

2020 HAVENS FARMERS MARKET APPLICATION GUIDELINES & POLICIES

Application and Fee Procedure:

1. Please fill out the following vendor application form attached.
2. Make checks payable to **Shelter Island Historical Society**.
3. Attach a copy of applicant's Vendor Liability Insurance certificate that lists both the **Shelter Island Historical Society** and **Havens Farmers Market** as additionally insured.
4. Send completed application, insurance certificate, and check by April 3, 2020 to:
Shelter Island Historical Society, P.O. Box 847, Shelter Island, NY 11964
 - Completed applications received by April 3, 2020 will be considered first; preference will be given to vendors that will enhance the variety of the Market. Applications that arrive after April 3 will be given consideration, if space allows. Full refunds will be given to any applications that are not accepted. Space at the Market and the items a vendor offers will be factors in determining approval.

Required Permits, Licenses, and Insurance:

- All permits and licenses required by the Town of Shelter Island, Suffolk County, State of New York, and the Federal Government are the sole responsibility of the vendors.
- The Town of Shelter Island, the Shelter Island Historical Society, and the Havens Farmers Market are not liable for any injury, theft, or damage to either the buyer or seller, or their property, arising out of or pertaining to preparation for or participation in the Havens Farmers Market; whether such injury, theft, or damage occurred prior, during, or after the Market. Seller further agrees to indemnify and hold the Town of Shelter Island, the Shelter Island Historical Society, or the Havens Farmers Market harmless for and against any claims for such injury, theft, or damage. All vendors must carry their own general liability and product liability, as the Town of Shelter Island, the Shelter Island Historical Society, or the Havens Farmers Market does not provide this coverage.

Havens Farmers Market Policies:

Products must receive clearance from the Market Manager before sale. Products purchased for resale at the market are generally not allowed and must have prior approval of the Market Manager. Vendors may not sell any item not approved or not shown in their vendor application. **Market staff has the right to ask vendor to remove products.** All items must be prepared, displayed, and stored in accordance with NY Department of Agriculture and local health codes and guidelines. All producers of processed items (cheese, meats, jams, jellies, syrups, baked goods, etc.) are required to adhere to all state and local laws pertaining to the production and selling of such goods. Processed food items should be sold with a valid processing license or comply with New York labeling law requirements. Produce sold as organic must have originated from an organic grown certified farm. Farmers/growers that are not certified organic can advertise or sell produce as "chemical free" if they practice chemical free farming. Market staff reserves the right to inspect crops and productions areas at any time before or during the market season.

Market vendors agree to attend all scheduled Markets for the 2020 season, barring an emergency. Vendor will give immediate notice via email to Market Manager when he/she is unable to attend a Market. If a Vendor is absent three or more times, the Vendor may be asked to leave and will forfeit the booth fee.

Market vendors agree to remain at the Market in spite of the following possible situations:

- 1) Vendor sells out of merchandise
- 2) Rain (not including severe or dangerous weather/wind). Market Manager has the sole right to determine severe or dangerous weather/wind.

***Failure to abide by these policies could result in vendor being asked not to participate in remaining 2020 markets and vendor will forfeit booth fees.**

Sales Tax Collection Policy:

- Any required sales tax collections and remittances are the sole responsibility of the vendors.

2020 HAVENS FARMERS MARKET APPLICATION FORM

Vendor fee and the Vendor Liability Insurance Certificate must accompany this application for consideration of participation in the Havens Farmers' Market. PLEASE PRINT NEATLY.

Business/Farm Name: _____

Name of Primary Seller: _____

Mailing Address: _____

Contact Phone Number: _____ Fax Number: _____

Email Address: _____ Website Address: _____

Address where crops or produce is grown or produced:

(We reserve the right to inspect the above location at any time before or during the market season.)

Please circle the number of booths (10' x 10') you need: **1 @ \$370.00** **2 @ \$420.00**

Would you like to participate in the Late Summer Market? YES NO

This market is September 12th through October 10th.

There will be an additional fee of \$100 for a single booth and \$120 for a double booth.

Do **YOU** grow and produce **ALL** your items? YES NO

If not, please explain: _____

Are your items organic or certified organic? Organic Certified Organic neither

Are you selling any processed food items? YES NO

New York sales tax ID number: _____

What food-related licenses do you currently hold?

Additional licensing from the Suffolk County Community Health Department may be required to participate in the market. Please contact the Department of Public Health.

_____ (Initials of Applicant) I have read and agree to abide by all Havens Farmers Market policies.

_____ (Initials of Applicant) I agree that the Town of Shelter Island, the Shelter Island Historical Society, the Havens Farmers Market and their respective officers, employees, agents, and consultants are not liable for any injury, theft, or damage to either the buyer or seller, or their property arising out of or pertaining to preparation for or participation in the Havens Farmers Market (whether such injury, theft, or damage occurred prior, during, or after the Havens Farmers Market.) Business/Farm further agrees to indemnify, defend and hold harmless the Town of Shelter Island, the Shelter Island Historical Society and the Havens Farmers Market and their respective officers, employees, agents, and consultants for and against any claims for such injury, theft or damage.

_____ (Initials of Applicant) I understand that it is recommended that I carry my own general liability and product liability insurance, as the Havens Farmers' Market does not provide this coverage.

Applicant's Signature: _____

Date: _____