

Historic Haymarket
335 N. 8th Street, Suite B
Lincoln, NE 68508
402-435-7496

Farmers' Market Year 2009 Vendor Application

Vendor's Name:	
Business Name:	
Others involved:	
Mailing Address:	
City, State, Zip:	
Phone #1:	
Phone #2:	
Fax:	
E-mail:	
Physical location of produce operation / product manufacturing:	
Sales Tax #:	
Insurance Info:	

Meat, poultry, egg and dairy vendors, please attach all of your required certificates. Restaurants, please attach a copy of your temporary Food Establishment Permit. Perennial Plant Growers, please attach a copy of your Nursery Grower's License.

Liability insurance coverage extended to cover your products and stand? Yes No
 If you currently do not have liability insurance, check with your insurance agent for coverage.

Please check the 2009 Farmers' Market date(s) you plan to participate as a vendor:

- | | | | | |
|--------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|------------------------------------|
| <input type="checkbox"/> May 2 | <input type="checkbox"/> May 9 | <input type="checkbox"/> May 16 | <input type="checkbox"/> May 23 | <input type="checkbox"/> May 30 |
| <input type="checkbox"/> June 6 | <input type="checkbox"/> June 13 | <input type="checkbox"/> June 20 | <input type="checkbox"/> June 27 | |
| <input type="checkbox"/> July 4 | <input type="checkbox"/> July 11 | <input type="checkbox"/> July 18 | <input type="checkbox"/> July 25 | |
| <input type="checkbox"/> August 1 | <input type="checkbox"/> August 8 | <input type="checkbox"/> August 15 | <input type="checkbox"/> August 22 | <input type="checkbox"/> August 29 |
| <input type="checkbox"/> September 5 | <input type="checkbox"/> September 12 | <input type="checkbox"/> September 19 | <input type="checkbox"/> September 26 | |
| <input type="checkbox"/> October 3 | <input type="checkbox"/> October 10 | | | |

Please check all food product(s) you will be selling:

- | | | | | | |
|----------------------------------|--------------------------------|------------------------------------|--------------------------------|--------------------------------------|---------------------------------|
| <input type="checkbox"/> produce | <input type="checkbox"/> herbs | <input type="checkbox"/> jam/jelly | <input type="checkbox"/> honey | <input type="checkbox"/> cider | <input type="checkbox"/> cheese |
| <input type="checkbox"/> meat | <input type="checkbox"/> fish | <input type="checkbox"/> poultry | <input type="checkbox"/> eggs | <input type="checkbox"/> baked goods | <input type="checkbox"/> fruit |

Other value-added products for human consumption, please describe: _____

Please check all non-food products you will be selling:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> fresh flowers | <input type="checkbox"/> dried grasses/flowers | <input type="checkbox"/> houseplants | <input type="checkbox"/> annual bedding plants |
| <input type="checkbox"/> perennial plants | <input type="checkbox"/> trees & shrubs | <input type="checkbox"/> ornamental corn | <input type="checkbox"/> gourds |
| <input type="checkbox"/> wood furniture | <input type="checkbox"/> beaded jewelry | <input type="checkbox"/> metal sculpture | <input type="checkbox"/> pottery |
| <input type="checkbox"/> fountains | <input type="checkbox"/> clothing | <input type="checkbox"/> jewelry | <input type="checkbox"/> needlecrafts |
| <input type="checkbox"/> quilts | <input type="checkbox"/> hats | <input type="checkbox"/> hand sewn | <input type="checkbox"/> dolls |
| <input type="checkbox"/> stained glass | <input type="checkbox"/> knit/crochet | <input type="checkbox"/> birdhouses/feeders | <input type="checkbox"/> original clothing |
| <input type="checkbox"/> dried floral designs | <input type="checkbox"/> gift baskets | <input type="checkbox"/> wood plaques & signs | <input type="checkbox"/> original art & craft items |

Other, please describe: _____

Historic Haymarket
335 N. 8th Street, Suite B
Lincoln, NE 68508
402-435-7496

Farmers' Market Year 2009 Vendor Application

All new and returning Arts and Crafts Vendors,

Please include two (2) photographs with applicable picture. We are sorry, photos are nonreturnable. Sign up for the space that most reflects your projected needs. While every effort is made to honor your request, determination of stall space(s) are based upon the entire Market's needs. Long standing vendors will retain stall space and have first right of refusal for stall space.

