

Wicker Park Farmers Market Application

DEADLINE: MONDAY, APRIL 8th, 2019

Your application WILL NOT be processed until the following items are received:

ALL VENDORS:

- \$100 non-refundable application fee (Please make checks payable to the Wicker Park Bucktown Chamber of Commerce).
- Receipt of outstanding balances from previous market season. Vendors with outstanding balances will not be considered until payment has been made in full for any outstanding balances.
- Section I. Contact Information
- Section II. General Information
- Section III. Insurance & Licensing Information
- Section IV. Product list/Growing calendar
- Signed Transparency Oath
- Vendor EBT Agreement
- Signed Letter of Agreement
- Proof of Commercial Liability Insurance
- Copy of Illinois Sales Tax License

IF YOU WERE ACCEPTED TO THE WICKER PARK INDOOR FARMERS MARKET IN 2018/19:

- A copy of your complete 2018/19 application to the Wicker Park Indoor Farmers Market (which includes all information listed below).

IF YOU DID NOT PARTICIPATE IN THE WICKER PARK MARKET IN 2018/19, COMPLETE:

Farmer (vegetables, fruits, foraged goods, flowers, plants, etc.)

- Section V. Farm/Orchard Site Location Information
- Farm Map (show farm boundaries, growing areas, crop location, storage sheds, packing and processing facility locations)
- Copy of latest property tax bill or lease documentation
- Section VI. (A) Production Practices: Farmers

Producer (meat, poultry, eggs, dairy)

- Section VI. (B) Production Practices: Producers

Processor (includes bakery goods, cheese & other dairy products, honey, jam and jellies, ciders, juice, maple syrup, granola; all meat and poultry items – frozen, cured, smoked, etc.; soaps, oils...)

- Section VI. (C) Production Practices: Processors
- If necessary, email farmersmarket@wickerparkbucktown.com to coordinate drop-off of samples.

(Application requirements continued on next page)

IF APPLICABLE:

- Organic certificate
- Other certifications regarding production practices
- Health Department permit and/or certifications
- Copies of applicable licenses

(The remainder of this page intentionally left blank.)



Wicker Park Farmers Market Application

Vendors who were approved for the Wicker Park Farmers Market in 2018/19 and submitted a complete application in 2018 may submit to us a copy* of that approved application in lieu of filling out sections V and VI of this application (please refer to the Application Checklist for a complete list of requirements).

If you were approved in 2018 by submitting sections V and VI from your 2018 outdoor application, you will need to fill out the complete application again for 2019.

- I have been approved by the Wicker Park Indoor Farmers Market in 2018/19 have included a copy of my application.
- I was approved by the Wicker Park Farmers Market in 2018 and I certify that my growing practices have not changed since 2018. I have included a copy of my 2018/19 indoor application.

*WPFM maintains copies of prior year applications and may be able to waive the prior year application requirement. Please contact farmersmarket@wickerparkbucktown.com for more information.

Application Instructions

NOTE: updates to this year's application are highlighted in yellow. Please be sure to review these changes carefully as the application process has changed.

Please answer all applicable questions as completely as possible, attaching additional sheets of paper as necessary. You must submit a complete application and all supporting documents by **April 8th, 2019**. Please include a non-refundable application fee of \$100 made out to the Wicker Park Bucktown Chamber of Commerce. **The first half of your vendor fees are due no later than May 13th, 2019.**

I. Contact Information (Please Print Legibly)

Business Name: _____

Contact Person: _____

Business Address: _____

City, State, Zip: _____

Township: _____ County: _____

Business Telephone: _____ Home Telephone: _____

Cell Phone: _____ Fax Number: _____

E-mail Address: _____ Website Address: _____

I am a(n): ___ Individual Family ___ LLC Partnership ___ Corporation ___ Co-Op ___ Other

If Other, please explain: _____

I am to be listed as the primary contact for a Cooperative Vendor: ___ Yes ___ No

