



Non-Farm Vendor Application

Business Name: _____

Business Mailing Address: _____

Contact Name: _____

Contact Email: _____ Contact Phone: _____

Website: _____ Social Media: _____

List of Products to be Sold

Market Hours: Thursdays 4 pm-7 pm, May 2nd - October 24th

Seasonal Rate: \$150 _____

Weekly Rate \$10 _____ (must be submitted at least one week in advance)

Weekly Food Truck \$40 _____ (must be submitted at least one week in advance)

Type of Vendor:

____ Artisan

____ Crafts

____ Food Truck

____ Other _____

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 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 BellevueMichiganDDA@gmail.com or Village of Bellevue 201 N. Main St. Bellevue, MI 49021.