Check Stall Need:

- Long standing vendor, would prefer same stall as last year.
Please identify approximate location or stall number if known: _____

Street Stalls:

- _____ Vehicle-plus side access of vehicle, (vending from side requires two stall spaces)
_____ Vehicle-back, vending from back (may also set up tent/umbrella over space)

Sidewalk Stalls:

- _____ Table side walk, **building entry access and fixed awning on building prevents use of tent/umbrella in space** on east side of 7th Street
_____ Table side walk, may use standard tent/umbrella in space on west side (Depot) of 7th Street
_____ Table promenade, (Iron Horse Park), under stationary awning, standard tent/umbrella fit in space
_____ Table promenade, (Iron Horse Park), open area, may use standard tent/umbrella in space

Full payment must be received by April 13th, 2009 in order to receive discounted season rate. Deadline for guarantee of **stall space to vendors from previous year is April 13th, 2009**. After April 13th, 2009, all remaining stalls become OPEN stalls with no guarantee of same stall location. We must be firm on this deadline so that we are consistent to all current vendors and accommodating to those interested be becoming new vendors.

	Day Stall Fees:	Season Stall Fees:	
Produce & Bakery Stalls	\$30.00/day	\$ 500.00	
Arts/Crafts Stalls	\$35.00/day	\$ 650.00	
Commercial Stalls	\$55.00/day	\$1,100.00	\$ _____
Outlets:	\$3.00/day	\$2.00/day	

Electricity (limited areas): # of outlets: _____ x \$ _____/each week \$ _____

Amperage needed: _____

Electrical equipment description: _____

Health Department Fee: (Annual fee of \$10.00) Home Baker Food Vendors Only \$ _____
(Lincoln/Lancaster County Health Dept. issued placard **must be** posted each Market)

Stall Fee: Produce Baker Art/Craft Commercial \$ _____

Total Amount Due: \$ _____

For Farmers' Market Management staff use:

Received by:		Received date:	
Accepted by:		Acceptance date:	
<input type="checkbox"/> Cash	<input type="checkbox"/> Check #	<input type="checkbox"/> Money Order	\$
Comments:			

Historic Haymarket
335 N. 8th Street, Suite B
Lincoln, NE 68508
402-435-7496

Farmers' Market Year 2009 Vendor Application



On behalf of myself and all those affiliated and participating in business as vendors in the Haymarket Farmers' Market, I/we the following, agree to abide by all attached rules and regulations of the 2009 Haymarket Farmers' Market, to include but not limited to:

1. Arrival times;
2. Timely notification of absence and/or tardiness to market management;
3. Sidewalk vendors unloading (park vehicle, then return and set up) & loading (pack merchandise, prepare to load, retrieve vehicle, return to load up);
4. Market close procedures, including accommodating the exit of car stall vendors before other vehicles are allowed to re-enter the Market area for loading (generally 12:15 p.m.).
5. Set up, street/vendor lot parking;
6. Signage, pricing, proper display
7. Stall space usage;
8. Updated policies as implemented;
9. Be responsive to written, voice mail messages, requested documentation from Business Manager.

I understand it is the policy of the Haymarket Farmers' Market that products sold Farmers' Market must be:

- A. Grown by me and/or those affiliated with my operation;
- B. Prepared by me or crafted by me and/or those affiliated with my operation;
- C. Further, I understand that Market Management staff and/or authorized Vendor Representative designee may perform site inspections.

I agree to carefully read and agree to abide by the rules and regulations of the 2009 Haymarket Farmers' Market. I understand that any changes or additions to this application must be in writing to the Market Management staff at least 21 days in advance to attending the Market. I understand it is **my responsibility to ensure all those involved** as vendors in **my operation must follow the policies and procedures** of the Haymarket Farmers' Market.

Hold Harmless Agreement

Vendor agrees to indemnify, hold harmless and defend Haymarket Farmers' Market, Lincoln Historic Development Corporation, (LHDC) from all claims, damages or demands for injuries to persons or damages to property, of any character or description, to which they may be subject arising out of or from vendor's operations or activities at LHDC events.

Signature: _____

Date: _____

Printed Name: _____

Business Name: _____

Emergent Contact Phone(s): _____