I am applying as a: ___ Vendor only ___ Co-Op

What is the name of your Co-Op? _____

Do you intend to distribute a CSA at our market? ___ Yes ___ No

Please list all Chicago and non-Chicago Farmers Markets where you sell:

II. General Information

Are you Certified Organic? ___ Yes ___ No If yes, please list certifying agency and date of last inspection _____

Are you Food Alliance Certified "Sustainable"? ___ Yes ___ No

If yes, please list date of last Inspection. _____

Do you possess any certificates regarding your production practices not mentioned above? ___ Yes ___ No

If yes, please list: _____

Do you grow and/or raise all products or ingredients that you plan to sell at the Wicker Park Market? ___ Yes ___ No

If no, please explain:

Check each category in which you plan to bring product to the market:

___ Farmer/Producer: Must grow/produce 100% of the product they sell, with any exception approved by the Market manager. (\$650 vendor fee for the season for one 10'x10' space)

___ Processor Foods: Any vendor who sells a value-added product who is not the primary grower or producer of the raw ingredients used to make that final product. (\$735 vendor fee for the season for one 10'x10' space)

___ Prepared Foods: Any vendor who sells a value-added, product who is not the primary grower or producer of the raw ingredients used to make a final prepared food. (\$870 vendor fee for the season for one 10'x10' space)

****Please note, payments will not be reduced if markets are missed for full-time vendors. It is your responsibility to cover your booth space. We strongly discourage missing a market and leaving your space empty.**

___ Check here if you are interested in a rotating vendor space where you would have a 10'x10' space for 10-11 weeks of the market, alternating weeks with one other vendor. Vendor fee for a rotating space is approximately \$325/season for Farmers, \$365/season for Processors and \$435/season for Prepared Foods Vendors. *NOTE: This arrangement is dependent on interest and space availability, and cannot be guaranteed.*

Space Requirements and Fees:

This is the number of 10'x10' spaces/stalls I would like to reserve for the 2019 market: _____

- Each space/stall will be \$30 for farmers, and \$35 for processors and \$40 prepared foods vendors. (Please note that due to space considerations at the market site, we cannot guarantee requests for additional space will be granted.)

NOTE: Beginning in 2018, all vendors are now required to pay vendor fees for the first half of the season (6/2 – 8/11) before being permitted to set up for sales at our market. Vendor billing will occur twice per season: once prior to the season start and again after the mid-point of the season. Vendor fees for the first half of the season are due no later than MAY 13, 2019. Vendor fees for the second half of the season are due no later than SEPTEMBER 15, 2019. Failure to pay vendor fees on time will result in suspension from the market.

ALL VENDORS: By applying to this market, you are agreeing to be properly set up by 8:00 AM without arriving late and to attend each market or you will be subject to removal of the market without reimbursement.

Cooperative Vendors Only

Please briefly list all members of the cooperative below. **Each member must submit their own application** completed in full, detailing the product(s) they will contribute, along with this application.

Farm/Business Name

City/State Location

_____	_____
_____	_____
_____	_____

III. Insurance & Licensing Information

All applicants must have a comprehensive general liability insurance policy listing the Wicker Park Bucktown Chamber of Commerce as additional insured. It must have a minimum coverage of \$1 million per occurrence and \$1 million aggregate and include:

- Broad form coverage
- Personal injury
- Products/completed operation
- Advertising injury coverage

Applicants should also have \$1 million in hired and non-owned automobile insurance.

Insurance Co.: _____

Policy#: _____ Exp. Date: _____

Coverage Limit: _____ Per Occurrence: _____

Aggregate: _____

Agent Name: _____

Agent Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business Fax: _____

Illinois requires that sales tax be collected in the sale of food, therefore you must have an Illinois Sales Tax License before applying to this market. Please include the License # below and attach a copy of the license to this application.

Illinois Sales Tax License # _____

Please note: A copy of your insurance policy certificate AND a copy of your 2018 sales tax filing to the State of Illinois (annual or monthly statement) must be in our office before your application will be considered complete.

(The remainder of this page intentionally left blank.)

