITIONS** outlined in them. **VENDOR WILL SELL ONLY WHAT IS LISTED ON THIS APPLICATION.** Vendor is responsible for the quality and safety of what they sell. Vendor shall indemnify, keep and save harmless the Midland Downtown Farmer's Market and all agencies the Midland Downtown Farmer's Market agreements with, from and against **ANY and ALL CLAIMS AND DEMANDS**, whether for injuries to persons, or loss of life, or damages to property, on or off the premises, arising out of use or occupancy of the premises by vendor, including legal fees incurred to defend rights under this agreement, and shall defend at Vendor's own expense any action brought against the Midland Downtown Farmer's Market and of the above mentioned organizations or any other person or organization with which Midland Downtown Farmer's Market has a contractual relationship by Vendor's act or omissions.

Vendor Signature: _____

Vendor Name (Printed): _____

Date: _____

CONTACT:

Samantha Borgstedt
Market Director
806-789-4177
mdfmmarketdirector@gmail.com

DOCUMENT CHECKLIST

The following documents are enclosed with this application (initial those that apply):

NOT ALL DOCUMENTS BELOW ARE REQUIRED FOR EVERY VENDOR

FOR THOSE SELLING ITEMS REQUIRING THE BELOW, DOCUMENTS MUST BE ATTACHED IN THE EMAIL TO THE DIRECTOR ALONG WITH THIS APPLICATION.

_____ I follow Cottage Law in all food preparation and selling.

_____ I have a Food Handler's Certificate.

_____ I have a Certification of Product Liability/General Liability Insurance (Certificate holder – Midland Downtown Farmer's Market).

_____ I have a Texas State Department of Health Food Worker's Permit.

_____ I have a Texas State Department of Agriculture Food Processors License.

_____ I have a certificate of commercially certified kitchen.

_____ I have vehicle insurance for my onsite vehicle.

_____ I have emailed pictures of my products.

_____ I have a Texas Sales and Use Tax Permit.

_____ I have a Texas State Liquor Control Board Endorsement (for sale of wines, beer, spirits at farmer's markets).

_____ I have a Texas State Liquor Control Board MAST Permit.

_____ And/all staff or workers have a Texas State Liquor Control Board MAST Permit.