Franklin-Simpson Farmers' Market 2023 Vendor Application

Name(s):		FRANKA	ARMERS
Business Name:		Fram	our farm to your table 2
Street Address:			
City: State	: Zip:	County: _	
Phone #1:	Phone #2:		
Email:			
How many years have you been a vendor	at the Franklin-Simpson	n Farmers' Market?	
What products will you sell at the m	arket?	_	
Which day/days will you be at the market	? (circle all that apply)	Tuesday Thursd	day Saturday
Why do you want to be a vendor o	it the Franklin-Simps	on Farmers' Market	ļś
Do you plan to offer processed or coo	ked samples to your cu	stomers? (circle one)	Yes No
If yes, do you have a valid sam	pling certificate? (circle	e one) Yes N	lo
Do you plan to offer raw or uncooked If yes, do you have a valid PBP1	·	•	es No