



Farmers Market+ IN The Dole-Vendor Application

Sundays: 10:00 am - 2:00 pm (Market dates stated below)
Fee: Due upon application approval - Do not send payment unless approved
Payment link will be emailed upon approval

Producers Application for Permission to Sell

Date: _____ IL Sales Tax License #: _____

Business Name: _____

Owner: _____

Business Phone #: _____ Cell #: _____

Mailing Address: _____

City, State, Zip: _____

Email Address: _____ Web-Site: _____

Physical Location If Different Than Above: _____

List all items for sale: _____

Pricing

\$25.00 per week (includes electric)

Please indicate the market dates below:

All 13 weeks _____

2021: 11/07 _____ 11/21 _____ 12/05 _____ 12/12 _____ 12/19 _____

2022: 01/16 _____ 01/30 _____ 02/13 _____ 02/27 _____ 03/13 _____ 03/27 _____ 04/10 _____ 04/24 _____

Electric Required _____

Affidavit

I, _____, hereby agree to sell or offer for sale at the Farmers Market+ IN The Dole only such items as listed above, and that they are of my production at the above-described property. Further, I acknowledge full responsibility for all activities and conduct. I also affirm that I carry an insurance policy that will protect against liability and that I must submit a copy thereof as well as carry proof of said insurance when attending the Farmers Market+ IN The Dole. I understand that all applications to sell are considered for review by The Dole Board and can be denied or accepted in partial or in full upon discretion of the Board.

Signature

Date

Family owned & operated? Founded when? _____

Return to: info@FarmersMarketAtTheDole.com