Application & Participation Agreement

Due: Wednesday, February 15, 2017

Harrison R. Chapman, Charleston Farmers Market Manager

Phone: (843) 724-7309 & Fax: (843) 720-3967

ChapmanH@Charleston-sc.gov or FarmersMarket@Charleston-sc.gov

The West Ashley Farmers Market (WAFM) is dedicated to the support and advocacy of Lowcountry Farmers & Growers in addition to Food Concessionaires with a high dependency on locally sourced ingredients. Please consult the <u>2017 WAFM Vendor Manual</u> prior to completing this form.

Contact Person:	Title:
Business Name:	Year Established:
Address (Kitchen):	
Property Owner (Kitchen):	
Contact Person (Kitchen):	Phone #:
Address (Residence):	
City/State/Zip (Residence):	
	Evening #:
Email:	Website:
Need for Electricity (Y/N): Explain:	

Exclusivity is not guaranteed at the market. *Be Specific. *Use a separate sheet of paper if necessary	
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*Returning Vendors must specify products not previously approved	
#1 Product:	
# 2:	
# 3:	
# 4:	
#5:	
#6:	
Other:	
Vendor Statement	
Please use this section to provide any additional information that you would like us to know.	
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<u>VEN</u>	DOR CERTIFICATION
	I have read , understand , and agree to comply with the 2017 WAFM Vendor Manual
	I reside and operate my business; East of I-95 to Atlantic Ocean and within SC borders
	I understand the violations and sanctions, including; suspension and disqualification
	I understand selling privileges can be revoked by the City of Charleston at any time
	I understand that no Food Concessionaire is guaranteed acceptance and is subject
	to review by the City of Charleston
	I understand that Food Concessionaires who are accepted into the market will be
	notified by the City of Charleston as soon as a decision has been finalized
	I understand that a mandatory vendor meeting will be scheduled upon acceptance
ITEN	AS THAT MUST BE INCLUDED WITH YOUR SUBMISSION
	Completed, signed Food Concessionaire Application & Participation Agreement
	Full list of products the applicant wishes to sell
	\$20 non-refundable application fee (check/money order) payable to; City of Charleston
	*cash is not accepted
WE E	ENCOURAGE APPLICANTS TO INCLUDE ALL OF THE FOLLOWING PAPERWORK
	U HAVE NOT INCLUDED THE FOLLOWING PAPERWORK, PLEASE INDICATE THE STATUS OF EACH
ITEM,	WHETHER YOU ARE AWAITING ACCEPTANCE OR EXPECT TO HAVE IT BY A CERTAIN DATE)
	2017 SCDHEC Certificate for preparation kitchen:
	SCDA-RVC (SC Dept. of Agriculture - Registration Verification Certificate):
	2017 City of Charleston Business License:
	South Carolina Retail License:
	Certificate of General Liability Insurance of no less than; \$1,000,000.00:*Certificate Holder must be listed as; City of Charleston, 80 Broad St., Charleston, SC 29401
Ashley Food Manua guarar	City of Charleston invites eligible Food Concessionaires to participate in the 2017 West y Farmers Market season in accordance with the guidelines and criteria outlined in this Concessionaire Application & Participation Agreement and the 2017 WAFM Vendoral. While specific locations, number of canopies or frequency of participation cannot be nteed, applicants may contact Market Management at any time to discuss specific requests cial needs.
Signat	ure: Date:

*Submit Completed Form & \$20 fee by Wednesday, February 15, 2017 to:

Attn: Harrison R. Chapman, Manager City of Charleston – Office of Cultural Affairs 75 Calhoun Street, Suite 3800 - Charleston, SC 29401