V. Farm/Orchard Site Location Information

Please list all sites, including a map for each (show farm boundaries, growing areas, crop locations, and storage sheds, packing/processing facility locations.) If items are wild gathered identify the location(s) and attach a permission from the property owner where gathered. If the land is rented, please include contact information for the owner and a copy of the rental lease agreement. If property is owned by you, please attach a copy of your latest property tax bill.

Land Description & Address: _____
County: _____ City: _____ State: _____
Number of Acres: _____ Total Acreage in Production: _____
Greenhouse (# and total sq ft): _____ Tunnels (# and total sq ft): _____
Landlord: _____ Phone: _____

Land Description & Address: _____
County: _____ City: _____ State: _____
Number of Acres: _____ Total Acreage in Production: _____
Greenhouse (# and total sq ft): _____ Tunnels (# and total sq ft): _____

VI. Production Practices

A. Farmers (vegetables and fruits, foraged goods, flowers and plants, etc.)

a. Integrated Pest Management (IPM) Practices

Do you use IPM practices? ____ Yes ____ No

Describe your IPM methods including detection strategies and materials used.

What IPM courses or training have you taken? Please note when and where.

What IPM certification do you have? Please note certifier and date.

Do you use an IPM scout or consultant? Please describe that relationship along with their name and contact information.

b. Weed Control

What weeds are your major problems? _____

Do you use any purchased products or inputs to control weeds? ___ Yes ___ No

Please list them all and be specific: _____

Describe your weed control practices:

c. Disease and Pest Control

What insects and diseases are your major problems? _____

Do you use any purchased products/inputs to control insects and disease? ___ Yes ___ No

Please list them all and be specific: _____

Describe your insect and disease control practices:

B. Producers (meat, poultry, eggs, dairy)

If you plan to sell cheese but do not produce the milk, please report in this section on the practices of the dairy you use and provide their contact information here:

a. Nutrition

Do you use and feed additives or injectables to supplement the animals' normal diet?

___ Yes ___ No

If yes, what do you use? _____

Describe your nutrition program/practices:

b. Health

Do you use any hormones or antibiotics to maintain the animals' health? ___ Yes ___ No

If yes, what do you use? _____

Describe your health maintenance practices and how you fight sickness/disease:

c. Surroundings

____ Feed lot ____ Pasture ____ Combination

What type of confinement or range do the animals have to feed and move around? Explain:

d. Licensed Processing Location: Are these USDA licensed? _____

	Product	Processor's Name & Location	Licensed by	License #
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

C. Processors (includes bakery goods, cheese and other dairy products, honey, jam and jellies, ciders, juice, maple syrup, granola; all meat, and poultry items--frozen, cured, smoked, etc; soaps, oils...)

a. List all prepared food or other products you hope to sell at the market. Each must be accompanied by its own ingredients list and source sheet (see attached) - Please make additional copies as necessary. Be sure to note what percentage of each ingredient is in the final product and highlight any local or Midwest grown ingredients used in your products. If you have seasonal items, please include the dates the items will be offered. Products not approved for immediate sale will be wait-listed and you will be contacted if or when the product is approved. **A sample of all product labels must be submitted with this application.**

Products intended for sale at Wicker Park Farmers Market (be specific, please):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

b. List the major ingredients that you produce that go into your products:

If there are none, please explain:

c. Are you personally involved in the physical production of your product(s)? ___ Yes ___ No
Please describe how you make your products:

d. If you use a co-packer or co-producer, please explain what involvement you have in the development and production of your product.

e. If you are required to have a health department license or safe food handling certificate, please attach a copy to your application.

g. Licensed Food Processing Location (where products are fabricated):

Product	Processor's Name & Location	Licensed by	License #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

h. What makes your product a good fit for the Wicker Park Farmers Market? *Please provide small samples of product to be submitted to the Wicker Park Bucktown Chamber of Commerce to better understand you and your product. If your samples are perishable, please contact us to coordinate a drop-off time so that we can ensure freshness when sampling.

