



The Olympia Farmers Market Food Processor Application

Please submit this completed application **with a non-refundable application fee of \$25** to the Market Office located at The Olympia Farmers Market, by mail or email. Food Processors must produce their products within the county boundary of: **Thurston, Lewis, Mason, or Grays Harbor County**. Please make checks payable to:

The Olympia Farmers Market
PO Box 7094
Olympia, WA 98507
(360) 352-9096

Section 1: Personal Information & Business Information

Primary Applicant Contact Information

Applicant Name: _____

Home Address: _____

Primary Phone: _____ Primary Email: _____

Business Partner Contact Information (Must be reflected on business license)

Business Partner Name: _____

Home Address: _____

Primary Phone: _____ Primary Email: _____

Business Information

Business Legal Name: _____

Business Address (if different from above): _____

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Business Phone: _____ Business Email: _____

Business Entity Type (Please Circle):

Sole Proprietor Partnership Corporation LLC Other: _____

UBI#: _____ Year Business Licensed: _____

Section 2: Business & Product Description

Describe all products you are proposing to sell at The Olympia Farmers Market. Attach another page if necessary.

<u>Product</u>	<u>Description</u>	<u>Price</u>

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Explain ***your*** involvement in the processing and production of your product:

Describe the production process:

Where do you currently sell your product?

Where do you source the materials for your product?

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Briefly tell us about your business projections for the next five years:

Section 3: Facilities & Licensing

Please describe your processing facility.

Licenses and Permits. Please check the boxes that are appropriate and *attach copies* of your licenses and permits.

☐ WSDA Food Processor Facility License

☐ WSDA Food Processor License

☐ WSDA Cottage Food License

☐ Thurston County Dept. of Health Permit

☐ Washington State Food Worker Card

☐ WSDA Organic Certificate

☐ Other Applicable Licenses: _____

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Do you have cold storage requirements? If so, what are your plans for your cold storage requirements (41 degrees F or below) while vending at The Olympia Farmers Market?

Please contact Thurston County Public Health & Social Service Department and explain your situation to confirm that you will be able to fulfill all the requirements of Thurston County Public Health & Social Service Department prior to submission of this application.

Section 4: Preferred Market Schedule

Circle the days you intend to sell at the market: Thursday Friday Saturday Sunday

Circle your preferred selling season: Year-Round Seasonal

If "Seasonal" was circled please explain and identify the season.

Section 5: Statements of Compliance

I understand a **\$25.00 non-refundable** processing fee must accompany this application to proceed with consideration. Further, I understand that submission of this application does not ensure or guarantee my acceptance into The Olympia Farmers Market.

I understand that final approval to sell any products at The Olympia Farmers Market will be subject to an **on-site inspection** by The Olympia Farmers Market staff, and/or designated representative. I understand that this application is a preliminary application process. I will provide further information regarding my business including, but not limited to certifications, licensures, permits, and insurance policies.

I hereby certify that all products indicated in the above application are produced by my business and I am not a reseller of any product in my product line. I agree to sell only the products that have been

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approved by The Olympia Farmers Market Board of Directors. I agree that if I seek to add additional products to my product line in the future, they must be pre-approved by the Board of Directors.

I understand that The Olympia Farmers Market is governed by a Policies and Bylaws Manual known as “The Greenbook”. Upon acceptance, I will familiarize myself and my employees with the policies in The Greenbook and our business will adhere to those policies.

I understand that use of the word “**organic**” shall be governed and regulated in accordance with the Washington State Department of Agriculture (WSDA). Should I use the word “**organic**” on signage or labeling I must provide appropriate Organic Certification to Market Staff.

I attest that the information contained herein is complete and accurate to the best of my knowledge.

Primary Applicant Signature: _____

Business Partner Signature: _____

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Product samples will be required as part of the application process. Market staff will contact you to receive samples.

Please submit high quality photos of your product line with this application.

For Official Use Only

Date Received: _____ **Date Reviewed:** _____ **Approval Status:** _____

Comments: _____
