

Farm Fresh Program

Application and Eligibility

Name of Farm:			
Name:	Position:		
Email:	Phone:		
Address:			
Preference for contact: Email	Phone Text		
Do you identify as socially disadvantaged?			
☐ YES	□ NO		
What social or economic disadvantages do ye	ou face? (check all that apply)		
 □ Rural (Nevada County is considered rural) □ Female owned or operated □ Ethnicity: African American, American Indian or Alaska Native, Hispanic or Latino, and Asian or Pacific Islander □ Other qualifying factors: 	 □ Beginning farmer or rancher (operators with less than 10 yrs experience) □ located on Indigenous land □ Small farm (operation with gross cash farm income under \$250,000) 		
How many employees does your farm/ranch	employ?		
Do you employ any socially disadvantaged m (Ethnicity: African American, American Indian Hispanic or Latino, and Asian or Pacific Island	n or Alaska Native, ☐ No ☐ Yes		

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	delivered to com	sumers? Is it hard to find	d local buyers? etc	
			pplication, you agree that y and GHP (Good Handling	
What produc	ct does your farr	n produce for sale?		
☐ Meat (USDA?) ☐ Dairy			☐ Eggs	
☐ Summer Produce☐ Fall Prod☐ Other		☐ Fall Produce	☐ Year round Produce	
				na Produce
				na Produce
☐ Other) of food are you		you harvest? Estimated	na Produce
☐ Other What type(s) of food are you	ı producing? When do		Est. Cost
☐ Other What type(s Quantity/Cos	of food are you	ı producing? When do	you harvest? Estimated	
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