## **Application & Participation Agreement**

Due: Wednesday, February 15, 2017

Harrison R. Chapman, Manager

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The Charleston Farmers Market (CFM) 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 2017 CFM Vendor Manual prior to completing this form.

Contact Person:	Title:	
Business Name:	Year Established:	
Address(Kitchen):		
City/State/Zip:		
Property Owner (Kitchen):		
Contact Person (Kitchen):	Phone #:	
Address (Residence):		
City/State/Zip:		
	_ Evening #:	
Email:	Website:	
Electrical Power Needs & Reason (Be Specific): _		
Brief description of goods (i.e. "local produce" or "baked goods"):		

List products in order of priority for which you would like to be considered to sell.		
Exclusivity is not guaranteed at the CFM.  *Be specific.		
* Use a separate sheet of paper if necessary		
*Returning vendors must specify products not previously approved		
#1 Product:		
# 2:		
# 3:		
# 4:		
#5:		
#6:		
Other:		
<u>Vendor Statement</u>		
Vendor Statement  *Please use this section to provide any additional information that you would like us to know.		

<b>VEN</b>	ENDOR CERTIFICATION	
	I have <b>read, understand</b> , and <b>agree</b> to comply with the & <b>Regulations</b> and <b>On-Site Operation Guidelines</b>	<b>2017 CFM Vendor Manual</b> including; <b>Rule</b>
	I reside and operate my business; East of I-95 to Atlantic	Ocean and within SC borders
	I understand the violations and sanctions, including susp	ension and disqualification
	I understand selling privileges can be revoked by the Cit	y of Charleston at any time
	I understand that <b>no Food Concessionaire vendor is</b> review by the City of Charleston Office of Cultural A	2
	Food Concessionaire vendors that are accepted into the Charleston Office of Cultural Affairs as soon as a decision	·
	I understand that a mandatory vendor meeting will be scl	heduled upon acceptance
ITEM	EMS THAT MUST BE INCLUDED WITH YOUR SUBMISSI	ION
	Completed, signed Food Concessionaire Application & I	Participation Agreement
	Full list of products the applicant wishes to sell	
	\$20 non-refundable application fee (check or money order	er) made payable to; City of Charleston
	*cash is not accepted	
WE 1	E ENCOURAGE APPLICANTS TO INCLUDE ALL OF THE	FOLLOWING PAPERWORK
	YOU HAVE NOT INCLUDED THE FOLLOWING PAPERWORK, PLEA IETHER YOU ARE AWAITING ACCEPTANCE OR EXPECT TO HAVE I	
	2017 SCDHEC Certificate for preparation kitchen:	
	SCDA-RVC (SC Dept. of Agriculture - Registration Ver	rification Certificate):
	2017 City of Charleston Business License:	
	South Carolina Retail License:	
	Certificate of General Liability Insurance of no less than *Certificate Holder must be listed as; City of Charleston	
in the Agree from OCA from partice a special	e City of Charleston Office of Cultural Affairs (OCA) invite the 2017 CFM in accordance with the guidelines and criterine treement. While we anticipate the CFM to continue m construction projects on sites adjacent to Marion Square CA remains committed to ensuring the continuing success of m Food Concessionaire vendors from the 2016 season tricipated in past seasons on a space-available basis. While specific frequency of participation cannot be guaranteed, appare to discuss specific requests or special needs.	a outlined in this Application & Participation to face additional space constraints arising and based on the park's overall capacity, the this vital resource. We welcome submissions as well as eligible vendors who have not ecific locations, a specific number of tents and
Signa	gnature:	Date:
	*SUBMIT COMPLETED FORM & \$20 FEE BY V	VEDNESDAY, FEB. 15, 2017 TO:

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