C (I) Labeling of Processed Products

Every food pre-packaged in advance of retail sale must bear the following information in English on its label:

- The common and/or usual name of the product;
- The name, address and zip code of the manufacturer, processor, packer, preparer or distributor;
- The net contents of the package;
- A list of ingredients in the order of their predominance by weight with ingredients shown by their common or usual name; and
- A list of any artificial color, artificial flavor or preservative used.

Provide the following information for EACH packaged or processed product you intend to sell at the market. Please use additional sheets if necessary.

a) **Product Name:** _____

Packager: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

b) **Product Name:** _____

Packager: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

c) **Product Name:** _____

Packager: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

d) **Product Name:** _____

Packager: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

e) **Product Name:** _____

Packager: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

C (2) Packaged/Processed Items

a) Item name:

Ingredients grown by you:

_____ Ingredients NOT

grown by you: _____

Source of ingredients NOT grown by you:

b) Item name:

Ingredients grown by you:

_____ Ingredients NOT

grown by you: _____

Source of ingredients NOT grown by you:

c) Item name:

Ingredients grown by you:

_____ Ingredients NOT

grown by you: _____

Source of ingredients NOT grown by you:

d) Item name:

Ingredients grown by you:

_____ Ingredients NOT

grown by you: _____

Source of ingredients NOT grown by you:

e) Item name:

Ingredients grown by you:

_____ Ingredients NOT

grown by you: _____

Source of ingredients NOT grown by you:

f) Item name:

Ingredients grown by you:

_____ Ingredients NOT
grown by you: _____

Source of ingredients NOT grown by you:

g) Item name:

Ingredients grown by you:

_____ Ingredients NOT
grown by you: _____

Source of ingredients NOT grown by you:

Note: If you are selling your product as organic either through labeling or implying it is organic through your company name or advertising, the raw ingredients and their final percentage in the finished product must be organically certified and meet USDA organic labeling standards. Additionally, the facility where your product is produced or processed must be licensed for organic processing. Please attach all necessary documentation to support this with the application.

C (3) Processing Facility Inspection

All processed foods must be prepared in a kitchen that has been inspected and approved by the appropriate governmental agency. If you plan to sell this type of product, please provide the following information:

Location of kitchen: _____

Inspection agency: _____

Phone: _____

Inspecting agent: _____

Inspection date: _____ Exp. date: _____

Are you a Cottage Food Operation? Yes ____ No ____

If so, please contact the Farmers Market Manager (farmersmarket@wickerparkbucktown.com) for additional documentation requirements.

Transparency Oath

In an effort to be honest with my customers and fully transparent to the market management, I promise to sell only those products which I produce myself or which my cooperative produces.

I also agree to be honest about my production practices with both market management and my customers.

I understand that breaking this oath will result in removal from the 2019 market.

Name of Business:

Signature:

Print Name:



Vendor Agreement for EBT Program

The Wicker Park Farmers Market is continuing to offer the Electronic Benefit Transfer (EBT) program for the 2018 season. EBT will enable the Market to accept Link cards from customers in payment for eligible food items under the USDA's Supplemental Nutrition Assistance Program (SNAP) – formerly known as Food Stamps.

The goal of the Market is to provide a value-added revenue source for vendors and to provide customers with alternative methods of purchasing fresh, locally produced foods. Based on the experience of other markets, we anticipate this program will contribute to an increase in overall vendor revenues. To ensure consistency and clarity for customers, the Market is requiring that all vendors selling Link-eligible items participate in the Link program. The qualifying vendors must be familiar with the Link program and comply with the requirements in this Agreement. Vendors selling items eligible for Link will be provided with a "We accept Link Purchases" sign, which will be displayed at their booth. There is no fee for vendors to participate in this program.

Link customers choose the items they wish to purchase from the vendor, who will provide the customer with a paper "chit" showing the amount of purchase. The items purchased are held at the vendor booth while the customer then delivers the chit to the staff at the Wicker Park Bucktown Chamber of Commerce booth. Once at the booth, the Link transaction is processed using a point-of-sale (POS) machine, and the customer receives two receipts, one that they keep and one that is taken back to the vendor. The vendor provides the customer with their desired items after receiving their receipt.

