



Farm Vendor Application

Farm Name: \_\_\_\_\_

Farm Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Website: \_\_\_\_\_ Social Media: \_\_\_\_\_

**Location of Land or Facilities Used for Production and/or Processing**

Address: \_\_\_\_\_

**List of Products to be Sold**

\_\_\_\_\_  
\_\_\_\_\_

**Market Hours: Thursdays 4pm-7pm, May 4<sup>th</sup>-October 26<sup>th</sup>**

Seasonal Rate: \$150 \_\_\_\_\_

Weekly Rate \$20 \_\_\_\_\_ (must be submitted at least one week in advance)

I hereby swear that I qualify as one of the following (please check all that apply), and I give permission to the Village of Bellevue or, designee, to inspect my farm or business to verify the crops and products stated:

\_\_\_\_ farmer, grower, producer of agricultural products

\_\_\_\_ broker or reseller of fruits and/or vegetables or flowers

\_\_\_\_ cottage food business operating under the Michigan Cottage Food Law

\_\_\_\_ inspected, licensed food facilities

I, \_\_\_\_\_, hereby agree to sell the above listed items at the Bellevue Farmers Market. Further, I acknowledge full responsibility for all activities conducted throughout the terms of the permit and agree to hold harmless of the Village of Bellevue and indemnify same for all claims arising from my use of this permit. **I agree to comply with all rules and regulations of the Village of Bellevue.** Make checks payable to Village of Bellevue or for Credit Card payments call (269)763-9571

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Submit to: [manager@bellevuemi.net](mailto:manager@bellevuemi.net) or Village of Bellevue 201 N. Main St. Bellevue, MI 49021.