- Link can only be used to purchase fruits, vegetables, meats, fish, poultry, dairy products, and seeds and plants intended for growing food.
- Link MAY NOT be used to purchase non-food items, foods intended for consumption at the Market, or hot foods.
- You MAY NOT set a minimum purchase requirement for Link purchases.

 WPFM 
Vendor Name: _____
Date: _____
Price _____
For EBT Transaction Only

Market customers will use this chit to purchase vendors' products. The Wicker Park Bucktown Chamber of Commerce records Link sales for each vendor and issues reimbursement checks once a month.

Vendors will benefit from this program as if they had an individual wireless machine without the additional equipment and service expenses or bookkeeping responsibilities.

To ensure consistency and compliance with regulations, vendors participating in the Wicker Park Farmers Market must sign this agreement to confirm their agreement to participate in the Link program and to certify they are aware of the rules of the program.

I, _____

on behalf of my business _____,
agree to abide by the rules described herein as they relate to processing Link transactions. I agree to follow all USDA SNAP rules, as outlined in this agreement, and I will also require all individuals transacting business at the Market on my behalf to follow these rules. I understand the Market reserves the right to remove vendors from the Market who do not comply with these rules.

Vendor Signature

Date

Letter of Agreement

I have read the Wicker Park Farmers Market Guidelines. I agree to abide by and operate by the Markets' Guidelines, cooperate with the Market management, and pay the required fees. I agree to sell at the Wicker Park Farmers Market only those items I have listed on the attached Product List.

I understand that the management reserves the right to restrict the type of product(s) I am allowed to sell at the market. I agree that any new, additional products must be pre-approved by the Wicker Park Farmers Market prior to sale. I acknowledge those products must be of my own production or be produced at the location described on my application. I acknowledge that I am not a subcontractor or employee of the Wicker Park Bucktown Chamber of Commerce (WPBCC) and take full responsibility for all my activities in the market (and for those assisting me) throughout the term of this seasons market (June - October, 2019).

I acknowledge the authority of the Market Manager and the WPBCC to immediately settle any disputes regarding product legitimacy, procedural and vendor conduct violations subject to appeal under the procedures set forth in the Market rules. I agree to allow the Market Manager and/or representatives of the Market to inspect the premises where the products offered for sale are produced at any time. Failure to allow an inspection will constitute a violation of Market rules. I understand that the Wicker Park Farmers' Market does not carry any insurance policies to cover individual participants and that I am required to carry such insurance. I will comply with all local, federal, state and municipal laws and ordinances in the operation of my booth during the Wicker Park Farmers Market and shall insure my merchandise against loss by theft or damage.

Reimbursement to the Wicker Park Bucktown Chamber of Commerce: Applicant hereby agrees to reimburse the WPBCC for any expense of providing labor, equipment, and facilities, cleaning up or restoring, and repairing the premises occasioned by any use or activity carried on by application or those authorized under applicant's permit.

Indemnification and Hold-harmless Agreement: The undersigned, for himself and, if different, for the person or organization on behalf of whom this application is submitted, hereby releases WPBCC, its officers, directors and members from any and all claims for, and agrees that WPBCC, its officers, directors and members shall have no responsibility for, personal injury sustained by the Applicant, its agents or employees, or damage to, or loss or destruction of, the Applicant's property. The Applicant further agrees to indemnify and hold WPBCC, its officers, directors and members harmless, from and against any and all claims for personal injury, damage to property or theft occurring in or about the Wicker Park Farmers Market area, whether to the Applicant, its agents or employees or any third party, caused in part or in whole by the participation of the Applicant in Wicker Park Farmers Market, and from any liability and/or for any contractual or quasi-contractual obligations to third parties in connection with the activity, event use or occurrence.

I certify that the information contained in this application is true and accurate.

Name of Business: _____

Signature: _____ Date: _____

Name of signature (PLEASE PRINT): _____

Title: _____